

J# 0502501

19CF11444

P# 41

ARREST / NOTICE TO APPEAR

OBTS Number	Agency ORI Number 0500400		Agency Name Delray Beach Police Department		Agency Report Number (N.T.A. only) 4 0 19-019296		1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias 1		JUVENILE	
Charge Type: Check as many as apply: ☒ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other	Location of Arrest (Including Name of Business) 470 SE 1ST AVE DELRAY BEACH 33444		Location of Offense (Business Name, Address) 470 SE 1ST AVE, DELRAY BEACH, FL 33444		If Weapon Seized Enter Type: None/not Applicable		Multiple Clearance Indicator 1			
Date of Arrest 12/10/2019	Time of Arrest 00:57	Booking Date 12/10/2019	Booking Time 01:07	Jail Date 12/10/2019	Jail Time 00:57	Location of Vehicle				
Name (Last, First, Middle) GUTIERREZ, ARIEL MANUEL		Alias: GUTIERREZ, ARIEL MANUEL		Alias (Name, DOB, Soc. Sec. #, Etc.)						
Race W - White B - Black O - Oriental/Asian W	Sex M	Date of Birth 01/24/1980	Height 5'11	Weight 200	Eye Color BROWN	Hair Color BLACK	Complexion OLIVE	Build MEDIUM		
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)				Marital Status M	Religion	Indication of: Alcohol Influence: Yes ☐ No ☒ Unk ☐ Drug Influence: Yes ☐ No ☒ Unk ☐				
Local Address (Street, Apt. Number) 440 SE 1ST AVE, DELRAY BEACH, FL 33444				(City) DELRAY BEACH	(State) FL	(Zip) 33444	Phone (561) 898-5977			
Permanent Address (Street, Apt. Number) 440 SE 1ST AVE, DELRAY BEACH, FL 33444				(City) DELRAY BEACH	(State) FL	(Zip) 33444	Phone (561) 898-5977			
Business Address (Name, Street) 440 SE 1ST AVE, DELRAY BEACH, FL 33444				(City) DELRAY BEACH	(State) FL	(Zip) 33444	Phone (561) 898-5977			
DL Number, State G362013800240 / FL		Soc. Sec. Number [REDACTED]		INS Number		Place of Birth (City, State) BROOKLYN, NY		Citizenship US		
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		
☐ Parent ☐ Other: _____ Name (Last, First, Middle)				Residence Phone						
☐ Legal Custodian				Business Phone						
Address (Street, Apt. Number) (City) (State) (Zip)										
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.				School Attended				Grade		
☐ Yes, by: _____ ☐ No				Property Crime? ☐ Yes ☒ 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 C - Cultivate Z - Other				Drug Type N - N/A A - Amphetamine B - Barbiturate C - Cocaine E - Heroin H - Hallucinogen M - Marijuana O - Opiate/Deriv P - Paraphernalia/ Equipment S - Synthetic U - Unknown Z - Other						
Charge Description POSSESSION OF COCAINE				Statute Violation Number 893.13 (6 A)				Violation of ORD #		
Drug Activity N				Drug Type N				Amount / Unit 3.000		
Charge Description				Statute Violation Number				Violation of ORD #		
Drug Activity				Drug Type				Amount / Unit		
Charge Description				Statute Violation Number				Violation of ORD #		
Drug Activity				Drug Type				Amount / Unit		
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 ☐ Posted Bond ☐ South County Mental Health				☒ T.O.T. County Jail				PROPERTY - Received By		
Transported By				Date Transported // : :				Time Transported		
☐ 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		
HOLD for Other Agency				Signature of Arranging Officer [Signature]				Name Verification (Printed by Arranger)		
☐ Dangerous ☐ Restricted Arrest ☐ Suicidal ☐ Other				Name of Arranging Officer (Print) ROBERTS, ROGER J				I.D. # 1088		
Inmate Deputy Dung				I.D. # 6280				Pouch #		
Transporting Officer ROBERTS				I.D. # 1088				Agency DBPD		
Witness here if subject signed with an "X"				PAGE 1 OF 1						

☐ COURT ☐ STATE ATTORNEY ☐ AGENCY ☐ CENTRAL RECORDS ☐ JAIL ☐ CRIME ANALYSIS ☒ SCANNED ☐ DEFENDANT

DEC 11 2019

OBT Number		PROBABLE CAUSE AFFIDAVIT		1 Arrest 2 N.T.A		3 Request for Warrant 4 Request for Capias		1	JUVENILE
A D M I N I S T R A T I V E	Agency ORI Number FL 0500400		Agency Name DELRAY BEACH POLICE DEPARTMENT		Agency Report Number 4 0 19-019296				
	Charge Type: Check as many as apply ☒ 1. Felony ☐ 3. Misdemeanor ☐ 5. Ordinance ☐ 2. Traffic Felony ☐ 4. Traffic Misdemeanor ☐ 6. Other					Special Notes			
D E F E N D A N T	Name (Last, First, Middle) GUTIERREZ, ARIEL MANUEL				Race W	Sex M	Date of Birth 01/24/1980		
	Charge Description 893.13(6A) POSSESSION OF COCAINE				Charge Description				
C H A R G E S	Charge Description				Charge Description				
	Charge Description				Charge Description				
V I C T I M	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		
M I S D E M E A N O R	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. ☐ confessed to _____ admitting to the below facts. ☐ was observed by _____ who told _____ that he/she saw the arrested person commit the below acts. ☒ was found to have committed the below acts, resulting from my (described) investigation. On the 10 day of December, 2019 at 01:55 (Specifically include facts constituting cause for arrest.)								
This incident occurred in the City of Delray Beach, Palm Beach County FL. On 12/09/19 I was dispatched to the Drug Abuse Foundation at 400 S. Swinton Ave. in reference to a vehicle crash. While on scene I heard a single gun shot east of S. Swinton Ave. in close proximity to our location. Ofc. Ferreiro and I checked the area and while on the east side of S. Swinton Ave. we heard two subjects talking behind a large fence. I was able to stand on a neighboring fence and observe two males checking what appeared to be a makeshift target. While observing the subjects, one of them stated, "the bullet hit right here." At this point I pointed my department issued firearm at the subjects and gave them verbal commands and subsequently handcuffed both males a conducted a pat down to check for any weapons. The subjects were in the backyard of 470 SE 1st Ave. When entering the backyard through the gate there was a blue plastic bin filled with dirt and it had a bull's eye patterned target painted on it. The plastic bin had one bullet hole on the face of it. Upon searching the backyard for a firearm or shell casings, one casing was found near the front door approximately 25 yards away from the target. The males were separated and Mirandized separately. Post Miranda the homeowner later identified as W/M Richard Castagna stated that his neighbor W/M Ariel Gutierrez came over and shot a gun while he was painting his front door. Castagna also advised that Gutierrez's son took the gun back to his house (440 SE 1st Ave.) prior to police arrival. I then spoke to Gutierrez post Miranda and he stated he shot a gun earlier in the day at an unknown shooting range with a friend, and he could not remember his name. Gutierrez claimed he did not shoot a gun this evening in Castagna's yard. Gutierrez was later searched for any ammunition or shell casings and I located a small clear zip top bag in									
A D M I N I S T R A T I V E	SWORN AND SUBSCRIBED BEFORE ME MCCABE, EDWARD NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) 12/10/2019 DATE  SIGNATURE OF ARRESTING / INVESTIGATING OFFICER ROBERTS, ROGER J (1088) NAME OF OFFICER (PLEASE PRINT) 12/10/2019 DATE								
	COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P.I.O. PAGE 1 OF 2								

SCANNED

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	Name (Last First Middle) GUTIERREZ, ARIEL MANUEL								Race W	Sex M	Date of Birth 01/24/1980						
his right front pants pocket, that contained a white powder substance. I immediately identified the substance through my training, knowledge and experience to be cocaine. The suspect cocaine was later tested at DBPD using a Lynn-Peavey Cocaine Quick Check swab test kit which yielded a positive result for Cocaine. Based on the above facts, probable cause exists to charge Ariel Gutierrez with Possession of Cocaine per F.S.S. 893.13 (6A).																	
PROBABLE CAUSE STATEMENT NOT A CERTIFIED COPY																	
<table border="0" style="width:100%;"> <tr> <td colspan="5"> SWORN AND SUBSCRIBED BEFORE ME <u>MCCABE, EDWARD</u> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) <u>12/10/2019</u> DATE SIGNATURE OF ARRESTING / INVESTIGATING OFFICER <u>ROBERTS, ROGER J (1088)</u> NAME OF OFFICER (PLEASE PRINT) <u>12/10/2019</u> DATE </td> <td colspan="2" style="text-align: right; vertical-align: bottom;"> PAGE 2 OF 2 </td> </tr> </table>											SWORN AND SUBSCRIBED BEFORE ME <u>MCCABE, EDWARD</u> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) <u>12/10/2019</u> DATE SIGNATURE OF ARRESTING / INVESTIGATING OFFICER <u>ROBERTS, ROGER J (1088)</u> NAME OF OFFICER (PLEASE PRINT) <u>12/10/2019</u> DATE					PAGE 2 OF 2	
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COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

 SCANNED
 DEC 11 2019



**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	☐	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	☐	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	☐	119.071(4)(c)	Undercover personnel.	
	☐	119.071(2)(f)	Confidential informants (CIs).	
	☐	119.071(2)(e)	Confession.	
Public Info. Exemptions	☐	985.04(1)	Juvenile offender records.	
	☐	119.071(h)(i)	Assets of a crime victim.	
	☐	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	☐	394.4615(7)	Mental health information.	
	☐	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)	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	☐	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	☐			
	☐			
	☐			
	☐			
	☐			
	☐			
Other	☐		Other:	
	☐		Other:	

REVIEW COMPLETED BY

Booking Number: 2019039420

Date: 12/11/2019

Specialist Name/ID: Gammage/5660

SCANNED

DEC 11 2019