

05 05 10 / 190F 1303 107

ARREST / NOTICE TO APPEAR

A D M I N I S T R A T I O N	OBTS Number		Agency ORI Number <b>0501700</b>		Agency Name <b>Jupiter Police Department</b>		Agency Report Number (NTA's only) <b>5   4   19-000586</b>		1 Arrest 2 NTA 3 Request for Warrant 4 Request for Capas		1		JUVENILE								
	Charge Type Check as many as apply <input checked="" type="checkbox"/> 1 Felony <input 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		U' Weapon Seized Ester Type <b>NONE</b>		Multiple Clearance Indicator		1										
Location of Arrest (Including Name of Business) <b>6230 W INDIANTOWN RD, JUPITER, FL 33458</b>							Location of Offense (Business Name, Address) <b>6230 W INDIANTOWN RD, JUPITER, FL 33458</b>														
Date of Arrest <b>02/08/2019</b>		Time of Arrest <b>02:21</b>		Booking Date		Booking Time		Jail Date		Jail Time		Location of Vehicle									
Name (Last, First, Middle) <b>VICKER, BROOKE NICOLE</b>																					
Alias: _____ Alias (Name, DOB, Soc Sec #, Etc) _____																					
Race W - White B - Black O - Oriental/Asian		Sex <b>W</b>		Date of Birth <b>12/30/1999</b>		Height <b>5'05</b>		Weight <b>150</b>		Eye Color <b>BROWN</b>		Hair Color <b>BROWN</b>		Complexion <b>FAIR</b>		Build <b>Medium</b>					
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)										Marital Status <b>S</b>		Religion <b>UNKNOWN</b>		Indication of Alcohol Influence Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk <input type="checkbox"/>		Indication of Drug Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk <input type="checkbox"/>					
Local Address (Street, Apt. Number) <b>825 CENTER ST 23A, JUPITER, FL 33458</b>				(City)		(State)		(Zip)		Phone <b>(561) 676-2250</b>		Residence Type 1 City 2 County 3 Florida 4 Out of State <b>1</b>									
Permanent Address (Street, Apt. Number) <b>825 CENTER ST 23A, JUPITER, FL 33458</b>				(City)		(State)		(Zip)		Phone <b>(561) 676-2250</b>		Address Source <b>DL</b>									
Business Address (Name, Street)				(City)		(State)		(Zip)		Phone		Occupation									
D/L Number, State <b>V260074999700 / FL</b>				Sec. Sec. Number		INS Number		Place of Birth (City, State) <b>JUPITER, FL</b>				Citizenship									
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		<input type="checkbox"/> 1 Arrested <input type="checkbox"/> 2 At Large		<input type="checkbox"/> 3 Felony <input type="checkbox"/> 4 Misdemeanor		<input type="checkbox"/> 5 Juvenile									
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		<input type="checkbox"/> 1 Arrested <input type="checkbox"/> 2 At Large		<input type="checkbox"/> 3 Felony <input type="checkbox"/> 4 Misdemeanor		<input type="checkbox"/> 5 Juvenile									
<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian		Other _____		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 <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										School Attended		Grade									
<input type="checkbox"/> Yes, by _____ <input type="checkbox"/> No		Property Crime? <input type="checkbox"/> Yes <input checked="" 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 Barbiturate C Cocaine E Heroin		H Hallucinogen M Marijuana O Opium/Deriv		P Paraphernalia/ Equipment S Synthetic		U Unknown Z Other	
Charge Description <b>DL - POSSESSION OF FORGED/</b>										Status Violation Number <b>322.212(1)</b>		Violation of ORD #									
Drug Activity		Drug Type		Amount / Unit		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Warrant / Capas Number		Bond									
Charge Description										Status Violation Number		Violation of ORD #									
Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Warrant / Capas Number		Bond							
Charge Description										Status Violation Number		Violation of ORD #									
Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Warrant / Capas Number		Bond							
Health / Apparent Physical Condition of Defendant										Any knowledge of the following Explain. <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Violation <input type="checkbox"/> Deformities <input type="checkbox"/> Injured											
Check which applies <input type="checkbox"/> Released O.R. <input type="checkbox"/> Posted Bond				<input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> South County Mental Health		<input type="checkbox"/> TOT County Jail		PROPERTY - Received By		Released By		Released To									
Transported By				Date Transported		Time Transported		Other													
<input checked="" type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court <input type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.								Location (Court, Room)		Court Date and Time		No Photo Available									
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										Signature of Defendant (or Juvenile and Parent/Custodian)		Date Signed									
HOLD for Other Agency				Signature of Arresting Officer <b>B. Lopez 325</b>				Name Verification (Printed by Arrestee)													
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal		<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other		Name of Arresting Officer (Print) <b>LOPEZ, BRANDON</b>		ID # <b>1191</b>		(PRINT)		PAGE		1 OF 1									
Transporting Officer <b>B. Lopez 325</b>		ID #		Agency		Witness here if subject signed with an "X"															

2019 FEB 9 PM 12:25  
JUVENILE COURT

PROBABLE CAUSE AFFIDAVIT

1 Arrest 3 Request for Warrant  
2 NTA 4 Request for Capias

1 JUVENILE

A D M I N	OBTs Number		Agency ORI Number <b>FL 0501700</b>		Agency Name <b>JUPITER POLICE DEPARTMENT</b>		Agency Report Number <b>5   4   19-000586</b>	
	Charge Type Check as many as apply <input checked="" type="checkbox"/> 1. Felony <input 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		Special Notes	

D E F	Name (Last, First, Middle) <b>VICKER, BROOKE NICOLE</b>				Race <b>W</b>	Sex <b>F</b>	Date of Birth <b>12/30/1999</b>
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C H A R G E S	Charge Description <b>322.212(1) DL - POSSESSION OF FORGED/COUNTERFEIT/ETC DL</b>	Charge Description
	Charge Description	Charge Description

V I C T I M	Victim's Name (Last, First, Middle) <b>State Of Florida</b>				Race	Sex	Date of Birth
	Local Address (Street, Apt. Number) _____ (City) _____ (State) _____ (Zip) _____		Phone _____		Address Source		
	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  
 confessed to OFC. LOPEZ \_\_\_\_\_ that he/she saw the arrested person commit the below acts  
admitting to the below facts.  was found to have committed the below acts, resulting from my (described) investigation.

On the 8 day of February, 2019 at 02:02 (Specifically include facts constituting cause for arrest)

I utilized my Body Worn Camera during the below incident:

On 02/08/19, at 0202 hours, I was patrolling the area of Chasewood Plaza, located at 6230 West Indiantown, in my marked Jupiter Police Vehicle. I noticed a white female walking eastbound on the sidewalk along the south side of West Indiantown Road, just north of the plaza. She was staggering as she walked and appeared to have difficulty staying on the sidewalk. I parked my vehicle inside the plaza and walked over to the subject to conduct a consensual encounter.

I approached the female and noticed she had bloodshot glassy eyes. The odor of an unknown alcoholic beverage was emanating from her person. I asked her if she was okay and inquired where she was walking to. The female told me her car broke down and said she was walking to her house on Center Street.

I requested to see the subject's identification, and was provided with an Illinois Driver's License. The license had a picture of the female and identified her as Brooke N. Vicker (w/f 01/30/95). NorthCom conducted a records check on the license number through NCIC, which showed no record. Vicker then advised me her date of birth was actually 12/30/99. Vicker told me she provided me with the fake identification because she left her real driver's license in her car.

Officer Tappin #367 went to the parking lot of Five Guys, located at 2532 West Indiantown Road, where Vicker advised she left her 2015 brown Volkswagen Jetta (FL N746MJ) parked. Officer Tappin advised me the vehicle's front right tire was missing and the rim was badly damaged.

Vicker later advised me she drove intoxicated after using her fake identification to enter clubs and bars in West Palm Beach. Vicker said she struck a curb on the way home,

A D M I N I S T R A T I V E	SWORN AND SUBSCRIBED BEFORE ME		SIGNATURE OF ARRESTING / INVESTIGATING OFFICER 	
	NOTARY PUBLIC / CLERK OF COURT (OFFICER) (F S S 117.10)		NAME OF OFFICER (PLEASE PRINT) <b>LOPEZ, BRANDON (1191)</b>	
	DATE <b>02/08/2019</b>		DATE <b>02/08/2019</b>	
			PAGE <b>1 OF 2</b>	

PROBABLE CAUSE AFFIDAVIT  
SUPPLEMENT

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

**1** JUVENILE

OBTS Number	Agency ORI Number <b>FL 0501700</b>		Agency Name <b>JUPITER POLICE DEPARTMENT</b>	Agency Report Number <b>5   4   19-000586</b>
Charge Type Check as many as apply.				Special Notes
<input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 3 Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2 Traffic Felony <input type="checkbox"/> 4 Traffic Misdemeanor <input type="checkbox"/> 6 Other				

Name (Last, First, Middle) <b>VICKER, BROOKE NICOLE</b>	Alias	Race <b>W</b>	Sex <b>F</b>	Date of Birth <b>12/30/1999</b>
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which caused the damage to her vehicle.

Based on the fictitious driver's license Vicker had in her possession, I found probable cause to arrest and charge her with Unauthorized Possession of a Fraudulent Driver's License, pursuant to FS 322.212.

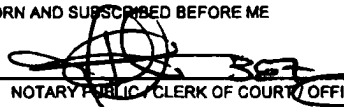

I placed Vicker into handcuffs in the rear, which I double-locked and checked for proper spacing.

I transported Vicker to the Palm Beach County Jail without incident.

The fraudulent driver's license was later submitted into Jupiter Police Evidence.

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NOT A CERTIFIED COPY

SWORN AND SUBSCRIBED BEFORE ME	SIGNATURE OF ARRESTING INVESTIGATING OFFICER
 NOTARY PUBLIC (CLERK OF COURT / OFFICER (F S S 117 10))	
<b>02/08/2019</b> DATE	<b>LOPEZ, BRANDON (1191)</b> NAME OF OFFICER (PLEASE PRINT)
	<b>02/08/2019</b> DATE
	PAGE <b>2 of 2</b>



**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: 2019004437	Date: 02/09/2019
	Specialist Name/ID: AM/31562