KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

PA Number:	PA16170C	Report Date:	4/21/2016 12:40 PM
Status:	Submitted		

Agency/Facility Information

Department ID:	26	Department Type:	POLICE
Agency Name:	Arlington Police Dept.	Agency Number:	TX2200100
Agency Phone:	8178042782	Agency Address:	620 W. Division St.
Agency City:	Arlington	Agency County:	Tarrant
Agency State:	TX	Agency Zip:	76011

Director Information

Director Salutation:

Chief

Director First Name:

Will

Director Middle Name:

Director Last Name:

Johnson

Reporter Name: Curtis Petties

Reporter Email: Curtis.Petties@arlingtontx.gov

Location / Custody Information

Where did the event causing the death occur?

Street Address: 1727 Oak Village Blvd

City: Arlington

County: Tarrant

What type of custody/facility was the Decedent in at the time of death:

Type of Custody:

Police Custody (pre-booking)

Specific type of custody/facility:

Specific Type of Custody/Facility:

Hospital/Infirmary

Custody Type Facility:

What was the time and date of the deceased's entry into the law enforcement facility where the death occurred (mm/dd/yyyy hh:mm AM/PM):

Entry Date Time:

Entry Date Time N/A: ✓

Where did the death occur?

Death Location: At medical facility

Death Location Elsewhere:

Decedent Information

Identity of Deceased

First Name: Cornelius

Middle Name:

Last Name: Towns

Suffix:

Date of Birth: 3/6/1969 Sex: Male

Ethnicity: African-American

Date/Time of Death (mm/dd/yyyy hh:mm AM/PM):

Death Date and Time: 3/28/2016 1:46 AM

Date/Time of Custody (arrest, incarceration) (mm/dd/yyyy hh:mm AM/PM):

Date/Time of Custody or Incident:

3/27/2016 11:10 PM

Manner / Cause of Death

Has a medical examiner or coroner conducted an evaluation to determine a cause of death?

Medical Examiner/Coroner Evaluation?:

No, evaluation pending

What was the manner of death? (select only one)

Manner of Death:

Accidental injury to self

Manner of Death Description:

Death Reason:

Injuries only

Medical Cause of Death:

Medical Cause of Death:

Unknown

Had the decedent been receiving treatment for the medical condition that caused the death after admission to your jail's jurisdiction?

Medical Treatment:

Not Applicable

If death was an accident, homicide or suicide, who caused the death?

Who caused the death?:

Deceased

Death Causer Other:

If a weapon caused the death, what type of weapon caused the death? (mark all that apply)

Type of Death Weapon:

Not Applicable

Was the cause of death the result of a pre-existing medical condition or did the decedent develop the condition after admission?

Pre existing medical condition?:

Not Applicable; cause of death was accidental injury, intoxication, suicide or homicide

If death was an accident, homicide or suicide, what was the means of death?

Means of Death:

Other

General Information

What were the most serious offense(s) with which the deceased was (or would have been) charged with at the time of death?

Offense 1:

Assualt Family Household member/Impede breath or circulation

Offense 2:

Offense 3:

Were the Charges::

Not filed at time of death

What were the types of charges or reason for contact?

Type of Offense:

Injuries of Decedent

Injured By: Injured by Self
Accident

At any time during the incident and/or entry into the law enforcement facility, did the decedent:

Appear intoxicated (alcohol or drugs):	Yes	Exhibit any mental health problems?:	
Exhibit any medical problems?:			

At any time during the incident and/or entry into the law enforcement facility, did the decedent:

Threaten the officer(s) involved:	No	Resist being handcuffed or arrested?:	No
Try to escape/flee from custody:	No	Grab, hit or fight with the officer(s):	No

Other Behavior:

Specify Other Behavior:

Use weapon threaten/assault officer(s):	0

Was the deceased under restraint in the time leading up to the death or the events causing the death?

Under Restraint:

Yes

Summary of Incident

Summary of How the Death Occurred: (max. 30,000 characters)

Summary:

On Sunday, March 27, 2016, officers were dispatched to the Intown Suites located at 1727 Oak Village Blvd, Arlington, Texas concerning a domestic disturbance. Upon the officer's arrival, they observed a male, Mr. Cornelius Towns, who was fully nude standing over the railing of the third floor balcony and requesting officers to shoot him. Officers gave Mr. Towns commands to "get down," but he ignored them. While the officers were awating assistance from additonal officers, Mr. Towns stretched his right leg out and placed it on an air conditioning unit that was affixed to the exterior of the hotel which was approximately 5 or 6 feet from the railing where he placed his left foot. Officers immediately ran to the second floor and requested dispatch

to have Emergency Medical Service enroute. Once the officers made contact with Mr. Towns, they noticed that he was slumped backwards in a seated position leaning against the second floor railing and breathing with his eyes closed. Officers opted not to move Mr. Towns because they were unaware if he sufferd a spinal injury from his fall. Officers were concerned that if Mr. Towns regained consciousness, he could have possibly become combative, therefore; they handcuffed his arms in front of him to aviod moving him and potentially causing further injury. Once Emergency Medical Services arrived, they treated and transported Mr. Towns to a local hospital. Officers followed the ambilance and reamined present at the hospital. Mr. Towns later died from his injuries.