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ARREST / NOTICE TO APPEAR

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

Agency ORI Number: 0500800 Agency Name: West Palm Beach Police Department Agency Report Number (N.T.A.'s only): 9, 4 2021-0001355

Charge Type: 1. Felony 2. Traffic Felony 3. Misdemeanor 4. Traffic Misdemeanor 5. Ordinance 6. Other

Location of Arrest (including Name of Business): 380 TRINITY PL West Palm Beach, FL Location of Offense (Business Name, Address): 380 TRINITY PL, WEST PALM BEACH, FL 33401

Date of Arrest: 01/26/2021 Time of Arrest: 23:06 Booking Date: Booking Time: Jail Date: Jail Time: Location of Vehicle:

Name (Last, First, Middle): PIGEON, NICOLE ELISE Alias: Alias (Name, DOB, Sec. Sec. #, Etc.):

Race: W - White 1 - American Indian B - Black O - Asian Sex: F Date of Birth: 06/01/1990 Height: 5'03 Weight: 135 Eye Color: Hazel Hair Color: BROWN Complexion: FAIR Build: Me6

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description):

Local Address (Street, Apt. Number) (City) (State) (Zip): 6 VERSAGGI PL, SAINT AUGUSTINE, FL 32080 Home Phone: (904) 914-1991

Permanent Address (Street, Apt. Number) (City) (State) (Zip): 6 VERSAGGI PL, SAINT AUGUSTINE, FL 32080 Mobile Phone: Address Source: VERBAL

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

DL Number, State: P250625907010 / FL Sec. Sec. Number: DNS Number: Place of Birth (City, State): FARMINGTON HILLS, US Citizenship: US

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

Parent  Other: Name (Last, First, Middle): Residence Phone:

Legal Custodian Address (Street, Apt. Number) (City) (State) (Zip): Business Phone:

Notified by: (Name) Date: Time: JUVENILE DISPOSITION 1. Held/Processed within Department and Released 2. TOT IAC 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.

School Attended: Grade:

Property Crime?  Yes  No Description of Property: Value of Property:

Drug Activity: N. N/A S. Sell B. Buy P. Possess R. Snaggle D. Deliver E. Use K. Disperse/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/Heroin P. Paraphernalia/Equipment S. Synthetic U. Unknown Z. Other

Charge Description: BATTERY - OFFICER, FIREFIGHTER, MEDICAL CARE PROVIDER Statute Violation Number: 784.07(2B) Violation of ORD #: 1000

Drug Activity: Drug Type: Amount / Unit: Offense #: Counts: Domestic Violence: Warrant / Capias Number:

Charge Description: ASSAULT - LAW ENFORCEMENT OFFICER Statute Violation Number: 784.07 2A 51 Violation of ORD #: 010

Drug Activity: Drug Type: Amount / Unit: Offense #: Counts: Domestic Violence: Warrant / Capias Number:

Charge Description: RESIST OFFICER WITH VIOLENCE Statute Violation Number: 843.01 Violation of ORD #: 1000

Drug Activity: Drug Type: Amount / Unit: Offense #: Counts: Domestic Violence: Warrant / Capias Number:

Health / Apparent Physical Condition of Defendant: Any knowledge of the following:  Mental  Physical  Misconduct  Deception  Injury

Check which applies:  Released O.R.  Released to Parent/Guardian  T.O.T. County Jail  PROPERTY - Received By: Released By: Released To:

Transported By: Date Transported: Time Transported: Other:

INSTRUCTION NO. 1 - Mandatory appearance in court  INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.

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: (904) 914-1991

I CONSENT TO RECEIVE REMINDERS OF COURT DATE(S) AND TIMES FOR THIS CASE BY TEXT MESSAGE TO THE NUMBER IDENTIFIED HERE. I UNDERSTAND THAT STANDARD TEXT MESSAGE RATES MAY APPLY AND THAT I MAY REVOKE THIS CONSENT VIA THE TEXT MESSAGE SYSTEM IF I CHOOSE.

Signature of Arresting Officer: KATHY 2132 Name of Arresting Officer (Print): SMITH, KATHERINE I.D. #: 02132

Name Verification (Printed by Arrestee): (PRINT) SCANNED JAN 27 2021

HOLD for Other Agency: Signature of Arresting Officer: KATHY 2132 Name Verification (Printed by Arrestee): (PRINT) SCANNED JAN 27 2021

Dangerous  Resisted Arrest  Suicidal  Other Name of Arresting Officer (Print): SMITH, KATHERINE I.D. #: 02132

Signature of Transferring Officer: KATHY 2132 Agency: Witness here if subject signed with an "X":

PAGE 1 of 2

**ARREST / NOTICE TO APPEAR  
Additional Charge List**

Agency ORI Number <b>0500800</b>		Agency Name <b>West Palm Beach Police Department</b>				Agency Report Number (N.T.A.'s only) <b>9   4   2021-0001355</b>					
C O D E	Drug Activity	S. Sell	R. Seaggle	K. Dispense/ Distribute	M. Manufacture/ Produce/ Cultivate	Z. Other	Drug Type	B. Barbiturate	H. Hallucinogen	F. Paraphernalia/ Equipment	U. Unknown
	N. N/A	B. Buy	D. Deliver	E. Use			N. N/A	C. Cocaine	M. Marijuana	S. Synthetic	Z. Other
C H A R G E	Charge Description <b>RESIST/OBSTRUCT OFFICER W/O VIOLENCE</b>						State Violation Number <b>843.02</b>		Violation of ORD # <b>OK</b>		
	Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Citation Number		Bond		
			/		<b>1</b>	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N					

**NOT A CERTIFIED COPY**

**SCANNED  
JAN 27 2021**

PROBABLE CAUSE AFFIDAVIT

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

1 JUVENILE

Agency ORI Number <b>FL 0500800</b>	Agency Name <b>WEST PALM BEACH POLICE DEPARTMENT</b>	Agency Report Number <b>9   4   2021-0001355</b>
Charge Type: Check as many as apply. <input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Special Notes:

Name (Last, First, Middle) <b>PIGEON, NICOLE ELISE</b>	Alias	Race <b>W</b>	Sex <b>F</b>	Date of Birth <b>06/01/1990</b>
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Charge Description <b>784.07(2B) BATTERY - OFFICER, FIREFIGHTER, MEDICAL CARE</b>	Charge Description <b>843.01 RESIST OFFICER WITH VIOLENCE</b>
Charge Description <b>784.07 ASSAULT - LAW ENFORCEMENT OFFICER</b>	Charge Description <b>843.02 RESIST/OBSTRUCT OFFICER W/O VIOLENCE</b>

Victim's Name (Last, First, Middle) <b>SMITH, KATHERINE</b>	Race	Sex	Date of Birth
Local Address (Street, Apt. Number) <b>600 BANYAN BLVD, WEST PALM BEACH, FL 33401</b>	(City)	(State)	(Zip)
Business Address (Name, Street)	(City)	(State)	(Zip)
Phone <b>(561) 822-1900</b>	Address Source	Occupation	

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.

The Person taken into custody ...

committed the below acts in my presence.  was observed by \_\_\_\_\_ who told \_\_\_\_\_ that he/she saw the arrested person commit the below acts.

confessed to \_\_\_\_\_ admitting to the below facts.  was found to have committed the below acts, resulting from my (described) investigation.

On the 26 day of January, 2021 at 23:06 (Specifically include facts constituting cause for arrest.)

On Tuesday, January 26, 2021 I responded to 380 Trinity Place in reference to a woman making suicidal threats. Upon arrival, myself and 3 other officers made contact with the caller Nicole Pigeon (w/f 6-1-90). Pigeon stated, she was concerned about a homeless woman who was making threats to harm herself.

We made contact with the subject and she stated she didn't want to harm herself she made those statements because she is homeless and wanted somewhere to sleep tonight. WPB Dispatch advised us that the subject had a warrant for her arrest out of Palm Beach County.

While conducting our investigation with the subject Pigeon became very belligerent. Yelling that we have no degrees and that we were not here to help the subject. The subject advised us that she does not know Pigeon and just met her tonight outside of the Canopy Hotel.

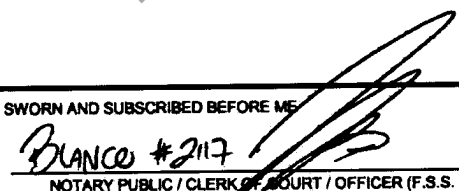

Officer Blanco walked over to Pigeon in attempt to speak with her and calm her down. At this time Pigeon began walking towards the other subject interfering our investigation and becoming verbally aggressive with all officers on scene. Pigeon was advised to go back inside her hotel in which she stated she would not. Pigeon then began bowing up towards me yelling "bring it on, bring it on I'll beat your ass bitch."

Pigeon then pulled her right hand back and made the motion as if she was going to strike me in the face. At this time, I was in fear that Pigeon was in fact going to strike me. Her motion caused me to move my head back out of striking distance.

Pigeon was brought to the ground where she resisted arrest. Pigeon crossed her arms and placed them under her body. Officer Fisher gave Pigeon multiple commands to stop resisting that she was under arrest. Pigeon was given lawful commands to give us her

SWORN AND SUBSCRIBED BEFORE ME	<u>Kat St 2132</u> SIGNATURE OF ARRESTING / INVESTIGATING OFFICER
<u>Blanco #2117</u> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)	<u>SMITH, KATHERINE (02132)</u> NAME OF OFFICER (PLEASE PRINT)
<u>01/26/21</u> DATE	<u>01/26/2021</u> DATE

SCANNED  
JAN 27 2021  
PAGE 1 OF 2  
P. I. O.

OBTs Number	<b>PROBABLE CAUSE AFFIDAVIT SUPPLEMENT</b>		1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	<b>1</b>	JUVENILE	
A D M I N	Agency ORI Number <b>FL 0500800</b>	Agency Name <b>WEST PALM BEACH POLICE DEPARTMENT</b>	Agency Report Number <b>9   4   2021-0001355</b>				
N	Charge Type: Check as many as apply <input checked="" type="checkbox"/> 1. Felony <input 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) <b>PIGEON, NICOLE ELISE</b>			Race <b>W</b>	Sex <b>F</b>	Date of Birth <b>06/01/1990</b>	
P R O B A B L E C A U S E S T A T E M E N T	<p>arms in which she would not. Pigeons arms were pried from under her body and was placed in handcuffs.</p> <p>Pigeon was escorted to Officer Fisher`s marked patrol vehicle where her cuffs were double locked. Pigeon was searched and placed in the back of Officer Fisher`s patrol vehicle.</p> <p>Based on the above facts Probable Cause exists for Nicole Pigeon F.S.S 784.07 (Assault on an LEO) and 843.02 (Resisting/Obstruct W/O Violence).</p> <p>A few minutes after being secured in Ofc Fisher`s vehicle, Ofc Fisher and Ofc Shirey had noticed that Pigeon had slipped her hands out of the handcuffs. Ofc Fisher and Ofc Shirey then removed her from the rear seat, after Ofc Fisher gave very clear verbal instructions as to what he needed her to do (see his supplement for further). As Ofc Shirey and Ofc Fisher began to remove Pigeon from the vehicle, she continued to resist arrest by tensing her arms and bracing her legs against the prisoner compartment of Ofc Fisher`s vehicle in an attempt to prevent us from removing her from the vehicle so we could safely re-apply handcuffs. As she continued to resist arrest, we escorted her to the ground again where Ofc Shirey restrained her right arm until she could be placed in handcuffs. As they tried to re-apply handcuffs to Pigeon while she was on the ground, she bit the outer portion of Ofc Shirey`s lower right leg, leaving a red scratch, as documented by photograph.</p> <p>Based on the previous facts, I find probable cause to charge Nicole Pigeon with (1) count of Battery on a Law Enforcement Officer (FSS 784.072(2B) and (1) count of Resisting Arrest with Violence (FSS 843.01).</p> <p>Pigeon was transported to the Palm Beach County Jail for housing.</p>						
A D M I N I S T R A T I V E	SWORN AND SUBSCRIBED BEFORE ME  <b>BLANCO #2117</b> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) <b>01/26/21</b> DATE		 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER <b>SMITH, KATHERINE (02132)</b> NAME OF OFFICER (PLEASE PRINT) <b>01/26/2021</b> DATE				SCANNED <b>JAN 27 2021</b>
						PAGE <b>2 OF 2</b>	



**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: 2021002177	Date: 1/27/2021
	Specialist Name/ID: J. Beck/9007