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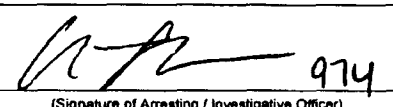

ADMINISTRATION		ARREST / NOTICE TO APPEAR Juvenile Referral Report				1. Arrest 3. Request for Warrant 2. N.T.A. 4. Request for Capias		1	Juvenile	N	
Agency ORI Number FL 0500300		Agency Name BOYNTON BEACH POLICE DEPT.			Agency Report Number 34-23-032169						
Charge Type: Check as many as Apply. <input checked="" type="checkbox"/> 1. Felony <input checked="" 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		If Weapon Seized Enter Type		Multiple Clearance Indicator							
Location of Arrest (Including Name of Business) Smoke Inn/ 1030 W Gateway Boulevard Boynton Beach, FL 33426					Location of Offense (Business Name, Address) 1030 W Gateway Boulevard Boynton Beach, FL 33426						
Date of Arrest 07/15/2023	Time of Arrest 1957	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle					
Name (Last, First, Middle) Coleman, Chase Alan											
Alias (Name, DOB, Soc. Sec. #, Etc)											
W - White B - Black	I - American Indian O - Oriental / Asian	Race W	Sex M	Date of Birth 12/03/1990	Height 6'1"	Weight 275	Eye Color Brown	Hair Color Blonde	Complexion Fair	Build Heavy	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) None visible					Marital Status Unmarried		Religion Unknown		Indication of Alcohol/Drug Influence Y N Unk <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
Local Address (Street, Apt. Number) 1103 NW 11th Street			(City) Boynton Beach	(State) FL	(Zip) 33426	Phone (972)835-6098		Residence Type 1. City 3. Florida 2. County 4. Out of State		1	
Permanent Address (Street, Apt. Number)			(City)	(State)	(Zip)	Phone		Address Source FL DL			
Business Address (Street, Apt. Number)			(City)	(State)	(Zip)	Phone		Occupation Unknown			
D/L Number, State C455101904430		Soc. Sec. Number		INS Number		Place of Birth TEXAS		Citizenship U.S.			
Co-Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile		<input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor			
Co-Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile		<input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor			
<input type="checkbox"/> Parent Name (Last) (First) (Middle)		Relationship		Residence Phone							
<input type="checkbox"/> Legal Custodian		Relationship		Residence Phone							
<input type="checkbox"/> Other		Relationship		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		Time					
The above address was 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's Office (Phone 561-355-2526) 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 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. Barbituate C. Cocaine E. Heroin	H. Hallucinogen M. Marijuana O. Opium/Deriv.	P. Paraphernalia/ Equipment S. Synthetic	U. Unknown Z. Other
Charge Description Disorderly Intoxication		Counts	Domestic Violence <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Statute Violation Number 856.011		Violation of ORD#					
Drug Activity N		Drug Type N	Amount/Unit N/A	Offense # 23-032169		Warrant/Capias Number		Bond			
Charge Description Corruption by Threat (3b)		Counts	Domestic Violence <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Statute Violation Number 838.021 3b		Violation of ORD#					
Drug Activity N		Drug Type N	Amount/Unit N/A	Offense # 23-032169		Warrant/Capias Number		Bond			
Charge Description Resisting Arrest without violence		Counts	Domestic Violence <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Statute Violation Number 843.02		Violation of ORD#					
Drug Activity N		Drug Type N	Amount/Unit N/A	Offense # 23-032169		Warrant/Capias Number		Bond			
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Yes <input type="checkbox"/> No	Statute Violation Number		Violation of ORD#					
Drug Activity		Drug Type	Amount/Unit	Offense #		Warrant/Capias Number		Bond			
<input type="checkbox"/> Instruction No. 1 Mandatory Appearance in Court		Location (Court, Room Number, Address) South County Courthouse, 200 West Atlantic Ave, Delray Beach, FL 33444									
<input type="checkbox"/> Instruction No. 2 You need not appear in Court but must Comply with instruction on reverse side.		Court Date and Time Month Day Year Time <input type="checkbox"/> A.M. <input type="checkbox"/> P.M.									
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						
HOLD for other Agency Name		Signature of Arresting Officer A. Corum			Name Verification (Printed by Arrestee) 974		I.D. # 974			Page 1 OF 1	
<input checked="" type="checkbox"/> Dangerous <input checked="" type="checkbox"/> Suicidal		<input checked="" type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other			Name of Arresting Officer (Print) A. Corum		BU#				
Intake Deputy DA Wynn		Pouch #			Transporing Officer A. Corum		I.D. # BBPD			Witness here is subject Signed with an "X".	

OBTS Number		PROBABLE CAUSE AFFIDAVIT		1 Arrest	3 Request for Warrant	1	Juvenile	N
Agency ORI Number FL 0500300		Agency Name BOYNTON BEACH POLICE DEPT.		Agency Report Number 34-23-032169				
Charge Type Check all that Apply		Special Notes						
<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				
Name (Last, First, Middle) Coleman, Chase Alan				Race W	Sex M	Date of Birth 12/03/1990		
Charge Description Disorderly Intoxication				Charge Description Corruption by Threat				
Charge Description <i>Resisting Arrest without violence</i>				Charge Description				
Victim's Name (Last, First, Middle) State of Florida				Race	Sex	Date of Birth		
Local Address (Street, Apt Number)				(City)	(State)	(Zip)	Phone	Address Source FL DL
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.								
<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								
<input type="checkbox"/> Confessed to _____ Admitting the below facts								
<input type="checkbox"/> Was found to have committed the below acts, resulting from my (described) investigation								
On The 15 Day Of July 20 23 At 1937 <input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M.								

I was dispatched to the Smoke Inn located at 1030 W Gateway Boulevard in reference to a disturbance. While en-route, dispatch advised that a black female and a white male were refusing to leave, causing a scene, and threatening the bartender. Upon arrival, contact was made with the caller W/F Sara Cassidy who is a bartender for Smoke Inn. A sworn statement was taken from CASSIDY who advised that the white male, later identified as W/M Chase Coleman, was acting belligerent towards her inside the establishment and causing a disturbance, making threats towards her and staff members. After CASSIDY issued COLEMAN a trespass warning in my presence, officers conducted a records check of COLEMAN to ensure he had no wants or warrants, which he did not. COLEMAN was instructed to coordinate a ride home as he was clearly intoxicated and not in a state to operate a motor vehicle. However, COLEMAN remained belligerent and verbally aggressive towards officers refusing to make an effort to coordinate a ride for himself. COLEMAN then proceeded to take a fighting stance, bowing up, and yelling at officers saying "let's go" in an effort to fight officers. Due to COLEMAN taking an aggressive stance, COLEMAN was placed into handcuffs (D/L and checked for tightness) as probable cause existed to charge COLEMAN with Disorderly Intoxication, pursuant to F.S.S. 856.011. It should be noted that there were also several other patrons present while COLEMAN was causing a disturbance.

While placing COLEMAN into my marked patrol vehicle, COLEMAN continued to act belligerent and make threats towards myself and Ofc. Roedel stating that he was going to "fuck us up" and "kill us". While transporting COLEMAN to BBPD for processing, COLEMAN stated to me that when he gets out he is going to "fuck me up". Due to COLEMAN's actions, he was placed into a restraint chair during processing in BBPD booking. While in booking, COLEMAN continued to act belligerent and make threats towards Ofc. Eichorst, Ofc. Wertman, Ofc. Burke, and Sgt. Jeanninton stating that when he gets out he is going to "set us all on fire". Based on the aforementioned, I also find probable cause to charge COLEMAN with Corruption by Threat, pursuant to F.S.S. 838.021.

COLEMAN was subsequently TOT to PBCJ without incident.

The foregoing instrument was sworn to or affirmed and subscribed before me		 (Signature of Arresting / Investigative Officer)	
 Notary Public, Clerk of Court, Officer (F.S.S. 117.10)		A. Corum (Print name of Arresting/Investigative Officer)	
07/15/2023 Date		07/15/2023 Date	
		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: 2023018459	Date: 7/16/2023
	Specialist Name/ID: Chantel Daniels/30347