

0515514

2020MMCO2424AMB

2141

ARREST / NOTICE TO APPEAR

3. Request for Warrant  
4. Request for Capias  
5. Juvenile Referral

1

JUVENILE

AD M I N I S T R A T I O N	OBTS Number	Agency ORI Number <b>0500200</b>	Agency Name <b>Boca Raton Police Department</b>	Agency Report Number (N.T.A.'s only) <b>3 / 2 / 2020-003572</b>
D E F E N D A N T	Charge Type: Check as many as apply.	<input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		If Weapon Seized Enter Type <b>Hands, Feet, Fist, Teeth</b>
	Location of Arrest (Including Name of Business)	Location of Offense (Business Name, Address)		
C O D E D E	<b>873 PARKSIDE CIRCLE N BOCA RATON 33486</b>		<b>873 PARKSIDE CIR N, BOCA RATON, FL 33486</b>	
	Date of Arrest <b>03/13/2020</b>	Time of Arrest <b>19:02</b>	Booking Date <b>03/13/2020</b>	Booking Time <b>21:42</b>
J U V E N I L E	Name (Last, First, Middle) <b>COHEN, BENJAMIN HAROD</b>		Alias (Name, DOB, Soc. Sec. #, Etc.)	
	Race W - White B - Black	Sex <b>M</b>	Date of Birth <b>01/14/1988</b>	Height <b>6'00</b>
C H A R G E	Weight <b>200</b>	Eye Color <b>BROWN</b>	Hair Color <b>BROWN</b>	Complexion <b>MEDIUM</b>
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)		Marital Status <b>D</b>	Religion <b>NONE</b>
C H A R G E	Local Address (Street, Apt. Number)	City	State	Zip
	<b>350 SE 2ND ST 1401, FORT LAUDERDALE, FL 33301</b>			
C H A R G E	Permanent Address (Street, Apt. Number)	City	State	Zip
	<b>350 SE 2ND ST 1401, FORT LAUDERDALE, FL 33301</b>			
C H A R G E	Business Address (Name, Street)	City	State	Zip
C H A R G E	D/L Number, State <b>C500068880140 / FL</b>	INS Number	Place of Birth (City, State) <b>MANHATTAN, NY,</b>	Citizenship <b>US</b>
	Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth
C H A R G E	Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth
	<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other: _____		Name (Last, First, Middle)	
C H A R G E	Address (Street, Apt. Number)		City	State
C H A R G E	Notified by: (Name)	Date	Time	JUVENILE DISPOSITION
	Released To: (Name)	Date	Time	1. Handled/Processed within Department and Released 2. TOT JAC 3. Incarcerated
C H A R G E	The above address was provided by <input type="checkbox"/> defendant and/or <input type="checkbox"/> defendant's parents. The child and/or parent was told to keep the Juvenile Court Clerk's Office (Phone 355-2526) informed of any change of address.			Grade
	Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Description of Property		Value of Property
C H A R G E	Drug Activity	S. Sell	R. Smuggle	K. Disperse/Distribute
	N. N/A	B. Buy	D. Deliver	M. Manufacture/Produce/Cultivate
C H A R G E	P. Possess	T. Traffic	E. Use	Z. Other
	Drug Type	N. N/A	A. Amphetamine	B. Barbiturate
C H A R G E	C. Cocaine	E. Heroin	H. Hallucinogen	M. Marijuana
	O. Opium/Deriv.	S. Synthetic	P. Paraphernalia/Equipment	U. Unknown
C H A R G E	Charge Description <b>DOMESTIC BATTERY</b>			Statute Violation Number <b>784.03(1a)</b>
	Drug Activity	Drug Type	Amount / Unit	Offense #
C H A R G E	Charge Description <b>RESIST OR OBSTRUCT OFFICER WITHOUT VIOLENCE</b>			Statute Violation Number <b>843.02</b>
	Drug Activity	Drug Type	Amount / Unit	Offense #
C H A R G E	Charge Description			Statute Violation Number
	Drug Activity	Drug Type	Amount / Unit	Offense #
I N T A K E	Health / Apparent Physical Condition of Defendant <b>GOOD</b>		Any knowledge of the following: <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries	
	Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> Posted Bond <input type="checkbox"/> South County Mental Health		PROPERTY - Received By <b>PHILLIPS</b>	
N O T I C E	Transported By <b>PHILLIPS</b>		Date Transported <b>03/13/2020</b>	Time Transported <b>21:33</b>
	<input type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court <input checked="" type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.		Location (Court, Room) <b>South County 200 W Atlantic Ave Delray Beach, FL 33444</b>	
T O A P P E A R	I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED BY THIS NOTICE TO APPEAR, THAT I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.			
	Signature of Defendant (or Juvenile and Parent/Custodian)		Date Signed	
A D M I N	HOLD for Other Agency		Signature of Arresting Officer <b>PHILLIPS, J.</b>	Name Verification (Printed by Arrestee)
	<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other		Name of Arresting Officer (Print) <b>PHILLIPS, J.</b>	ID.# <b>824</b>
I N	Inside Designation	ID.#	Pouch #	Transporting Officer <b>PHILLIPS</b>
				ID.# <b>824</b>
		Agency <b>BRPD</b>		Witness here if subject signed with an "X".

No Photo Available

SCANNED

APR 14 2020

PROBABLE CAUSE AFFIDAVIT

1. Arrest 3. Request for Warrant  
2. N.T.A. 4. Request for Capias

1

JUVENILE

A D M I N I S T R A T I V E	OBTS Number		Agency ORI Number <b>FL 0500200</b>		Agency Name <b>BOCA RATON POLICE DEPARTMENT</b>		Agency Report Number <b>3   2   2020-003572</b>		
	Charge Type: Check as many as apply. <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony		<input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor		<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Special Notes:		
D E F E N D A N T	Name (Last, First, Middle) <b>COHEN, BENJAMIN HAROD</b>				Alias		Race <b>W</b>	Sex <b>M</b>	Date of Birth <b>01/14/1988</b>
	Charge Description <b>843.02 RESIST OR OBSTRUCT OFFICER WITHOUT VIOLENCE</b>		Charge Description		Charge Description		Charge Description		
V I C T I M	Victim's Name (Last, First, Middle) <b>STATE OF FLORIDA,</b>				Race		Sex		Date of Birth
	Local Address (Street, Apt. Number) (City) (State) (Zip)				Phone		Address Source		
Business Address (Name, Street) (City) (State) (Zip)				Phone		Occupation			
<p>The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe that the above named Defendant committed the following violation of law.</p> <p>The Person taken into custody ...</p> <p><input type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.</p> <p><input type="checkbox"/> confessed to _____ admitting to the below facts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the <u>13</u> day of <u>March</u>, <u>2020</u> at <u>19:02</u> (Specifically include facts constituting cause for arrest.)</p> <p>On 3/13/20 at approximately 1817 hours, I was dispatched to 873 Parkside Circle N. reference a physical altercation between the victim, Lindsay Turner, and the defendant (Turner's fiancé), Benjamin Cohen. The dispatch notes advised that the "caller was screaming" and the "boyfriend was hitting".</p> <p>Upon my arrival, Turner was sitting near the front door to the residence while Cohen was sitting in his car which was parked in the street. When I approached the driver's side door of Cohen's vehicle, he cracked the window just enough to talk. I told Cohen to turn off the car. When he did not follow my commands, I explained to Cohen that I was conducting my investigation. He asked, "am I being charged"? I then told Cohen to "shut off your car and step out". He did not comply. I explained to Cohen I was "trying to conduct investigation and you are not letting me do that right now" and that was against Florida State Statute. I told him to "step out of the vehicle and shut off the car", two more times. I asked Cohen to step out of the vehicle and shut of the car approximately 5 times and he still did not comply. At that point, Cohen said, "I don't speak English" and rolled up his window.</p> <p>Once additional officers arrived on scene, I spoke with the victim Lindsay Turner. Turner explained she was standing in the road; next the Cohen's car and they were having a verbal argument. Turner said Cohen eventually exited the vehicle and pushed her in the chest. She said Cohen, out of frustration, then threw his phone across the yard. She explained when she attempted to pick it up, Cohen grabbed her by the wrist and forcefully took the phone from her. Turner was able to call 911 while Cohen had a hold of her against her will. Note, Turner's bracelets fell off her wrists and were still in the street where the altercation took place.</p> <p>Cohen eventually exited the vehicle and spoke with me about the incident. He said he originally didn't get out of the car because he was scared because everyone was yelling</p>									
<p>SWORN AND SUBSCRIBED BEFORE ME</p> <p><u>GREEN, KENNETH JOHN</u> <u>735</u> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)</p> <p><u>03/13/2020</u> DATE</p> <p><u>PHILLIPS, JEFFREY (824)</u> SIGNATURE OF ARRESTING / INVESTIGATING OFFICER</p> <p><u>PHILLIPS, JEFFREY (824)</u> NAME OF OFFICER (PLEASE PRINT)</p> <p><u>03/13/2020</u> DATE</p>									
								PAGE 1 OF 2	

PROBABLE CAUSE AFFIDAVIT  
SUPPLEMENT

1. Arrest  
2. N.T.A. 3. Request for Warrant  
4. Request for Capias

1

JUVENILE

A D M I N	OBTS Number	Agency Name		Agency Report Number	
	Agency ORI Number <b>FL 0500200</b>	<b>BOCA RATON POLICE DEPARTMENT</b>		<b>3   2   2020-003572</b>	
Charge Type: Check as many as apply. <input type="checkbox"/> 1. Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other					Special Notes:

D E F	Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
	<b>COHEN, BENJAMIN HAROD</b>		<b>W</b>	<b>M</b>	<b>01/14/1988</b>

at him and he thought he had the coronavirus. I asked Cohen what happened for me to get called out there. He explained that he and Lindsay were screaming at each other over text messages that Lindsay's mom sent him. He went on to say he handed Lindsay his phone through the window so she could read text messages. He said when she began to walk away with the phone, he exited the vehicle and grabbed the phone from her hands.

Based on my investigation and the statements which Turner made, I found that Benjamin Cohen was in direct violation of F.S.S. 741.28 - Domestic Battery - when he intentionally struck Lindsay Turner by pushing in the chest with both hands then grabbed her by the wrist against her will. Turner's bracelets were found on in the street where the altercation occurred. I also found Cohen to be in direct violation of F.S.S. 843.02 - Resisting Without Violence - after he obstructed the lawful execution of my legal duty by not following my commands when I told him (approximately 5 times) to exit the vehicle.

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A D M I N I S T R A T I V E	SWORN AND SUBSCRIBED BEFORE ME	
	<b>GREEN, KENNETH JOHN</b>	<b>PHILLIPS, JEFFREY (824)</b>
	NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)	SIGNATURE OF ARRESTING / INVESTIGATING OFFICER
	<b>03/13/2020</b>	NAME OF OFFICER (PLEASE PRINT)
	DATE	DATE
		PAGE 2 OF 2



**Palm Beach County Sheriff's Office – Arrests Only**

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	<input type="checkbox"/>	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	<input type="checkbox"/>	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	<input type="checkbox"/>	119.071(4)(c)	Undercover personnel.	
	<input type="checkbox"/>	119.071(2)(f)	Confidential informants (CIs).	
	<input type="checkbox"/>	119.071(2)(e)	Confession.	
Public Info. Exemptions	<input type="checkbox"/>	985.04(1)	Juvenile offender records.	
	<input type="checkbox"/>	119.071(h)(i)	Assets of a crime victim.	
	<input type="checkbox"/>	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	<input type="checkbox"/>	394.4615(7)	Mental health information.	
	<input type="checkbox"/>	119.071(4)(d)(2)(a)	Home address, telephone, Social Security number, date of birth, or photos of active/former LE personnel, spouses, and children.	
Florida Rules of Judicial Administration 2.420 (Rule of 23)	<input checked="" type="checkbox"/>	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	<input type="checkbox"/>	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	<input type="checkbox"/>	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	<input type="checkbox"/>	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

**REVIEW COMPLETED BY**

Booking Number: 2020008329	Date: 3/14/2020
	Specialist Name/ID: Joan Dunn/34073