

21 MM - 6768 AMB

7009

ARREST / NOTICE TO APPEAR  
Juvenile Referral Report

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

OBTS Number	Agency ORI Number <b>FLO 500000</b>		Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>		Agency Report Number (N.T.A.'s only) <b>06- 21-106778</b>	
Charge Type: Check as many as apply.		<input type="checkbox"/> 1. Felony	<input checked="" type="checkbox"/> 3. Misdemeanor	<input type="checkbox"/> 5. Ordinance	Weapon Seized / Type <b>2</b> 1. Yes 2. No	
Location of Arrest (Including Name of Business) <b>10192 Breezaway PL</b>		Boca Raton FL 33428		Location of Offense (Business Name, Address) <b>10192 Breezaway PL</b>		Boca Raton FL 33428
Date of Arrest <b>09/15/21</b>	Time of Arrest <b>0211</b>	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle

Name (Last, First, Middle) <b>Glielmi Nicole Raye</b>		Alias (Name, DOB, Soc. Sec. #, Etc.)				
Race W - White I - American Indian B - Black O - Oriental/Asian	Sex <b>F</b>	Date of Birth <b>07/15/2000</b>	Height <b>5'02</b>	Weight <b>100</b>	Eve Color <b>BROWN</b>	Hair Color <b>BROWN</b>
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)		Marital Status <b>Divorced</b>	Religion <b>Catholic</b>	Indication of Alcohol Influence Drug Influence Y <input type="checkbox"/> N <input type="checkbox"/> Unk. <input type="checkbox"/>		
Local Address (Street, Apt. Number) <b>1440 Nw 14th Ave</b>		(City) <b>Boca Raton, FL 33486</b>	(State)	(Zip)	Phone <b>( ) 5618629286</b>	
Permanent Address (Street, Apt. Number)		(City)	(State)	(Zip)	Residence Type: 1. City 2. County 3. Florida 4. Out of State <b>2</b>	
Business Address (Name, Street)		(City)	(State)	(Zip)	Address Source <b>FL DL</b>	
D/L Number, State <b>G445636007550, FL</b>		Soc. Sec. Number	INS Number		Place of Birth (City, State) <b>Boca Raton FL</b>	
Citizenship <b>US</b>						

Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large	<input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile
Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large	<input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile

<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other	Name (Last) (First) (Middle)	Residence Phone
Address (Street, Apt. Number) (City) (State) (Zip)		Business Phone
Notified by: (Name)	Date	Time
Released To: (Name)	Relationship	
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
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No	Description of Property	Value of Property

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. Synthetics	U. Unknown Z. Other
Charge Description <b>Trespassing</b>		Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number <b>810.09(1)(b) 2B</b>		Violation of ORD #				
Drug Activity <b>N</b>	Drug Type <b>N</b>	Amount / Unit	Offense # <b>21-106778</b>	Warrant / Capias Number		Bond				
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number		Violation of ORD #				
Drug Activity	Drug Type	Amount / Unit	Offense # <b>21-106778</b>	Warrant / Capias Number		Bond				
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number		Violation of ORD #				
Drug Activity	Drug Type	Amount / Unit	Offense # <b>21-106778</b>	Warrant / Capias Number		Bond				
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number		Violation of ORD #				
Drug Activity	Drug Type	Amount / Unit	Offense # <b>21-106778</b>	Warrant / Capias Number		Bond				

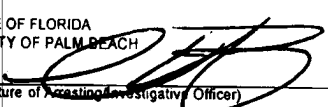
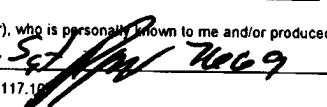
Location (Court, Room Number, Address) <b>Criminal Justice Complex - 3228 Gun Club Road, West Palm Beach FL. 33406</b>	
Court Date and Time Month <b>OCTOBER</b> Day <b>19TH</b> Year <b>2021</b> Time <b>0830</b> AM <input checked="" type="checkbox"/> PM	
I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED 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) <b>09/15/21</b>	
Date Signed	

HOLD for other Agency	Signature of Arresting Officer <b>N. VALENTIN</b>	Name Verification (Printed by Arresting Officer) <b>SCANNED</b>
Name: <input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other:	Name of Arresting Officer (Print) <b>N. VALENTIN</b>	(PRINT)
Intake Deputy <b>Span 8/107</b>	I.D. # <b>31847</b>	Pouch #
Transporting Officer <b>N. VALENTIN</b>		ID # <b>31847</b>
Agency <b>PBSO</b>		Witness here if subject signed with an -X" <b>1</b> of <b>1</b>

09/15/21 0525935

1534

7669

OBTS Number		<b>PROBABLE CAUSE AFFIDAVIT</b>		1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	Juvenile	
ADMIN	Agency ORI Number <b>FLO 500000</b>	Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>	Agency Report Number <b>06- 21-106778</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:	
DEF	Name (Last, First, Middle) <b>Glielmi Nicole Rave</b>			Alias	Race W	Sex F	Date of Birth 07/15/2000	
	Charge Description <b>Trespassing</b>		810.09(1) 2B	Charge Description				
CHARGES	Charge Description		Charge Description					
	Charge Description		Charge Description					
VICTIM	Victim's Name (Last, First, Middle) <b>Khan Asif</b>			Race O	Sex M	Date of Birth 03/17/1967		
	Local Address (Street, Apt. Number) <b>10192 Breezeway Place</b>		(City) <b>Boca Raton, FL 33428</b>	(State)	(zip)	Phone <b>( ) 5615587574</b>	Address Source <b>FL DL</b>	
	Business Address (Name, Street)		(City)	(State)	(zip)	Phone <b>( )</b>	Occupation <b>UK</b>	
<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. The Person taken into custody</p> <p><input checked="" 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>15</u> day of <u>September</u> 20<u>21</u> at <u>0758</u> <input checked="" type="checkbox"/> A.M. <input type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)</p> <p><b>On Wednesday September 15, 2021 at approximately 0013 hours, I was dispatched to 10192 Breezeway PL in unincorporated Boca Raton FL 33428 in reference to a white female causing a disturbance and the homeowner would like her to be trespassed.</b></p> <p><b>Upon my arrival, I made contact with a white female in front of the residence who was later identified as Nicole Rave Glielmi by her Florida Driver's License (G445636007550). Nicole was inside the residence of her ex-boyfriend, Muhammed Khan causing a disturbance. Nicole was asked to leave multiple times by Asif Khan who is the father of Muhammed Khan and the owner if the residence which she refused to. Nicole become verbally aggressive with Muhammed Khan. We were finally able to convince Nicole to leave only after advising her that she was trespassed from the residence for one year beginning today (09/15/2021) and expiring on 09/15/2022. She was also advised that if she was found back on the property she could be arrested for trespass after warning. Asif Khan, who is the owner of the residence came out and verbally warned Nicole Rave Glielmi that she is no longer welcomed at the residence in my presence.</b></p> <p><b>Nicole Rave Glielmi was entered into the FIR system.</b></p> <p><b>On Wednesday September 15, 2021 at approximately 0158 hours, I was dispatched to 10192 Breezeway PL in unincorporated Boca Raton FL 33428 in reference to Nicole Rave Glielmi returning back to the residence and causing a disturbance.</b></p> <p><b>Upon my arrival, I observed Nicole Rave Glielmi on the front lawn of the residence which she was previously trespassed from earlier that day. Nicole Rave Glielmi did knowingly and willfully, not having been authorized, licensed, or invited to enter or remain in a structure or conveyance, the property of Asif Khan, refuse to depart from said structure or conveyance after being warned to depart by the owner, lessee, or person authorized by the owner or lessee, contrary to Florida Statute 810.08(1). (2 DEG MISD)</b></p> <p><b>Nicole Rave Glielmi was placed under arrest and put in the rear of my marked PBSO patrol vehicle with her seatbelt buckled. My in-car camera was activated in order to periodically monitor her during his transport to Palm Beach County Jail. Nicole Rave Glielmi was transported without incident.</b></p>								
<p>STATE OF FLORIDA COUNTY OF PALM BEACH</p> <p style="text-align: center;"> <b>N.VALENTIN</b> (Signature of Arresting/Investigative Officer)</p> <p>The foregoing instrument was sworn to or affirmed and subscribed before me this <u>15</u> day of <u>SEPTEMBER</u> 20<u>21</u> by <u>N.VALENTIN</u></p> <p>(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced <u>KNOWN</u></p> <p><u>SGT MORRIS #8075</u>  Notary Public, Clerk of Court, Officer (F.S.S. 117.10)</p>								
<p><b>SCANNED</b> PAGE <b>SEP 15 2021</b> OF 1</p>								

ADMINISTRATIVE PROBABLE CAUSE STATEMENT



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

REVIEW COMPLETED BY

Booking Number: 2021023008	Date: 9/15/2021
	Specialist Name/ID: M. Tooks #8557

SCANNED  
SEP 15 2021