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2018CF11170MB

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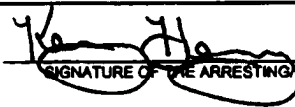
OBT NUMBER		ARREST/NOTICE TO APPEAR Juvenile Referral Report		1 Arrest 2 NTA		3 Request for Warrant 4 Request for Capias		1 Juvenile N	
Agency ORI Number FL 0371700		Agency Name Department of Financial Services		Agency Report Number 18-1306					
Charge Type: Check as many as apply ☒ 1 Felony ☐ 2 Traffic Felony		☐ 3 Misdemeanor ☐ 4 Traffic Misdemeanor		☐ 5 Ordinance ☐ 6 Other		Weapon Seized/Type 1 Yes 2 No 2			
Location of Arrest (Including Name of Business) 3228 Gun Club Rd. West Palm Beach, FL.				Location of Offense 2117 N. Dixie Hwy. Lake Worth, FL. 33467				Date of Offense 05/29/2018	
Date of Arrest 11/19/2018		Time of Arrest 1521		Booking Date		Booking Time		Jail Date	
Jail Time		Fingerprinted By:		☐ Identification		☐ AFIS		☐ Criminal	
Location of Vehicle NA				Other Local Number		FDLE Number		DOC Number	
FBI Number									
Name (Last, First, Middle) Montalva, Faride						Alias (Name, DOB, Soc Sec #, Etc)			
Race W - White B - Black O - Oriental/Asian		Sex W F		Date of Birth 01/24/1974		Height 502		Weight 285	
Eye Color BRN		Hair Color BRN		Complexion Medium		Build M			
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)				Marital Status Single		Religion Catholic		Indication of: Alcohol Influence Drug Influence	
Local Address (Street, Apt Number) 4924 Weymouth St. Lake Worth, FL. 33463		(City)		(State)		(Zip)		Phone 561-396-7651	
Permanent Address (Street, Apt Number) 4924 Weymouth St. Lake Worth, FL. 33463		(City)		(State)		(Zip)		Residence Type: 1 City 2 County 3 Florida 4 Out of State	
Business Address (Name, Street) 4996 10th Ave. N. Ste 1 Greenacres, FL.		(City)		(State)		(Zip)		Address Source DL	
Occupation		DL Number B625-785-83-920-0		DL State		Soc. Sec. Number		INS Number	
Place of Birth Mexico		Citizenship USA							
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		☐ 1 Arrested ☐ 2 At Large	
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		☐ 3 Felony ☐ 4 Misdemeanor ☐ 5 Juvenile	
☐ 1 Parent ☐ 2 Legal Custodian ☐ 3 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 with Dept. and Released 2 TOT HR/DCF 3 Incarcerated			
Released To: (Name)		Relationship		Date		Time			
The above address was provided by the defendant and/or defendant's parent/guardian. The child and/or parent/guardian was told to keep the Juvenile Division Office (Phone 561-355-7200) informed of any change of address.				School Attended		Grade			
Property Crime? ☐ Yes ☒ No		Description of Property		Value of Property					
Activity N N/A P Possess		S Sell B Buy T Traffic		R Smuggle D Deliver E Use		K Dispense/Distribute Distribute		M Manufacture Produce/ Cultivate	
Z Other		Type N N/A A. Amphetamine		B Barbiturate C Cocaine E Heroin		H Hallucinogen M Marijuana O Opium/Derv.		P Paraphernalia/ Equipment S Synthetic	
U Unknown Z Other		Charge Description False/Fraudulent Motor Vehicle Insurance Application		Counts 1		☒ FSS ☐ ORD		Statute Violation Number 817.236	
Violation of ORD #		Activity N		Drug Type N		Amount/Unit N		Warrant/Capias Number	
Bond 3,000		Charge Description		Counts		☒ FSS ☐ ORD		Statute Violation Number	
Violation of ORD #		Activity		Drug Type		Amount/Unit		Warrant/Capias Number	
Bond		Charge Description		Counts		☐ FSS ☐ ORD		Statute Violation Number	
Violation of ORD #		Activity		Drug Type		Amount/Unit		Warrant/Capias Number	
Bond		Charge Description		Counts		☐ FSS ☐ ORD		Statute Violation Number	
Violation of ORD #		Activity		Drug Type		Amount/Unit		Warrant/Capias Number	
Bond		Charge Description		Counts		☐ FSS ☐ ORD		Statute Violation Number	
Violation of ORD #		Activity		Drug Type		Amount/Unit		Warrant/Capias Number	
Bond		Instruction No. 1 Mandatory Appearance in Court		Location (Court, Room Number, Address)		Court Date and Time		Month Day Year Time	
☐ A.M. ☐ P.M.		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 X <i>[Signature]</i>		Name Verification (Printed by Prisoner) (PRINT)		297			
☐ Dangerous ☐ Suicidal ☐ Intake Deputy		☒ Resisted Arrest ☐ Other		Name of Arresting Officer (Print) Det Kenny Henry 297		I.D.# DFS		PAGE 7-34	
Pouch #		Transporting Officer Det Kenny Henry 297		I.D.# DFS		Agency		Witness here if subject signed with an "X"	
1 of 2									

DISTRIBUTION: COURT - 1 COPY

STATE ATTORNEY - 1 COPY

AGENCY - 2 COPIES

DEFENDANT - 1 COPY

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 FL 0 371700		Agency Name DEPARTMENT OF FINANCIAL SERVICES		Agency Report Number DIFS 18- 1306			
	Charge Type Check as many as apply ☒ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other				Special Notes			
DEF	Name (Last, First, Middle) Montalva, Faride				Aliases			
	Victim's Name (Last, First, Middle) Ocean Harbor Insurance				Race	Sex	Date of Birth	
VICTIM	Local Address (Street, Apt. Number)		(City)	(State)	(Zip)	Phone		Address Source
	Business Address (Name, Street) P.O. Box 451119 Sunrise, FL. 33345		(City)	(State)	(Zip)	Phone 954-587-2299		Occupation
<p>The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe the above named Defendant committed the following violation of law. The person taken into custody....</p> <div style="display: flex; justify-content: space-between;"> <div> ☐ committed the below acts in my presence. ☐ confessed to admitting to the below facts </div> <div> ☐ 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. </div> </div> <p>On the <u>29th</u> day of <u>May</u>, <u>2018</u> (Specifically include facts constituting cause for arrest)</p>								
<p>Faride Montalva (Ms. Montalva) was the registered owner of a 2008 Honda Accord, and insured the vehicle with Ocean Harbor, reference policy number P020019878501. The insurance policy lapsed on May 2, 2018, for non-payment of premium.</p> <p>On May 27, 2018, Ms. Montalva's son (Samier Garcia-Montalva) was driving her vehicle and was involved in a traffic crash. The traffic crash took place at 2219 hours, near the intersection of S. Jog Rd. and Lake Worth Rd. in Palm Beach County, FL.</p> <p>On May 29, 2018, Ms. Montalva went to Florida First Insurance of Dixie, Inc., located at 2117 N. Dixie Hwy. Lake Worth, FL., and met with insurance agent Marielys Esquivel to reinstate the policy. Ms. Esquivel explained to Ms. Montalva, the policy could be reinstated back to the date of lapse, if no losses/crashes occurred since May 7, 2018. Ms. Montalva stated no losses have occurred, and signed a statement of no-loss which covered a period from May 7, 2018, through May 29, 2018, at 1628 hours.</p> <p>If Ms. Montalva reported the traffic rash, Ocean Harbor would not have allowed her to reinstate the policy. After it was discovered that Ms. Montalva made a material misrepresentation by failing to disclose the recent traffic crash, Ocean Harbor rescinded the policy.</p> <p>On September 7, 2018, I obtained a sworn recorded statement from Ms. Montalva at her residence. Ms. Montalva stated she remembered the accident her son was involved in, and she drove to the scene of the crash that night. Ms. Montalva also acknowledges signing a statement of no-loss, but stated she informed the insurance agent.</p> <p>On November 5, 2018, I obtained a sworn recorded statement from Insurance Agents Marielys Esquivel and Niovel Noda-Lopez, and both witnesses stated Ms. Montalva did not inform them of the traffic crash, and if she would have disclosed the information, they would not have allowed Ms. Montalva to sign the statement of no-loss.</p> <p>Based on the above facts, probable cause exists to believe the Defendant, Faride Montalva, did knowingly make a false/fraudulent motor vehicle insurance application when she made a material misrepresentation by signing a no-loss statement. Due to Faride Montalva being present at the scene of the crash, and signing the no-loss statement twenty-two days later, Faride Montalva had knowledge that a loss did in fact occur during the specified period. By doing so, Faride Montalva violated Florida State Statute 817.236, False and Fraudulent Motor Vehicle Insurance Application.</p>								
ADMIN	SWORN AND SUBSCRIBED BEFORE ME  NOTARY PUBLIC/CLERK OF THE COURT/POLICE OFFICER <u>11-19-18</u> DATE				 SIGNATURE OF THE ARRESTING/INVESTIGATING OFFICER Kenny Henry NAME OF OFFICER (PLEASE PRINT) <u>11-19-18</u> DATE			
					PAGE 2 OF 2			



**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: 2018038634

Date: 11/20/2018

Specialist Name/ID: J. Beck/9007