0529872 22MM 1776AMB 2092

ARREST / NOTICE TO APPEAR

1. Arrest (No Warrant) 3. Request for Warrant
6. Arrest (Warrant) 4. Request for Capias
2. N.T.A. 5. Juvenile Referral

1 JUVENILE

ADMINISTRATION

OBTS Number

Agency ORI Number	Agency Name	Agency Report Number (N.T.A.'s only)
0500200	Boca Raton Police Department	3 | 2 | 2022-002844

Charge Type: Check as many as apply — ☐ 1. Felony ☐ 2. Traffic Felony ☒ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

If Weapon Seized — Enter Type: UNARMED

Multiple Clearance Indicator

Location of Arrest (Including Name of Business): [redacted]

Location of Offense (Business Name, Address): [redacted]

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
03/03/2022	06:21	03/03/2022	08:12			N/A

DEFENDANT

Name (Last, First, Middle): WEILAND, MAXIMILIAN ANTON PATRICK

Alias: Alias (Name, DOB, Soc. Sec. #, Etc.)

Race (W - White, I - American Indian, B - Black, O - Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	M	09/12/2001	5'10	130	BROWN	BLACK	LIGHT	Thin

Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description): TATT L STOMACH / CROSS

Marital Status: S — Religion:

Indication of: Alcohol Influence ☒ Yes ☐ No ☐ Unk. — Drug Influence ☐ Yes ☒ No ☐ Unk.

Local Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Residence Type: 1. City 2. County 3. Florida 4. Out of State
1173 SW 18TH ST, BOCA RATON, FL 33486				(347) 562-8641	1

Permanent Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Address Source
1173 SW 18TH ST, BOCA RATON, FL 33486				(347) 562-8641	Arrestee

Business Address (Name, Street)	(City)	(State)	(Zip)	Phone	Occupation
				(917) 345-0792	

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
W453541013320 / FL	[redacted]		~~FLORIDA~~ Berlin Germany	USA

CO-DEF

Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	
				☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile
Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	
				☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile

JUVENILE

☐ Parent ☐ Other: ☐ Legal Custodian — Name (Last, First, Middle) — Residence Phone

Address (Street, Apt. Number) (City) (State) (Zip) — Business Phone

Notified by: (Name)	Date	Time	JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT JAC 3. Incarcerated
Released To: (Name) Relationship	Date	Time	

The above address was provided by ☐ defendant and/or ☐ 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.
☐ Yes, by: ☐ No:

School Attended — Grade

Property Crime? ☐ Yes ☒ No — Description of Property — Value of Property

CODE

Drug Activity: N. N/A P. Possess S. Sell B. Buy T. Traffic R. Smuggle D. Deliver E. Use K. Disperses/ Distribute M. Manufacture/ Produce/ Cultivate Z. Other

Drug Type: B. Barbiturate C. Cocaine E. Heroin H. Hallucinogen M. Marijuana O. Opium/Deriv. P. Paraphernalia/ Equipment S. Synthetic U. Unknown Z. Other

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #
BATTERY / DOMESTIC BATTERY	784.03(1)A1	

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
	N	/		1	☒ Y ☐ N		

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
		/			☐ Y ☐ N		

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
		/			☐ Y ☐ N		

INTAKE

Health / Apparent Physical Condition of Defendant: GOOD

Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☒ Injuries
Explain: SELF INFICTED BRUISE

Check which applies: ☐ Released O.R. ☐ Released to Parent/Guardian ☒ T.O.T. County Jail ☐ Posted Bond ☐ South County Mental Health

PROPERTY - Received By	Released By	Released To
637	637	CJ

Transported By	Date Transported	Time Transported	Other
637	03/03/2022	00:00	

MAR 04 2022 10:24 AM CLERK CIRCUIT COURT PALM BEACH COUNTY FLA

NOTICE TO APPEAR

☐ INSTRUCTION NO. 1 - Mandatory appearance in court
☒ 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

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 COMTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.

Signature of Defendant (or Juvenile and Parent/Custodian) — Date Signed

No Photo Available

ADMIN

HOLD for Other Agency

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other

Intake Deputy — I.D. # — Pouch #

Signature of Arresting Officer: OFC K COHEN 637

Name of Arresting Officer (Print)	I.D. #
COHEN, K. L.	637

Transporting Officer	I.D. #	Agency
OFC K COHEN	637	BRPD

Name Verification (Printed by Arrestee) (PRINT)

SCANNED MAR 04 2022

Witness here if subject refuses to sign

DOMESTIC VIOLENCE PROBABLE CAUSE
AFFIDAVIT
Palm Beach County

ADMIN

Date / Time	Agency ORI Number	Agency Name	Agency Report Number
03/03/2022 08:12	FL FL0500200	BOCA RATON POLICE DEPARTMENT	3 | 2 | 2022-002844

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
WEILAND, MAXIMILIAN ANTON PATRICK		W	M	09/12/2001

CHRG

Charge Description
784.03(1) BATTERY / DOMESTIC BATTERY

VICTIM

[redacted]

Business Address (Name, Street) (City) (State) (Zip) Phone Occupation

ADDITIONAL INFORMATION

	Written	Taped	Oral
DEFENDANT'S STATEMENTS:	☐	☐	☒
VICTIM'S STATEMENTS:	☐	☐	☒

OBSERVATIONS OF VICTIM (PHYSICAL & EMOTIONAL):
UPSET

RELATIONSHIP BETWEEN VICTIM & SUSPECT
MOTHER/SON

		YES	NO	
PHOTOGRAPHS:	Scene:	☒	☐	
	Victim:	☒	☐	
911 CALL:		☐	☒	CALLER:
WEAPON USED:		☐	☒	TYPE:
WITNESSES:		☐	☒	(If YES, attach witness list)
INJURIES:		☒	☐	
MEDICAL TREATMENT:		☐	☒	
AT:	Scene:	☐	☒	PARAMEDICS:
	Hospital:	☐	☒	PHYSICIAN(S) / HOSPITAL:
ACT COMMITTED IN PRESENCE OF MINOR(S):		☐	☒	NAMES/AGES:
H. R. S. NOTIFIED:		☒	☐	
VICTIM PREGNANT:		☐	☒	
VIOLATION OF RESTRAINING ORDER:		☐	☒	CASE #:
PRIOR HISTORY OF DOMESTIC VIOLENCE:		☒	☐	
ALCOHOL OR DRUGS INVOLVED:		☒	☐	

NARR

On 03/03/22 at approximately 0549 hours I responded to the area of [redacted] in reference to a disturbance. Upon arrival I met with a neighbor who wanted to remain anonymous but stated that a male exited the house at [redacted] yelling and cursing, he also heard what he thought to be glass breaking.

STATE OF FLORIDA
COUNTY OF PALM BEACH

Appeared before me, _____ personally known to me, who, being first duly sworn, says that the facts above, based upon my investigation, are true.

SIGNATURE OF ARRESTING OFFICER

Sworn to and subscribed to before me this 3 day of March, 2022.

CARNEY, DANIEL CHARLES
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O.

DOMESTIC VIOLENCE PROBABLE CAUSE
AFFIDAVIT
Palm Beach County
Narrative Continuation

ADMIN

Date / Time		
03/03/2022 08:12		
Agency ORI Number	Agency Name	Agency Report Number
FL FL0500200	BOCA RATON POLICE DEPARTMENT	3 | 2 | 2022-002844

NARRATIVE

Officer McHugh and I went over to [redacted] to further investigate. As we approached the front door a female exited the residence crying and speaking to someone on the phone. I asked the female (Victim 1) if she was ok and she stated she had just had a fight with [redacted] Maximilian "Max" Weiland.

V1 explained that "Max" came home drunk and passed out on the couch. V1 went to wake him up because he was supposed to fly to Louisiana today to visit his sister and he refused to get up and dressed. After telling "Max" several times to wake up and get ready he stood up and went outside. Max began yelling and cursing outside and then picked up a ceramic plant holder and hit the front door (possibly the "glass break" sound). Max came back inside and went to his bed and laid down. V1 went into the room and again told Max he had to get up or else he was going to miss his flight. V1 began to remove the blanket from the bed and Max sat up and pushed [redacted] from behind (upper shoulder area) causing her to fall forward and hit her forehead on the footpost of the bed. V1 had a visible lump on her forehead.

I asked V1 where Max was and she stated in his bed sleeping. V1 allowed Officer McHugh and I to enter the residence to make contact with Max. I began to explain to Max why we were there, because a neighbor was concerned about the yelling and cursing outside. I ask Max what occurred today and he didn't want to tell me. (It should be noted that I immediately smell an odor of alcohol emitting from his breath as he spoke.) Max continued to be evasive in his conversation and play on his phone.

I was able to see that Maximilian did not have any visible injuries and was refusing to cooperate any further. Due to V1's statement and visible injury, I believe that Maximilian did intentionally push his V1 against her will which is in violation of F.S.S 784.03(1) Simple Battery (Domestic).

Officer McHugh provided V1 with the Victim Notification form (confidential selected), Victims' Right to Confidentiality Form (signed) and a Domestic Violence Pamphlet with case number. Officer McHugh also took photos of V1. All of which was placed into BRPD for evidence.

While in transport to the Boca Raton Police Department, Maximilian began to intentionally bang his head on the plastic/metal partition inside my marked vehicle (#327) in a back and forward motion. I redirected to the Boca ER due to possible self-inflicted injuries caused by this behavior. Maximilian was discharged from Boca Regional Hospital, and I transported him to BRPD and then to Palm Beach County Jail.

STATE OF FLORIDA
COUNTY OF PALM BEACH

Appeared before me, _____ personally known to me, who, being first duly sworn, says that the facts above, based upon my investigation, are true.

SIGNATURE OF ARRESTING OFFICER

Sworn to and subscribed to before me this 3 day of March, 2022.

CARNEY, DANIEL CHARLES
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O.

VICTIM NOTIFICATION FORM

This form must be completed when one of the following crime(s) has been committed:

- Homicide (Ch. 782)
- Sexual Offense (Ch. 794)
- Attempted Murder
- Attempted Sexual Offense
- Stalking (F.S. 784.048)
- Domestic Violence - (This includes any assault, aggravated assault, battery, aggravated battery, sexual assault, sexual battery, stalking, aggravated stalking or any criminal offense resulting in physical injury or death of one family member or household member by another, who is or was residing in the same single dwelling.)

Upon completion, this form must accompany the booking paperwork.
If applying for a warrant, attach this form to the filing packet.

SUSPECT/OFFENDER: Maximilian Weiland COURT CASE/WARRANT#: _____ (FOR WARRANTS USE ONLY)

1. Incident Report#: 2022-002844 Agency: Boca Raton PD
   Offense: DDM / AAB
   Suspect/Offender: Maximilian Weiland
   D.O.B. 9.12.01 Race: W Sex: M

2. Warrant#(s): _____

3.a. [redacted]

b. Victim's next of kin, friend or neighbor: _____
   Address: _____
   City: _____ State: _____ Zip: _____
   Home#: _____ Work#: _____ Other: _____

NOTE: PURSUANT TO F.S. 119.07, THE CONTENTS OF THIS FORM MAY BE SUBJECT TO CONFIDENTIALITY.

Victim/Relation Notification Waiver and Confidential Information Request.

(check applicable boxes)

☐ Waiver: I choose not to be notified when the arrestee is released from custody.

☒ Confidential: Pursuant to F.S.119.07 (3)(S)1, I request that the address and telephone number on this form be kept confidential (applicable only to sexual battery, aggravated child abuse, aggravated stalking, harassment, aggravated battery, or domestic violence cases).
Other confidentiality provisions of Florida State Statutes may also be applicable

Signature of person waiving notification: [redacted]

Printed name of person waiving notification [redacted]

Officer's Name: Det. K_____ I.D.# 637 Date: 3/3/22

White/Corrections or State Attorney (Warrant Application) Yellow/Warrants Section Pink/Central Records

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	☐	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	☐	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	☐	119.071(4)(c)	Undercover personnel.	
	☐	119.071(2)(f)	Confidential informants (CIs).	
	☐	119.071(2)(e)	Confession.	
Public Info. Exemptions	☐	985.04(1)	Juvenile offender records.	
	☐	119.071(h)(i)	Assets of a crime victim.	
	☐	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	☐	394.4615(7)	Mental health information.	
	☐	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)	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	☐	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	☐			
	☐			
	☐			
	☐			
	☐			
Other	☐		Other:	
	☐		Other:	

REVIEW COMPLETED BY

Booking Number: 2022005731	**Date:** 3/4/2022
	Specialist Name/ID: Chantel Daniels/30347