

0349081

ARREST / NOTICE TO APPEAR

2060

A OBTS Number			1. Arrest			3. Request for Warrant				
D			2. N.T.A.			4. Request for Capias				
M			7 8			17-002095				
J Agency ORI Number 0502600			Agency Name Palm Beach Gardens Police Department			Agency Report Number (N.T.A.'s only)				
N			S Charge Type: <input type="checkbox"/> 1. Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance T Check as many as apply: <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other			If Weapon Seized Enter Type Hands, Feet, Fist, Teeth			Multiple Clearance Indicator	
A Location of Arrest (Including Name of Business) PGA BLVD/195, PALM BEACH GARDENS FL			Location of Offense (Business Name, Address) 4155 PINELLA CIR 471, PALM BEACH GARDENS, FL 33410							
T Date of Arrest 04/06/2017			Time of Arrest 19:25			Booking Date			Booking Time	
I			Jail Date			Jail Time			Location of Vehicle	
N Name (Last, First, Middle) ROSS, BENJAMIN ELMER			Alias:			Alias (Name, DOB, Soc. Sec. #, Etc.)				
D Race: W - White <input type="checkbox"/> 1 - American Indian <input type="checkbox"/> W M <input type="checkbox"/> 2 - Black <input type="checkbox"/> O - Oriental/Asian			Date of Birth 09/16/1987			Height 5'10			Weight 190	
E Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) TATT BOTH WRIST						Eye Color BROWN			Hair Color BROWN	
F Local Address (Street, Apt. Number) 4155 PINELLA CIR 473, PALM BEACH GARDENS, FL 33410			(City) 4155 PINELLA CIR 473, PALM BEACH GARDENS, FL 33410			(State) FL			(Zip) 33410	
G Marital Status S			Religion CHRISTIAN						Indication of: Alcohol Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> unk <input type="checkbox"/> Drug Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> unk	
H Permanent Address (Street, Apt. Number) 4155 PINELLA CIR 473, PALM BEACH GARDENS, FL 33410			(City) 4155 PINELLA CIR 473, PALM BEACH GARDENS, FL 33410			(State) FL			(Zip) 33410	
I Business Address (Name, Street) PALM BEACH COUNTY,			(City) PALM BEACH COUNTY,			(State) FL			(Zip) 33410	
J D/L Number R200065873360 / FL			Soc. Sec. Number			IIN Number			Place of Birth (City, State) CORAL SPRINGS, FL	
K Citizenship US										
L Co-Defendant Name (Last, First, Middle)			Race			Sex			Date of Birth	
M Co-Defendant Name (Last, First, Middle)			Race			Sex			Date of Birth	
N <input type="checkbox"/> Parent <input type="checkbox"/> Other: _____			Name (Last, First, Middle)						Residence Phone	
O <input type="checkbox"/> Legal Custodian										
P Address (Street, Apt. Number) 4155 PINELLA CIR 473, PALM BEACH GARDENS, FL 33410			(City) 4155 PINELLA CIR 473, PALM BEACH GARDENS, FL 33410			(State) FL			(Zip) 33410	
Q Notified by: (Name)			Date			Time			JUVENILE DISPOSITION	
R Released To: (Name)			Relationship			Date			I. Handled/Processed within Department and Released	
S 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 355-2526) informed of any change of address.						Time			2. TOT JAC	
T <input type="checkbox"/> Yes, by: <input type="checkbox"/> No:									3. Incarcerated	
U Drug Activity S. Sell R. Smuggle K. Disperses/ Distribute M. Manufacture/ Produce/ Cultivate Z. Other						V Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			W Description of Property	
X N. N/A B. Buy D. Deliver E. Use						Y			Z Value of Property	
C Charge Description BATTERY-SIMPLE (TOUCH OR STRIKE)						Statute Violation Number 784.03(1)(A)(1)			Violation of ORD #	
D Drug Activity N Drug Type N Amount / Unit / Offense # 17-002095			Counts 1 Domestic Violence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N			Warrant / Capias Number			Bond	
E Charge Description						Statute Violation Number			Violation of ORD #	
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I Health / Apparent Physical Condition of Defendant						Any knowledge of the following: <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries				
J Explain:										
K Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> T.O.T. County Jail <input type="checkbox"/> PROPERTY - Received By						L Released By			M Released To	
L <input type="checkbox"/> Posted Bond <input type="checkbox"/> South County Mental Health										
N Transported By			O Date Transported			P Time Transported			Q Other	
R <input checked="" type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court			S Location (Court, Room)			T Court Date and Time			U	
R <input type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.										
V 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 COMTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.									W	
X Signature of Defendant (or Juvenile and Parent/Custodian)						Y Date Signed			Z	
A HOLD for Other Agency			B Signature of Arresting Officer S. BATISTA			C Name Verification (Printed by Arrestee) APR 2017			D	
D			E Name of Arresting Officer (Print) BATISTA, EDGAR			F I.D. # 439			G	
E <input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest										
E <input type="checkbox"/> Suicidal <input type="checkbox"/> Other										
H Transporting Officer BATISTA			I I.D. # 439			J Agency PBS			K	
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DOMESTIC VIOLENCE PROBABLE CAUSE

AFFIDAVIT

Palm Beach County

A D M I N	Date / Time 04/06/2017 19:25	Agency Name PALM BEACH GARDENS POLICE			Agency Report Number 7 8 17-002095																											
D E F	Name (Last, First, Middle) ROSS, BENJAMIN ELMER	Alias	Race W	Sex M	Date of Birth 09/16/1987																											
C H R G	Charge Description 784.03(1)(A)(1) BATTERY-SIMPLE (TOUCH OR STRIKE)																															
V I C T I M	Victim's Name (Last, First, Middle) FIORENZA, MICHELE MARY			Race W	Sex F																											
Local Address (Street, Apt. Number) 4155 PINELLA CIR 471, PALM BEACH GARDENS, FL 33410			(City) (State) (Zip) Phone (561) 222-5736	Address Source																												
Business Address (Name, Street) (City) (State) (Zip) Phone (561) 627-5660			Phone	Occupation																												
DEFENDANT'S STATEMENTS: <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> Written <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> Taped <input type="checkbox"/> <input checked="" type="checkbox"/> Oral			OBSERVATIONS OF VICTIM (PHYSICAL & EMOTIONAL):																													
VICTIM'S STATEMENTS: <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>																																
RELATIONSHIP BETWEEN VICTIM & SUSPECT SPOUSE																																
A D D I T I O N A L I N F O R M A T I O N	<table> <tr> <td>PHOTOGRAPHS:</td> <td>Scene: <input checked="" type="checkbox"/> <input type="checkbox"/> YES</td> <td>NO</td> </tr> <tr> <td>Victim:</td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>911 CALL:</td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/> CALLER: VICTIM</td> </tr> <tr> <td>WEAPON USED:</td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/> TYPE:</td> </tr> <tr> <td>WITNESSES:</td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/> (If YES, attach witness list)</td> </tr> <tr> <td>INJURIES:</td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>MEDICAL TREATMENT:</td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>AT: Scene:</td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/> PARAMEDICS:</td> </tr> <tr> <td>Hospital:</td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/> PHYSICIAN(S) / HOSPITAL:</td> </tr> </table>					PHOTOGRAPHS:	Scene: <input checked="" type="checkbox"/> <input type="checkbox"/> YES	NO	Victim:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	911 CALL:	<input checked="" type="checkbox"/>	<input type="checkbox"/> CALLER: VICTIM	WEAPON USED:	<input type="checkbox"/>	<input checked="" type="checkbox"/> TYPE:	WITNESSES:	<input type="checkbox"/>	<input checked="" type="checkbox"/> (If YES, attach witness list)	INJURIES:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	MEDICAL TREATMENT:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	AT: Scene:	<input type="checkbox"/>	<input checked="" type="checkbox"/> PARAMEDICS:	Hospital:	<input type="checkbox"/>	<input checked="" type="checkbox"/> PHYSICIAN(S) / HOSPITAL:
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ACT COMMITTED IN PRESENCE OF MINOR(S): <input checked="" type="checkbox"/> <input type="checkbox"/> NAMES/AGES: JULIANA FIORENZA-ROSS 2YO																																
H. R. S. NOTIFIED: <input type="checkbox"/> <input checked="" type="checkbox"/>																																
VICTIM PREGNANT: <input type="checkbox"/> <input checked="" type="checkbox"/>																																
VIOLATION OF RESTRAINING ORDER: <input type="checkbox"/> <input checked="" type="checkbox"/> CASE #:																																
PRIOR HISTORY OF DOMESTIC VIOLENCE: <input type="checkbox"/> <input checked="" type="checkbox"/>																																
ALCOHOL OR DRUGS INVOLVED: <input type="checkbox"/> <input checked="" type="checkbox"/>																																
On Thursday, April 6th, 2017, at approximately 7:07pm, I was dispatched to 4155 Pinella Cir Apt 471, Palm Beach Gardens, Palm Beach County, Florida, in reference to a domestic disturbance.																																
While in route to the scene, Palm Beach Gardens dispatched advised that the male suspect left the area in a																																
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 OF ARRESTING OFFICER																																
Sworn to and subscribed to before me this <u>6</u> day of <u>April</u> , <u>2017</u> .																																
 LEFFLER, PAUL D JR																																
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)																																

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

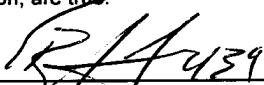
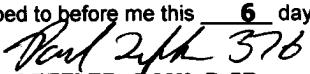
P. I. O.

DOMESTIC VIOLENCE PROBABLE CAUSE

AFFIDAVIT

Palm Beach County

Narrative Continuation

A D M I N	Date / Time 04/06/2017 19:25	Palm Beach County Narrative Continuation
N A R R A T I V E	Agency ORI Number FL 0502600	Agency Name PALM BEACH GARDENS POLICE
		Agency Report Number 7 8 17-002095
<p>grey Jeep Grand Cherokee and also took the callers prescription of Xanax. Sgt Garcia located the vehicle matching the description and conducted a traffic stop. The vehicle was occupied by a white male later identified by his Florida driver's license as Benjamin Ross. (See Sgt Garcia's supplement for further).</p> <p>As we were making contact, Ross kept saying that he did not put his hands on her. Ross advised that he was in a verbal argument with his girlfriend regarding their financial situation and other personal issues. Ross said that he attempted to leave but Fiorenza was blocking the door. According to Ross, when he moved her out of the way, Fiorenza went outside screaming. Post-Miranda, he advised the same and he added that he did not put his hands on her and just moved her out of his way. I asked Ross about the prescriptions that he allegedly took from Fiorenza and he advised that he did not know anything about them. The prescription bottles with Fiorenza's name were located in the center console of the vehicle and Ross advised that Fiorenza must to put them in there in order to get him in trouble.</p> <p>Officer O'Brien #435 made contact with the victim Michele Fiorenza, who had visible red marks on her wrists and arms. Fiorenza advised Officer O'Brien, that she had an argument with Ross regarding bills, family issues, and a previous alleged domestic battery. Fiorenza advised that Ross came out to the patio where she was standing. He then grabbed her by the arms and pushed her down on their back screened in patio. She stated that he then pulled her inside by her wrists and arms, and then again pushed her to the floor. Fiorenza then ran outside and began screaming for help. She stated that Ross then locked her outside. She then began screaming to get back in, so that she could get her child. Officer O'Brien advised that by the time she cleared the scene, the marks had turned to bruising consistent with Fiorenza statements. Officer O'Brien captured the injuries on her body worn camera and issued her a Victim's Rights and Remedies Domestic Violence pamphlet, a victim notification form, and a case card. (See Officer O'Brien's supplement for further).</p> <p>Based on the above facts and circumstances, I have probable cause to arrest and charge Benjamin Ross with one count of Simple Battery (Domestic violence) in accordance with F.S.S. 784.03(1)(A)(1). Ross was transported to the Palm Beach County jail without incident.</p> <p>My body worn camera was utilized through this incident.</p>		
<p>STATE OF FLORIDA COUNTY OF PALM BEACH</p> <p>Appeared before me, _____ personally known to me, who, being first duly sworn, says that the facts above, based upon my investigation, are true.</p> <p> _____ SIGNATURE OF ARRESTING OFFICER</p> <p>Sworn to and subscribed to before me this <u>6</u> day of <u>April</u>, <u>2017</u>.</p> <p> _____ LEFFLER, PAUL D JR</p> <p>NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)</p>		

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.