0537850 23mm 808 MB 966

ARREST / NOTICE TO APPEAR

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

ADMINISTRATION

OBTS Number	Agency ORI Number	Agency Name	Agency Report Number (N.T.A.'s only)
	0500400	Delray Beach Police Department	4 0 23-001375

Charge Type: Check as many as apply. ☐ 1. Felony ☐ 2. Traffic Felony ☒ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

If Weapon Seized — Enter Type: UNARMED | Multiple Clearance Indicator: 3

Location of Arrest (Including Name of Business)	Location of Offense (Business Name, Address)
100 NW 22ND ST, DELRAY BEACH, FL	100 NW 22ND ST, DELRAY BEACH, FL 33444

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
01/29/2023	00:52	01/29/2023	01:02	/ / : :		

DEFENDANT

Name (Last, First, Middle): COZZA, MONIQUE — Alias (Name, DOB, Soc. Sec. #, Etc.): Alias:

Race (W - White, B - Black, I - American Indian, O - Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	F	11/20/1992	5'06	140	BROWN	BLACK	LIGHT	SMALL

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

Marital Status: S — Religion: NOT INDICA — Indication of: Alcohol Influence ☒ Yes ☐ No ☐ Unk. / Drug Influence

Local Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Residence Type: 1. City 3. Florida 2. County 4. Out of State
6112 HUNTWICK TER, DELRAY BEACH, FL 33484					1

Permanent Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Address Source
6112 HUNTWICK TER, DELRAY BEACH, FL 33484					NY DL

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

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
/			ELMHURST, NY,	United States

CO-DEF

Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	
				☐ 1. Arrested ☐ 3. Felony ☐ 5. Juvenile ☐ 2. At Large ☐ 4. Misdemeanor
Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	
				☐ 1. Arrested ☐ 3. Felony ☐ 5. Juvenile ☐ 2. At Large ☐ 4. Misdemeanor

JUVENILE

☐ Parent ☐ Other: ☐ Legal Custodian — Name (Last, First, Middle) — Residence Phone

Address (Street, Apt. Number) (City) (State) (Zip) — Business Phone

Notified by: (Name) — Date — Time — JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT JAC 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.
☐ Yes, by: ☐ No:

School Attended — Grade

Property Crime? ☐ Yes ☒ No — Description of Property — Value of Property

CODE

Drug Activity: N. N/A, P. Possess, S. Sell, B. Buy, T. Traffic, R. Smuggle, D. Deliver, E. Use, K. Dispenses/ 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

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #
SIMPLE BATTERY(TOUCH OR STRIKE)	784.03(1A1)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
	N	/		1	☒ Y ☐ N		

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #
DISORDERLY INTOXICATION	856.011	

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
	N	/		1	☐ Y ☒ N		

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #
RESIST/OBSTRUCT OFFICER W/O VIOLENCE	843.02	

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
	N	/		1	☐ Y ☒ N		

INTAKE

Health / Apparent Physical Condition of Defendant — Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries — Explain:

Check which applies: ☐ Released O.R. ☐ Released to Parent/Guardian ☒ T.O.T. County Jail ☐ Posted Bond ☐ South County Mental Health

PROPERTY - Received By — Released By — Released To

Transported By — Date Transported — Time Transported — Other: JAN 29 AM 5:13

NOTICE TO APPEAR

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

Location (Court, Room): South County 200 W Atlantic Ave Delray Beach, FL 33444
Court Date and Time:

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

No Photo Available

ADMIN

HOLD for Other Agency — Signature of Arresting Officer: 1212 — Name Verification (Printed by Arrestee) (PRINT)

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other

Name of Arresting Officer (Print): MASON, CHAD — I.D. # 1212

Intake Deputy — I.D. # — Pouch #

Transporting Officer: MASON — I.D. # 1212 — Agency: DBPD

Witness here if subject signed with an "X".

PAGE 1 OF 1

☐ COURT ☐ STATE ATTORNEY ☐ AGENCY ☐ CENTRAL RECORDS ☒ JAIL ☒ CRIME ANALYSIS ☒ P.I.O. ☐ DEFENDANT

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DOMESTIC VIOLENCE PROBABLE CAUSE
AFFIDAVIT
Palm Beach County

ADMIN

Date / Time	Agency ORI Number	Agency Name	Agency Report Number
01/29/2023 01:22	FL 0500400	DELRAY BEACH POLICE DEPARTMENT	4 0 23-001375

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
COZZA, MONIQUE		W	F	11/20/1992

CHRG

Charge Description: 784.03(1A1) SIMPLE BATTERY(TOUCH OR STRIKE)

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
ASHER, BRENDAN	W	M	11/04/1991

Local Address (Street, Apt. Number) (City) (State) (Zip)	Phone	Address Source
6112 HUNTWICK TER, DELRAY BEACH, FL 33484		

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

	Written	Taped	Oral
DEFENDANT'S STATEMENTS:	☐	☐	☒
VICTIM'S STATEMENTS:	☐	☐	☒

OBSERVATIONS OF VICTIM (PHYSICAL & EMOTIONAL): GOOD

RELATIONSHIP BETWEEN VICTIM & SUSPECT: GIRLFRIEND

ADDITIONAL INFORMATION

	YES	NO	
PHOTOGRAPHS: Scene:	☐	☒	
Victim:	☒	☐	
911 CALL:	☒	☐	CALLER: BRENDAN ASHER
WEAPON USED:	☐	☒	TYPE:
WITNESSES:	☐	☒	(If YES, attach witness list)
INJURIES:	☐	☒	
MEDICAL TREATMENT:	☒	☐	
AT: Scene:	☐	☒	PARAMEDICS:
Hospital:	☒	☐	PHYSICIAN(S) / HOSPITAL: BETHESDA HOSPITAL
ACT COMMITTED IN PRESENCE OF MINOR(S):	☐	☒	NAMES/AGES:
H. R. S. NOTIFIED:	☐	☐	
VICTIM PREGNANT:	☒	☐	
VIOLATION OF RESTRAINING ORDER:	☐	☒	CASE #:
PRIOR HISTORY OF DOMESTIC VIOLENCE:	☐	☒	
ALCOHOL OR DRUGS INVOLVED:	☒	☐	

NARR

See Page Two

STATE OF FLORIDA
COUNTY OF PALM BEACH

Appeared before me, _____ personally known to me, who, being first duly sworn, says that the facts above, based upon my investigation, are true.

[signature] # 1212
SIGNATURE OF ARRESTING OFFICER

Sworn to and subscribed to before me this 29 day of January, 2023

WORRELL, JENNIFER B [signature] 1176
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P.I.O.

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DOMESTIC VIOLENCE PROBABLE CAUSE
AFFIDAVIT
Palm Beach County
Narrative Continuation

ADMIN

Date / Time		
01/29/2023 01:22		
Agency ORI Number	**Agency Name**	**Agency Report Number**
FL 0500400	DELRAY BEACH POLICE DEPARTMENT	4 | 0 | 23-001375

NARRATIVE

The following incident occurred in the City of Delray Beach, Palm Beach County, Florida.

On 01/28/2023 at approximately 2330 hours, Officers responded to the 200 block of NW 22nd Street in reference to a domestic dispute. The reporting party/victim, Brendan Asher (DOB 11/04/1991), advised to Delray Beach dispatch that his girlfriend, Monique Cozza (DOB 11/20/1992), was extremely intoxicated and irate. While Sgt. Sala approached the area he observed Asher being chased by Cozza. He exited his patrol vehicle in full police uniform and stepped between Asher and Cozza. Sgt. Sala gave Cozza multiple verbal commands to stop and calm down. Cozza refused to comply with Sgt. Sala`s lawful commands and continued to try and run toward Asher in an aggressive manner. To stop Cozza from attacking Asher, he grabbed her right wrist in an attempt to detain her. Cozza actively resisted by pulling away from him. At this point Sgt. Sala placed Cozza in handcuffs. Please refer to Sgt. Sala`s supplement for further information.

Upon my arrival, I spoke with Asher who provided a sworn statement advising the following events occurred: On 01/28/2023 at approximately 2300 hours, him and Cozza were at a house party in the 200 block of NW 22nd Street. Cozza became impaired at the party and began to cause a disturbance inside. As a result, he asked Cozza to leave the party. Cozza became more irate and therefore, she began to physically strike Asher with her hands. It should be noted that Asher did not sustain any physical injuries from this altercation. It was at this time that Asher started to run away from Cozza. Cozza, then chased Asher and attempted to throw her shoes in the direction of where he was running. It was at this time, Sgt. Sala arrived on scene and intervened between the both of them. Asher advised that him and Cozza have been in a romantic relationship for approximately three years.

I then spoke with Cozza where I noticed her speech was slurred and could immediately smell the odor of alcohol emanating from her person as well. It should also be noted that prior to my arrival, Cozza urinated herself.

Based on the aforementioned facts, probable cause exists to charge the defendant Monique Cozza (DOB 11/20/1992) with Disorderly Intoxication, FSS 856.011, Resisting Without Violence, FSS 843.02, and Simple Battery, FSS 784.03 (1A1).

NOT A CERTIFIED COPY

STATE OF FLORIDA
COUNTY OF PALM BEACH

Appeared before me, _____ personally known to me, who, being first duly sworn, says that the facts above, based upon my investigation, are true.

#1212
_____
SIGNATURE OF ARRESTING OFFICER

Sworn to and subscribed to before me this 29 day of January, 2023

WORRELL, JENNIFER L 1176
_____
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

VICTIM NOTIFICATION FORM

This form must be filled out in a case involving one of the following crimes:

- **Homicide** (Ch. 782)
- **Sexual Offense** (Ch. 794)
- **Attempted Murder**
- **Attempted Sexual Offense**
- **Stalking** (S. 784.048)
- **Domestic Violence** - (This includes any assault, agg. assault, battery, agg. battery, sexual assault, sexual battery, stalking, agg. stalking or any criminal offense resulting in physical injury or death of one family member or household member by another, who is or was residing in the same single dwelling.)

Upon completion, this form must accompany the booking paperwork. If applying for a warrant, attach this form to the filing packet.

1. Incident Report #: 23-001375 Agency: DBPD
   Offense: Domestic Dating Violence
   Suspect/Offender: Monique Cozza
   D.O.B. 11/20/92 Race: White Sex: female

2. Warrant #(s): _____

3. Complete one (1) of the following:

   a. Victim's name: Brendan Asher
   Address: 1012 Huntwick Ter. #204
   City: Delray Beach State: Florida Zip: 33484
   Home #: (516) 655-1965 Work #: _____ Other: _____

   b. Victim's next of kin: N/A
   Address: _____
   City: _____ State: _____ Zip: _____
   Home #: _____ Work #: _____ Other: _____

   c. Victim's designated contact other than next of kin (for example: a friend or neighbor):
   Name: N/A
   Address: _____
   City: _____ State: _____ Zip: _____
   Home #: _____ Work #: _____ Other: _____

4. Relevant identification or case numbers assigned to the case (please specify):
   _____

WAIVER: I CHOOSE NOT TO COMPLETE THIS VICTIM NOTIFICATION FORM, AND UNDERSTAND THAT I AM WAIVING MY RIGHT TO BE NOTIFIED OF THE RELEASE OF THE SUSPECT/OFFENDER.

Signature of person waiving notification: _____
Printed name of person waiving notification: _____

Officer's Name: OFC. Mason I.D.: 212 Date: 1/29/23

SUSPECT/OFFENDER: W/F Monique Cozza DOB: 11/20/92

COURT CASE/WARRANT #: _____ (FOR WARRANTS USE ONLY)

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