

0513908

20206 M2

ARREST / NOTICE TO APPEAR  
Juvenile Referral Report

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

Juvenile  N

OBT 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>06-20-022809</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		Weapon Seized / Type 2 1. Yes 2. No		Multiple Clearance Indicator 1						
Location of Arrest (Including Name of Business) <b>500 N CONGRESS AVE, LAKE PARK FL 33403 (TARGET)</b>				Location of Offense (Business Name, Address) <b>500 N. Congress Ave, Lake Park, FL 33403</b>						
Date of Arrest <b>01/05/2020</b>	Time of Arrest <b>2329</b>	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle				
Name (Last, First, Middle) <b>Richer, Shane, Cory</b>				Alias (Name, DOB, Soc. Sec. #, Etc.)						
Race W - White I - American Indian B - Black O - Oriental/Asian <b>W</b>	Sex <b>M</b>	Date of Birth <b>3/5/1995</b>	Height <b>600</b>	Weight <b>166</b>	Eye Color <b>Blue</b>	Hair Color <b>Brown</b>	Complexion <b>Med</b>	Build <b>MED</b>		
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) <b>"INDEFINITELY" RIGHT BICEP</b>				Marital Status <b>Divorced</b>		Religion <b>NONE</b>		Indication of Alcohol Influence Drug Influence Y <input type="checkbox"/> N <input type="checkbox"/> Unk. <input type="checkbox"/>		
Local Address (Street, Apt. Number) (City) (State) (Zip) <b>3410 Waterlily Ct #101, Palm Beach Gardens, FL, 33410</b>				Phone <b>(321) 604-1448</b>		Residence Type: 1. City 2. County 3. Florida 4. Out of State				
Permanent Address (Street, Apt. Number) (City) (State) (Zip)				Phone		Address Source <b>VERBAL</b>				
Business Address (Name, Street) (City) (State) (Zip)				Phone		Occupation				
D/L Number, State <b>R260783950850,</b>		Soc. Sec. Number		INS Number		Place of Birth (City, State) <b>MELBOURNE, FL</b>		Citizenship <b>USA</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)		Address (Street, Apt. Number) (City) (State) (Zip)		Residence Phone ( ) ( ) ( ) 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	Time			
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 type="checkbox"/> No		Description of Property		Value of Property						
Drug Activity N. N/A S. Sell P. Possess T. Traffic	S. Sell B. Buy D. Deliver E. Use	R. Smuggle	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>GRAND THEFT (RETAIL)</b>			Counts <b>1</b>	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number <b>812.014(2)(c)(1)</b>		Violation of ORD #			
Drug Activity <b>N</b>	Drug Type <b>N</b>	Amount / Unit	Offense # <b>20-022809</b>	Warrant / Capias Number		Bond <b>2,000</b>				
Charge Description			Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation of ORD #			
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond				
Charge Description			Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation of ORD #			
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond				
Charge Description			Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation of ORD #			
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond				
Location (Court, Room Number, Address) <b>Criminal Justice Complex, 3228 Gun Club Road, West Palm Beach, FL 33406 - Ph: (561) 688-4600</b>										
Court Date and Time Month <input type="checkbox"/> Day <input type="checkbox"/> Year <input type="checkbox"/> Time <input type="checkbox"/> 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)				Date Signed <b>01/05/2020</b>						
HOLD for other Agency Name:		Signature of Arresting Officer <b>Eric Van Hoosear</b>		Name Verification (Printed by Arrestee)						
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal	<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:	Name of Arresting Officer (Print) <b>Eric Van Hoosear</b>		I.D. # <b>34276</b>		(PRINT)				
Intake Date <b>01/05/2020</b>		Pouch #	Transporting Officer <b>Eric Van Hoosear</b>	ID # <b>34276</b>	Agency <b>PBSO</b>	PAGE <b>1</b> OF <b>1</b>				

OBTS Number		<b>PROBABLE CAUSE AFFIDAVIT</b>		1. Arrest	3. Request for Warrant	1	Juvenile	N	
Agency ORI Number	Agency Name	Agency Report Number							
<b>FL0 50000</b>	<b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>	<b>06- 20-022809</b>							
Charge Type: Check as many as apply.	1. Felony 2. Traffic Felony	3. Misdemeanor 4. Traffic Misdemeanor	5. Ordinance 6. Other	Special Notes:					
Name (Last, First, Middle)	Alias			Race	Sex	Date of Birth			
<b>Richer, Shane, Cory</b>				W	M	3/5/1995			
Charge Description	Charge Description								
<b>GRAND THEFT (RETAIL)</b>	<b>812.014(2)(c)(1)</b>								
Charge Description	Charge Description								
Victim's Name (Last, First, Middle)	Race			Sex	Date of Birth				
<b>Target, ,</b>									
Local Address (Street, Apt. Number)	(City)	(State)	(zip)	Phone	Address Source				
				( )					
Business Address (Name, Street)	(City)	(State)	(zip)	Phone	Occupation				
<b>500 N Congress Ave, Lake Park FL 33403</b>				<b>(516 ) 352-2388</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 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 checked="" type="checkbox"/> confessed to <b>Eric Van Hoosear</b> 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>5</u> day of <u>JANUARY</u> 20<u>20</u> at <u>2200</u> <input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)</p>									
<p><b>On January 5th, 2020 I responded to the Target store located at 500 N Congress Ave in the Town of Lake Park in reference to an employee, Shane Richer, who had taken merchandise from the store. Upon speaking with the store's loss prevention officer Mark Lilley, I was advised that they had been investigating several incidents of stolen merchandise involving Richer.</b></p> <p><b>Lilley provided a detailed account of the thefts that they began to notice on 12/26/2019 up to 1/5/2020 with a total loss of \$2483.75 worth of items. Upon reviewing the documents of their investigation I read Richer his Miranda Rights per card, he waived his rights and agreed to answer my questions about the alleged thefts. Richer reviewed the theft investigation form provided by Lilley and admitted to the thefts and stated that he conducted the thefts while he was working his shifts by pretending to ring up the items and placing them in bags. He would then take the items to his vehicle to take home.</b></p> <p><b>Based on the information provided and the statements given by the witness and offender I determined that probable cause exists for the violation of Florida State Statute 812.014(2)(c)(1) Grand Theft. Richer was arrested, handcuffed, checked for tightness and fit, and transported to County Jail without incident.</b></p>									
<p>STATE OF FLORIDA  COUNTY OF <u>PALM BEACH</u></p> <p><u>Eric Van Hoosear</u>  (Signature of Arresting/Investigative Officer)</p> <p>The foregoing instrument was sworn to or affirmed and subscribed before me this <u>5th</u> day of <u>January</u> 20<u>20</u> by <u>Eric Van Hoosear</u>  (Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced <u>Known LEO</u></p> <p><u>Josh Gonzalez 18414 Dale 1834D</u>  Notary Public, Clerk of Court, Officer (F.S.S. 117.10)</p>									
								PAGE 1 OF 1	



**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: 2020000469	Date: 1/6/2020
	Specialist Name/ID: Gammage/5660