

25 mm 8464MB

09/20/23

1803

Marsey's Law CVI FL Const. Art. 1 § 16(d)

Check if Supplement is Attached

### ARREST / NOTICE TO APPEAR Juvenile Referral Report

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

Juvenile

OBTS Number		Agency ORI Number FLO: 5 0 0 0 0 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 0 6 - 25099505	
Charge Type: Check as many as apply		1. Felony <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/>		3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/>		5. Ordinance <input type="checkbox"/> 6. Other <input type="checkbox"/>	
Location of Arrest (including Name of Business) 212 Caribe Court Greenacres, FL 33463		Date of Arrest 09/22/25		Time of Arrest 2332		Booking Date	
Name (Last, First, Middle) BAZYAN ASMAA		Sex W F		Date of Birth 08/12/1989		Height 5'03	
Race W - White I - American Indian B - Black O - Oriental/Asian		Weight 150		Eye Color BROWN		Hair Color BROWN	
Complexion MEDIUM		Build SMALL		Marital Status Married		Religion Muslim	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)		Indication of: Alcohol Influence <input type="checkbox"/> Drug Influence <input type="checkbox"/>		Y <input type="checkbox"/> N <input type="checkbox"/> Unk <input type="checkbox"/>		Residence Type: 1. City <input type="checkbox"/> 2. County <input type="checkbox"/> 3. Florida <input type="checkbox"/> 4. Out of State <input checked="" type="checkbox"/>	
Local Address (Street, Apt. Number) (City) (State) (Zip)		Permanent Address (Street, Apt. Number) (City) (State) (Zip)		Phone		Address Source FL DL	
Business Address (Name, Street) (City) (State) (Zip)		Phone		Occupation		Citizenship USA	
D/L Number, State B250010897920, FL		INS Number		Place of Birth (City, State) Jerusalem, Israel		Citizenship USA	
Co-Defendant (Last, First, Middle)		Race		Sex		Date of Birth	
Co-Defendant (Last, First, Middle)		Race		Sex		Date of Birth	
<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other		Name (Last) (First) (Middle)		Residence Phone ( ) ( )		Business Phone ( ) ( )	
Address (Street, Apt. Number) (City) (State) (Zip)		Notified by (Name)		Date		Time	
Released to (Name)		Relationship		Juv. Disposition 1. Handled/Processed within Dept. and Released. 2. TOT HRS/DYS 3. Incarcerated		School Attended	
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 (561) 355-6511) informed of any change of address.		<input type="checkbox"/> Yes, by (Name) <input checked="" type="checkbox"/> No (Reason)		Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Description 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. Synthetic		U. Unknown Z. Other		Statute Violation Number 784.03(1a1)	
Charge Description Simple Battery (Domestic)		Counts 1		Domestic Violence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N		Violation of ORD #	
Drug Activity N		Drug Type N		Amount / Unit		Offense # 25099505	
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number	
Drug Activity		Drug Type		Amount / Unit		Offense #	
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number	
Drug Activity		Drug Type		Amount / Unit		Offense #	
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number	
Drug Activity		Drug Type		Amount / Unit		Offense #	
Location (Court, Room Number, Address)		Court Date and Time Month Day Year Time A.M. <input type="checkbox"/> P.M. <input type="checkbox"/>		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		09/22/25	
Signature of Defendant (or Juvenile and Parent/Custodian)		Date Signed		I consent to receive text reminders of court date(s) and times for this case by automated technology to the mobile number identified above. 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	
HOLD for other agency		Signature of Arresting Officer X		Name Verification (Printed by Arrestee) (PRINT) SEP 23 AM 12:55		PAGE 1 OF 1	
Name of Arresting Officer (Print) D/S J. Fowler		I.D. # 45064		Transporting Officer D/S J. Fowler		I.D. # 45064	
Agency PBSO		Witness here if subject signed with an 'X'		Witness here if subject signed with an 'X'		Witness here if subject signed with an 'X'	

NO BOND

NOT RECORDED

FILED PBC - GUN CLUB  
25 SEP 23 AM 7:40

PROBABLE CAUSE AFFIDAVIT

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

1

Juvenile 0

OBTS Number	Agency ORI Number <b>FLO 500000</b>		Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>	Agency Report Number <b>06- 25099505</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

Name (Last, First, Middle) <b>BAZYAN ASMAA</b>	Alias <b>772803278</b>	Race <b>W</b>	Sex <b>F</b>	Date of Birth <b>08/12/1989</b>
---	---------------------------	------------------	-----------------	------------------------------------

CHARGES	<b>Simple Battery (Domestic)</b>	<b>784.03(1a1)</b>
---------	----------------------------------	--------------------

VICTIM	Victim's Name (Last, First, Middle) <b>Bazian Alaa</b>	Race <b>W</b>	Sex <b>F</b>	Date of Birth [REDACTED]
	Local Address (Street, Apt. Number) (City) (State) (zip) Phone	Address Source <b>VERBAL</b>		
	Business Address (Name, Street) (City) (State) (zip) Phone	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 22 day of September, 2025 at 2332  A. M.  P. M. (Specifically include facts constituting cause for arrest.)

**Marsy's Law CVI**  
FL Const Art 1 § 16(b)

On the above date and time, deputies were dispatched to the aforementioned location, in reference to the complainant finding a juvenile female that ran away from home. Furthermore, the complainant advised that the juvenile was bleeding from the nose.

Upon arrival, I made contact with the juvenile in question, Alaa Bazian. Alaa explained that she was at her house, located at [REDACTED] when she and her mother, Asmaa Bazyan got into a verbal argument about her talking to a boy on her phone. It was at this point that both Alaa and Asmaa got into an altercation over the phone, with Asmaa attempting to take the phone away from her.

Once Asmaa got the phone, Alaa attempted to leave the residence, with Asmaa proceeding to push her and sit on her chest. During this, Alaa stated that her mother "bit" her on her nose, with Alaa leaving the residence on foot after the altercation. While speaking with Alaa, I observed cut/ mark of injury on her nose, being consistent with her claim of injury.

I then spoke with Asmaa, who explained that she and Alaa got into a verbal argument over Alaa talking to a boy on the phone. When Asmaa attempted to take the phone away from Alaa, Alaa began to push her, resulting in Asmaa slapping her hand.

The two (2) then proceeded to get into a physical altercation over the cell phone when Alaa told her that she wanted to call 9-1-1. During the altercation, Asmaa stated that both she and Alaa began to sit on each other, and she somehow bit Alaa on the nose during the altercation, which is consistent with Alaa's statement and mark of injury. It should be noted that Asmaa provided a sworn verbal statement stating that she bit Alaa's nose.

Deputies then spoke with Alaa's brother, Alladin Bazian, who explained he observed both Alaa and Asmaa push each other, following with Asmaa "pinching" Alaa on the nose.

Due to the statements provided by Alaa and Asmaa, along with the mark of injury on Alaa, consistent with the above statements, I found Asmaa to be the primary aggressor. Asmaa was subsequently placed under arrest for battery (domestic), and transported to the county jail without incident.

My agency-issued Body Worn Camera was activated on this call for service pursuant to PBSO General Order 237.07. The above is a summary of what occurred. For a more detailed and complete account, please refer to the BWC footage.

STATE OF FLORIDA  
COUNTY OF PALM BEACH  
**D/S J. Fowler** (ID #) **45064**  
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 22 day of September, 2025 by D/S J. Fowler 45064  
(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced KNOWN LEO D/S S. Davis #31812

**[Signature]**  
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)

Name (Last, First, Middle)  
**Suspect: BAZYAN ASMAA DOB: 08/12/1989 Case #: 25099505**

Name (Last, First)  
**Victim: Bazian Alaa DOB: [REDACTED] Race: W Sex: F**

**Relationship between Victim and Defendant:** \_\_\_\_\_

**Photographs: Scene**  Yes  No **Victim**  Yes  No **Defendant**  Yes  No

**911 Call:**  Yes  No **Caller:** \_\_\_\_\_

**Weapon Used:**  Yes  No **Type:** Hands/Fists/Feet

**Witness:**  Yes  No **Name:** (Last) \_\_\_\_\_ (First) \_\_\_\_\_ (Middle) \_\_\_\_\_

**Victim Pregnant:**  Yes  No **If yes,** \_\_\_\_\_ weeks \_\_\_\_\_ months

**Injuries:**  Yes  No **Description:** Abrasion/Bruise

**Medical Treatment:**  Yes  No

**At Scene:**  Yes  No **Paramedics:** \_\_\_\_\_

**At Hospital:**  Yes  No **Hospital:** \_\_\_\_\_ **Doctor:** \_\_\_\_\_

**Are Children Living in Home?**  Yes  No **DCF Notified?**  Yes  No

**Name:** \_\_\_\_\_ **DOB:** \_\_\_\_\_

**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:** \_\_\_\_\_

**Victim's Statements**  Yes  No **If yes, written**  **recorded**  **oral**

**First words Victim said when you responded to scene:** \_\_\_\_\_

**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**  **Crying**  **Fearful**  **Hysterical**  **Afraid**  **Calm**  **Nervous**

**Complained of pain**  **Other** \_\_\_\_\_

**Victim Contact Information:** (Last) Bazian (first) Alaa

**Local Address:** \_\_\_\_\_

**Phone:** [REDACTED]

**Employer:** (Name) \_\_\_\_\_ (Employer Address) \_\_\_\_\_

**Name of Relative:** (Last) \_\_\_\_\_ (First) \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Address:** \_\_\_\_\_



# Palm Beach County Sheriff's Office

Florida State Statute Exemption Sheet

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	<input type="checkbox"/>	119.071(4)(c)	Undercover personnel	
	<input type="checkbox"/>	119.071(2)(e)	Confession	
Public Info. Exemptions	<input checked="" type="checkbox"/>	FL Const. Art. I, s. 16(b)(5)	Marsy's Law – victim information shall be redacted. The term "victim" also includes the victim's lawful representative, the parent or guardian of a minor, or the next of kin of a homicide victim. The term "victim" does not include the accused (ref. page 99 of the CRTM for additional information)	1-5
	<input type="checkbox"/>	119.071(2)(j)	Home/employment telephone number, home/employment address, or personal assets of a person who has been the victim of sexual battery, aggravated child abuse, aggravated stalking, harassment, aggravated battery or domestic violence	
	<input type="checkbox"/>	119.0712(2)	Personal information contained in a motor vehicle record	
	<input type="checkbox"/>	316.650(11)	Driver information contained in a uniform traffic citation	
	<input type="checkbox"/>	119.071(4)(d)2.a.	Home addresses, telephone numbers, dates of birth, and photographs of active/former LE personnel, spouses, and children	
Florida Rules of Judicial Administration 2.420	<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"/>	(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"/>			
Other	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>	119.071 (2)(j)	The Victim's address in a Domestic Violence action on petitioner's request.	
	<input type="checkbox"/>	119.071 (3)(A), 119.071 (3)(B)(1-3C)	Security at the Jail...(Security of locations Housed at the jail).	

REVIEW COMPLETED BY

Booking Number: 2025025527	Date: 9/23/2025
	Specialist Name/ID#: MTooks #8557