

0525277

50-2021-MM-006019-AMB

3892

ARREST / NOTICE TO APPEAR Juvenile Referral Report		1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	Juvenile
OBT Number		1		N
Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06-21096733
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		Weapon Seized / Type <input checked="" type="checkbox"/> 1. Yes <input type="checkbox"/> 2. No		Multiple Clearance Indicator 1
Location of Arrest (Including Name of Business) 9969 EQUUS CIR, BOYNTON BEACH, FL, 33472		Location of Offense (Business Name, Address) 9969 EQUUS CIR, BOYNTON BEACH, FL, 33472		
Date of Arrest 08/16/2021	Time of Arrest 1937	Booking Date 08/16/2021	Booking Time	Jail Date Jail Time Location of Vehicle
Name (Last, First, Middle) Emran, Mohammed,				
Alias (Name, DOB, Soc. Sec. #, Etc.)				
Race W - White (- American Indian B - Black (- Oriental/Asian	Sex M	Date of Birth 02/28/1956	Height 5'07	Weight 180
Eye Color BROWN		Hair Color BROWN	Complexion MEDIUM	Build MEDIUM
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) N/A		Marital Status Married	Religion ISLAM	Indication of Alcohol Influence Y <input type="checkbox"/> N <input checked="" type="checkbox"/> Unk <input type="checkbox"/>
Local Address (Street, Apt. Number) 9969 Equus Circle, Boynton Beach, FL 33472		City Boynton Beach	State FL	Zip 33472
Permanent Address (Street, Apt. Number)		City	State	Zip
Business Address (Name, Street)		City	State	Zip
D/L Number, State E565540560680, FL		Soc. Sec. Number	INS Number	Place of Birth (City, State) CHITTAGOND, BALGLADESH
Citizenship USA		Co-Defendant Name (Last, First, Middle)		
Co-Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth
Co-Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth
Parent Legal Custodian Other		Residence Phone		
Address (Street, Apt. Number)		City	State	Zip
Business Phone		Notified by: (Name)		
Date		Time	Juvenile Disposition 1. Handled/ processed within Dept. and Released. 2. TOT HRS / DYS 3. Incarcerated	
Released To: (Name)		Relationship		Date
The above address 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 (Phone 355-2526) informed of any change of address. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)		School Attended		Grade
Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Description of Property		Value of Property
Drug Activity S. Sell 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. Synthetics	U. Unknown Z. Other	
Charge Description DOMESTIC BATTERY		Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number 784.03 (1) (A) (1)
Drug Activity N		Drug Type N	Amount / Unit	Offense # 21096733
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number
Drug Activity N		Drug Type N	Amount / Unit	Offense #
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number
Drug Activity N		Drug Type N	Amount / Unit	Offense #
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number
Drug Activity N		Drug Type N	Amount / Unit	Offense #
Location (Court, Room Number, Address)		Court Date and Time Month 08 Day 16 Year 2021 Time 9:41 AM		
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 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) 08/16/2021				
HOLD for other Agency Name		Signature of Arresting Officer D/S G. MARTINEZ		Name Verification (Printed by Arrestee) D/S G. MARTINEZ
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicide <input type="checkbox"/> Intoxicated		Name of Arresting Officer (Print) D/S G. MARTINEZ		ID # 37526
Pouch #		Transporting Officer D/S G. MARTINEZ		ID # 37526
		Agency PBSO		Witness here if subject signed with an "X"
DISTRIBUTION: WHITE - COURT COPY		GREEN - STATE ATTORNEY		YELLOW - AGENCY
PINK - AGENCY		GOLD - DEFENDANT (N.T.A.'s ONLY)		

OBTS Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	Juvenile	N	
ADMIN	Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE			Agency Report Number 06- 21096733					
	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:		
CHARGES	Name (Last, First, Middle) Emran, Mohammed.			Alias		Race W		Sex M		Date of Birth 02/28/1956	
	Charge Description DOMESTIC BATTERY			784.03 (1) (A) (1)		Charge Description					
VICTIM	Victim's Name (Last, First, Middle) Begum, Jahan, Ara			Race H		Sex F		Date of Birth 01/01/1968			
	Local Address (Street, Apt. Number) 9969 Equus Cir, Boynton Beach, FL 33472			(City) (State) (zip)		Phone (561) 543-0607		Address Source FL DL			
	Business Address (Name, Street)			(City) (State) (zip)		Phone ()		Occupation UNKNOWN			
<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 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>16</u> day of <u>AUG</u> 20<u>21</u> at <u>7:20</u> <input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)</p> <p>On 8/16/21 at approximately 1916 hours while on uniformed patrol in a marked Palm Beach County Sheriff's Office Patrol vehicle, I responded to 9969 Equus Cir, Boynton Beach, FL, 33472 in reference to a domestic dispute.</p> <p>Upon arrival, I spoke with Mohammed Emran (son) who showed me a recording from his sister's phone about today's incident.</p> <p>While watching the video Mohammed Emran (father) was pointing his finger at this wife Jahan Begum. They were arguing about their son and that Begum was defending the son. After doing so Mohammed open hand slapped his wife on the right side of the face. I observed Jahan's face and did not see any marks and she denied medical treatment offered. The video of the incident and photos that were taken of Jahan were uploaded into PBSO DART database.</p> <p>Based on the above facts I have probable cause to arrest Mohammed for Domestic battery pursuant to FSS 784.03 (1) (A) (1).</p>											
ADMINISTRATIVE	STATE OF FLORIDA COUNTY OF PALM BEACH			D/S G. MARTINEZ							
	(Signature of Arresting/Investigative Officer)										
	The foregoing instrument was sworn to or affirmed and subscribed before me this <u>16</u> day of <u>Aug</u> 20 <u>21</u> by <u>D/S G. MARTINEZ</u> (Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced <u>RAMOS #32395</u>										
	Notary Public, Clerk of Court, Officer (F.S.S. 117.10)										

Palm Beach County Sheriff's Office
DOMESTIC VIOLENCE/DATING VIOLENCE SUPPLEMENTAL PROBABLE CAUSE FORM
(Submit this form with the original Probable Cause affidavit)

Suspect: Emran, Mohammed, DOB: 02/28/1956 Case #: 21096733

Victim: Begum, Jahan, Ara DOB: 01/01/1968 Race: H Sex: F

Relationship between Victim and Defendant: MARRIED

Photographs: Scene Yes ☒ No ☐ Victim Yes ☒ No ☐ Defendant Yes ☒ No ☐

911 Call: ☒ Yes ☐ No Caller: NATHIFA NAHR

Weapon Used: ☐ Yes ☒ No Type: _____

Witness: ☒ Yes ☐ No Name: _____

Victim Pregnant: ☐ Yes ☒ No If yes, _____ weeks _____ months

Injuries: ☐ Yes ☒ No Description: _____

Medical Treatment: ☐ Yes ☒ No

At Scene: ☐ Yes ☒ No Paramedics: _____

At Hospital: ☐ Yes ☒ No Hospital: _____ Physician: _____

Are Children Living in Home? ☒ Yes ☐ No DCF Notified? ☒ Yes ☐ No

Name: SUHAAN EMRAN

DOB: 12 / 28 / 2009

Name: _____

DOB: / /

Name: _____

DOB: / /

Injunction ☐ Yes ☒ No

Case #: _____

No Contact Order ☐ Yes ☒ No

Case #: _____

Alcohol or Drugs ☐ Yes ☒ No Unknown

Prior History of Domestic/Dating Violence ☐ Yes ☒ No

Defendant's Statements ☐ Yes ☒ No If yes, written _____ recorded _____ oral _____

First words Defendant said when you responded to scene: OKAY

Victim's Statements ☒ Yes ☐ No If yes, written _____ recorded _____ oral _____

First words Victim said when you responded to scene: HE HIT ME

Did the Victim contact anyone other than police within an hour of the incident regarding the incident?

☐ Yes ☒ No If yes, name: _____ phone () _____ - _____

Observations of Victim (Physical & Emotional): UPSET

☒ Upset ☐ Crying ☐ Fearful ☐ Hysterical ☐ Afraid ☐ Calm ☐ Nervous

Complained of pain ☐ Other _____

Victim Contact Information:

Local Address: 9969 Equus Cir, Boynton Beach, FL 33472

Phone: Home (561) 543-0607 Work () _____ - _____ Cell () _____ - _____

Employer: _____

Name of Relative: _____ Phone () _____ - _____

Address: _____

VICTIM NOTIFICATION FORM

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

- Homicide (Ch. 782)
- Attempted Murder
- Stalking (F.S. 784.048)
- Sexual Offense (Ch. 794)
- Attempted Sexual Offense

- **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.**

1. Incident Report #: 21096733 Agency: PBSO
Offense: DOMESTIC BATTERY
Suspect/Offender: Emran, Mohammed,
D.O.B. 02/28/1956 Race: W Sex: M

2. Warrant # (s): _____

3.a. Victim's name: Begum, Jahan, Ara D.O.B. 01/01/1968 Race: H Sex: F
Address: 9969 Equus Cir
City: Boynton Beach, FL 33472
Home #- (561) 543-0607 Work #: 0 Other: _____

b. Victim's next of kin, friend or neighbor: _____
Address: _____
City: _____
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:** I request the information on this form be kept confidential (applicable only to sexual battery, stalking, child abuse, harassment or domestic violence cases).

Signature of person waiving notification: _____

Printed name of person waiving notification: Begum, Jahan, Ara

Deputy's Name: D/S G. MARTINEZ I.D.# 37526 Date: 08/16/2021
White/Corrections or State Attorney (Warrant Application) Yellow/Warrants Section Pink/Central Records
PBSO 00029A REV. 4199

SUSPECT/OFFENDER: Emran, Mohammed,
(FOR WARRANTS USE ONLY)
COURT CASE/WARRANT#.



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

REVIEW COMPLETED BY

Booking Number: 2021020378

Date: 8/17/21

Specialist Name/ID: J. Beck/9007