

0527549

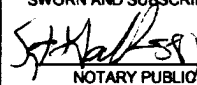
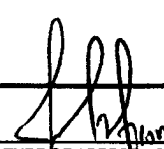
50-2021-MM-008907-ASB

1534

ARREST / NOTICE TO APPEAR

AD M I N I S T R A T I O N	OBT Number		Agency ORI Number 0500400		Agency Name Delray Beach Police Department		Agency Report Number (N.T.A.'s only) 4 0 21-014062		1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias 1		JUVENILE	
	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: UNARMED		Multiple Clearance Indicator 1							
D E F E N D A N T	Location of Arrest (Including Name of Business) 4218 PALM FOREST DR S DELRAY BEACH FL 33						Location of Offense (Business Name, Address) 4218 PALM FOREST DR S, DELRAY BEACH, FL 33445					
	Date of Arrest 11/24/2021		Time of Arrest 07:00		Booking Date 11/24/2021		Booking Time 07:10		Jail Date // ::		Jail Time // ::	
C O D E F	Name (Last, First, Middle) BERKOWITZ, EVAN ROBERT						Alias (Name, DOB, Soc. Sec. #, Etc.) Alias:					
	Race W - White B - Black O - Oriental/Asian W		Sex M		Date of Birth 11/24/1969		Height 5'11		Weight 165		Eye Color BROWN	
J U V E N I L E	Local Address (Street, Apt. Number) 4218 PALM FOREST DR S, DELRAY BEACH, FL 33445		(City) FL		(State) FL		(Zip) 33445		Phone (561) 927-0014		Indication of Alcohol Influence Yes <input type="checkbox"/> No <input type="checkbox"/> Unk. <input checked="" type="checkbox"/>	
	Permanent Address (Street, Apt. Number) 4218 PALM FOREST DR S, DELRAY BEACH, FL 33445		(City) FL		(State) FL		(Zip) 33445		Phone (561) 927-0014		Residence Type: 1. City 2. County 3. Florida 4. Out of State	
C H A R G E	Business Address (Name, Street) B623216694240 / FL		(City) FL		(State) FL		(Zip) 33445		Phone (561) 927-0014		Occupation	
	D/L Number, State B623216694240 / FL		Soc. Sec. Number [REDACTED]		INS Number [REDACTED]		Place of Birth (City, State) New York, NY		Citizenship US		Indication of Drug Influence Yes <input type="checkbox"/> No <input type="checkbox"/> Unk. <input checked="" type="checkbox"/>	
C O D E F	Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		1. Arrested 2. At Large 3. Felony 4. Misdemeanor 5. Juvenile		Residence Phone	
	Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		1. Arrested 2. At Large 3. Felony 4. Misdemeanor 5. Juvenile		Residence Phone	
J U V E N I L E	<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian		Name (Last, First, Middle)		Address (Street, Apt. Number)		(City)		(State)		(Zip)	
	Notified by: (Name)		Date		Time		JUVENILE DISPOSITION 1. Headed/Processed within Department and Released 2. TOT JAC 3. Incorporated					
C H A R G E	Released To: (Name)		Relationship		Date		Time					
	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.		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 N. N/A P. Possess		S. Sell B. Buy T. Traffic		R. Smuggle D. Deliver E. Use		K. Dispense/ Distribute		M. Manufacture/ Produce/ Cultivate		Z. Other	
	Drug Type N. N/A A. Amphetamine		B. Barbiturate C. Cocaine E. Heroin		H. Hallucinogen M. Marijuana O. Opium/Deriv.		P. Paraphernalia/ Equipment S. Synthetic		U. Unknown Z. Other			
C H A R G E	Charge Description RESIST/OBSTRUCT OFFICER W/O VIOLENCE						Statute Violation Number 843.02		Violation of ORD #			
	Drug Activity		Drug Type N		Amount / Unit /		Offense # 21-014062		Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	
C H A R G E	Charge Description						Statute Violation Number		Violation of ORD #			
	Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	
C H A R G E	Charge Description						Statute Violation Number		Violation of ORD #			
	Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	
I N T A K E	Health / Apparent Physical Condition of Defendant						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 Explain:					
	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 Released By Released To					
N O T I C E T O A P P E A R	Transported By						Date Transported // ::		Time Transported // ::		Other	
	<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) South County 200 W Atlantic Ave Delray Beach, FL 33444 Court Date and Time 12/23/2021 08:30:00					
A D M I N I S T R A T I O N	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) [Signature]					
	Signature of Defendant (or Juvenile and Parent/Custodian)						Date Signed 12/23/2021					
A D M I N I S T R A T I O N	HOLD for Other Agency						Signature of Arresting Officer [Signature]		Name Verification (Printed by Arresting Officer) [Signature]		I.D. # 1077	
	<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other						Name of Arresting Officer (Print) KRATZ, JOSEPH R		I.D. # 1077		Agency DBPD	
A D M I N I S T R A T I O N	Intake Deputy [Signature]		I.D. #		Pouch #		Transporting Officer [Signature]		I.D. # 1077		Agency DBPD	
	Witness here if subject signed with an "X".						PAGE 1 OF 1					

De fraa
le fono

OBT Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Copies		1	JUVENILE
A D M I N I S T R A T I V E	Agency ORI Number	Agency Name		Agency Report Number					
	FL 0500400	DELRAY BEACH POLICE DEPARTMENT		4 0 21-014062					
	Charge Type: <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:						
	Name (Last, First, Middle)						Race	Sex	Date of Birth
	BERKOWITZ, EVAN ROBERT						W	M	11/24/1969
C H A R G E S	Charge Description				Charge Description				
	843.02 RESIST/OBSTRUCT OFFICER W/O VIOLENCE								
V I C T I M	Victim's Name (Last, First, Middle)						Race	Sex	Date of Birth
	State Of Florida								
	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> <div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> confessed to _____ admitting to the below facts. </div> <div> <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation. </div> </div> <p>On the <u>24</u> day of <u>November</u>, <u>2021</u> at <u>07:00</u> (Specifically include facts constituting cause for arrest.)</p> <p>The following occurred in the City of Delray Beach, Palm Beach County, State of Florida:</p> <p>On 11/24/21, the DBPD SWAT Team executed a lawful search warrant at 4218 Palm Forest Dr South. The defendant, Evan Berkowitz, exited the front door of the residence. I began to give him clear commands to walk towards me so that could detain him, while he was no more than 10 feet away from me. The defendant began walking away from me ignoring my commands. It should be noted that I was in my full DBPD SWAT Team uniform with the word "POLICE" clearly visible on multiple areas. I went to grab the defendant right arm to detain him, at which time he aggressively pulled away from me and took a bladed stance right at me to resist arrest. I immediately regained control of the defendant and escorted him to the ground, where I placed him into handcuffs.</p> <p>Based on the above stated facts, probable cause exists to charge Evan Berkowitz with one count of Resisting Without Violence pursuant to FSS 843.02.</p>									
S T A T E M E N T	SWORN AND SUBSCRIBED BEFORE ME <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">  GALLINA, GINA NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) <u>11/24/2021</u> DATE </div> <div style="width: 45%;">  SIGNATURE OF ARRESTING / INVESTIGATING OFFICER KRATZ, JOSEPH R. (1077) NAME OF OFFICER (PLEASE PRINT) <u>11/24/2021</u> DATE </div> </div>								
	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> COURT </div> <div style="width: 45%;"> STATE ATTORNEY </div> </div>								
	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> CENTRAL RECORDS </div> <div style="width: 45%;"> JAIL </div> </div>								
	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> CRIME ANALYSIS </div> <div style="width: 45%;"> P. I. O. </div> </div>								
PAGE 1 OF 1									

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.



**PALM BEACH COUNTY
SHERIFF'S OFFICE**
Florida State Statute Exemption Sheet

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"/>			
	<input type="checkbox"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2021029555

Date: 11/25/2021

Specialist Name/ID: A. Pinkney/7796