

0452155

2716

OBTS Number		ARREST / NOTICE TO APPEAR Juvenile Referral Report		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1		Juvenile		N	
Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE				Agency Report Number (N.T.A.'s only) 06-17-132026							
Charge Type: Check as many as apply.		<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		Weapon Seized / Type 2 1. Yes 2. No		Multiple Clearance Indicator 01			
Location of Arrest (Including Name of Business) 6400 LAKE WORTH RD LAKE WORTH FL 33463						Location of Offense (Business Name, Address) same							
Date of Arrest 09/26/17		Time of Arrest 1430		Booking Date		Booking Time		Jail Date		Jail Time		Location of Vehicle	
Name (Last, First, Middle) SALAZAR COURTNEY						Alias (Name, DOB, Soc. Sec. #, Etc.) L							
Race W - White 1 - American Indian		Sex F		Date of Birth 12/19/85		Height 5'2"		Weight 119		Eye Color BLU		Hair Color BRN	
Complexion LGT		Build SM		Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) Palm Springs		Marital Status SINGLE		Religion NONE		Indication of Alcohol Influence <input checked="" type="checkbox"/> 1. City <input checked="" type="checkbox"/> 2. County <input checked="" type="checkbox"/> 3. Florida <input checked="" type="checkbox"/> 4. Out of State		Y <input checked="" type="checkbox"/> N <input checked="" type="checkbox"/> Unk. <input type="checkbox"/>	
Local Address (Street, Apt. Number) 2200 SPRINGDALE BLVD #L-105 PS FL 33461						Phone (561) 379-6950		Residence Type: <input checked="" type="checkbox"/> 1. City <input checked="" type="checkbox"/> 2. County <input checked="" type="checkbox"/> 3. Florida <input checked="" type="checkbox"/> 4. Out of State		2			
Permanent Address (Street, Apt. Number) () () ()						Phone () () ()		Address Source VERBAL					
Business Address (Name, Street) () () ()						Phone () () ()		Occupation () () ()					
D/L Number, State S-426-112-85-959-0				Soc. Sec. Number () () () () () ()		INS Number () () () () () ()		Place of Birth (City, State) WPB FL		Citizenship YES			
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 <input type="checkbox"/> Other		Name (Last) () () ()		First () () ()		Middle () () ()		Residence Phone () () () () () ()					
Address (Street, Apt. Number) () () () () () ()		City () () ()		State () () ()		Zip () () () () () ()		Business Phone () () () () () ()					
Notified by: (Name) () () ()				Date 09/26/17		Time () () ()		Juvenile Disposition 1. Handled / processed within Dept. and Released. 2. TOT HRS / DYS 3. Incarcerated					
Released To: (Name) () () ()				Relationship () () ()		Date SEP 26 PM 4:05		Time () () ()					
The above address 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 (Phone 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. Barbiturate C. Cocaine E. Heroin		H. Hallucinogen M. Marijuana O. Opium/Deriv.		P. Paraphernalia/ Equipment S. Synthetics		U. Unknown Z. Other					
Charge Description DOMESTIC BATTERY				Counts 1		Domestic Violence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number 784.03(1A1)		Violation of ORD # () () () () () ()			
Drug Activity N		Drug Type N		Amount / Unit () () () () () ()		Offense # 17-132026		Warrant / Capias Number () () () () () ()		Bond () () () () () ()			
Charge Description () () () () () ()				Counts () () ()		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number () () () () () ()		Violation of ORD # () () () () () ()			
Drug Activity () () ()		Drug Type () () ()		Amount / Unit () () () () () ()		Offense # () () () () () ()		Warrant / Capias Number () () () () () ()		Bond () () () () () ()			
Charge Description () () () () () ()				Counts () () ()		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number () () () () () ()		Violation of ORD # () () () () () ()			
Drug Activity () () ()		Drug Type () () ()		Amount / Unit () () () () () ()		Offense # () () () () () ()		Warrant / Capias Number () () () () () ()		Bond () () () () () ()			
Location (Court, Room Number, Address) CRIMINAL JUSTICE COMPLEX 3228 GUN CLUB RD, WPB FL 33406													
Court Date and Time Month () () Day () () Year () () () Time () () () AM <input checked="" type="checkbox"/> PM <input type="checkbox"/>													
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 () () () () () ()				Name Verification (Printed by Arrestee) () () () () () ()					
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal <input type="checkbox"/> Inmate Deaf		<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other		Name of Arresting Officer (Print) ROSE BOTT 8532		ID # 8532		(PRINT) () () () () () ()		PAGE 1			
I.D. # () () () () () ()				Pouch # () () () () () ()		Signature of Reporting Officer () () () () () ()		ID # () () () () () ()		Agency () () () () () ()			
Witness here if subject signed with an <input type="checkbox"/> X													

OBTS Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	Juvenile	N	
ADMIN	Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 06-17-132026						
	Charge Type: Check as many as apply.		<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		Special Notes:						
DEED	Name (Last, First, Middle) SALAZAR COURTNEY				Alias L	Race W	Sex F	Date of Birth 12/19/85			
	Charge Description DOMESTIC BATTERY 784.03(1A1)				Charge Description						
CHARGES	Charge Description				Charge Description						
VICTIM	Victim's Name (Last, First, Middle) BURBANO ANGEL				Race W	Sex M	Date of Birth 08/15/76				
	Local Address (Street, Apt. Number) (City) (State) (zip) 702 N COUNTY RD WPB FL 33480				Phone (561) 506-7927		Address Source				
	Business Address (Name, Street) (City) (State) (zip)				Phone ()		Occupation				
<p>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.</p> <p>The Person taken into custody</p> <div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> confessed to _____ admitting to the below facts. </div> <div> <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation. </div> </div> <p>On the <u>26</u> day of <u>SEPTEMBER</u> 20<u>17</u> at <u>1430</u> <input checked="" type="checkbox"/> A.M. <input type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)</p>											
<p>On the above and time I arrived at 6400 LAKE WORTH RD , in Lake Worth, in unincorporated Palm Beach County FL in reference to a domestic dispute. Upon my arrival I observed a white male later identified as Angel Burbano and a white female later identified as Courtney Salazar standing in the parking lot. I spoke with Angel who had scratch marks all over his right forearm who stated that he was driving southbound on Jog Road when he got into an argument with his baby's mother Courtney Salazar. Angel stated that Courtney started punching him in his face while he was driving and then went into the glove box and grabbed a medal can and continued hitting him in his right shoulder area. Angel stated when she was hitting him he lifted up his right arm to block them from hitting him in the face while he was driving. Angel stated when he lifted up his right arm Courtney hit herself in the mouth with the medal can and caused it to bleed. Angel stated that while he was trying to get off the road he hit a curb and popped his front passenger tire. I then spoke with Courtney who stated that they were driving in the vehicle and began to have a disagreement about Family matters when he kept yelling at her. Courtney then stated that Angel began to hit her in the head numerous times and when he was making a turn onto Lake Worth road he hit her in the face. Courtney stated that he tried to hold his arms to prevent him from continuing to her her. I did observe that Courtney had a small cut to the left side of her lip. I did not observe and swelling or bumps to the head where Courtney stated she was punched. Fire Rescue responded (17-104405) I took digital photos of Courtney and Angel which I later uploaded into the Domestic Violence website. Based on my investigation I believe Courtney is the primary aggressor and probable cause exists to charge her with domestic Battery per F.S.S 784.01(1A1). Courtney was placed into handcuffs which were double locked and checked for tightness. Courtney was placed into my marked patrol vehicle and transported to the county jail for processing.</p>											
<p>STATE OF FLORIDA COUNTY OF PALM BEACH</p> <p style="text-align: center;">D/S B. BOTT 8532</p> <p>(Signature of Arresting/Investigative Officer)</p>											
<p>The foregoing instrument was sworn to or affirmed and subscribed before me this <u>26</u> day of <u>SEPTEMBER</u> 20<u>17</u> by <u>D/S B. BOTT 8532 8532</u></p> <p>(Print name of Arresting/Investigative Officer), who is personally known to me and produced identification. Type of identification produced <u>KNOWN LEO</u></p> <p><u>JOSEPH 14978</u></p> <p>Notary Public, Clerk of Court, Officer (F.S.S. 117.10)</p>											
<p>PAGE 1 OF 1</p>											