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ARREST / NOTICE TO APPEAR

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AD M I N I S T R A T I O N	OBT Number		Agency ORI Number 0500400		Agency Name Delray Beach Police Department		Agency Report Number (N.T.A.'s only) 4, 0 19-013181		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	JUVENILE								
D E F E N D A N T	Charge Type: Check as many as apply		1. Felony 2. Traffic Felony		3. Misdemeanor 4. Traffic Misdemeanor		5. Ordinance 6. Other		If Weapon Seized		Enter Type: None/not Applicable		Multiple Clearance Indicator: 1									
	Location of Arrest (Including Name of Business) 1626 S FEDERAL HWY DELRAY BEACH, FL						Location of Offense (Business Name, Address) 1626 S FEDERAL HWY, DELRAY BEACH, FL 33483															
	Date of Arrest 08/20/2019		Time of Arrest 13:07		Booking Date 08/20/2019		Booking Time 13:17		Jail Date 08/20/2019		Jail Time 13:56		Location of Vehicle									
D E F E N D A N T	Name (Last, First, Middle) HAWARI, FIRAS AHMAD																					
	Alias: _____																					
	Race W. White B. Black		Sex M		Date of Birth 12/15/1973		Height 5'10		Weight 170		Eye Color BROWN		Hair Color BALD		Complexion LIGHT		Build MEDIUM					
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)										Marital Status M		Religion CATHOLIC		Indication of: Alcohol Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Drug Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
	Local Address (Street, Apt. Number) 1778 WOODVIEW TRC, BOCA RATON, FL 33487						(City)		(State)		(Zip)		Phone (787) 404-3831		Residence Type 1. City 2. County 3. Florida 4. Out of State 2							
Permanent Address (Street, Apt. Number) 1778 WOODVIEW TRC, BOCA RATON, FL 33487						(City)		(State)		(Zip)		Phone (787) 404-3831		Address Source FL DL								
Business Address (Name, Street) DIGBY INVESTMENTS, 5635 MEMORIAL HWY TAMPA, FL 33650						(City)		(State)		(Zip)		Phone		Occupation Owner								
DL Number, State H600241734550 / FL		Sec. Sac. Number		INS Number		Place of Birth (City, State) MANSOURA, Lebanon				Citizenship US												
C O D E F	Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth		1. Arrested 2. At Large		3. Felony 4. Misdemeanor		5. Juvenile							
	Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth		1. Arrested 2. At Large		3. Felony 4. Misdemeanor		5. Juvenile							
J U V E N I L E	Name (Last, First, Middle)																					
	Address (Street, Apt. Number)																					
	City (State) (Zip)																					
	Residence Phone																					
	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										
Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No										Description of Property		Value of Property										
C O D E	Drug Activity N. N/A P. Possess		S. Sell B. Buy T. Traffic		R. Smuggle D. Deliver E. Use		K. Disperse/ 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 Synthetic		U. Unknown Z. Other	
	Charge Description INDECENT EXPOSURE IN PUBLIC														Statute Violation Number 800.03		Violation of ORD #					
C H A R G E	Drug Activity		Drug Type N		Amount / Unit /		Offense #		Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Warrant / Capias Number		Bond							
	Charge Description														Statute Violation Number		Violation of ORD #					
C H A R G E	Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Warrant / Capias Number		Bond							
	Charge Description														Statute Violation Number		Violation of ORD #					
C H A R G E	Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Warrant / Capias Number		Bond							
	Charge Description														Statute Violation Number		Violation of ORD #					
I N T A K E	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											
	Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input checked="" type="checkbox"/> T.O.T. County Jail <input type="checkbox"/> Posted Bond <input type="checkbox"/> South County Mental Health										PROPERTY - Received By		Released By		Released To							
N O T I C E	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) South County 200 W Atlantic Ave Delray Beach, FL 33444											
T O A P P E A R	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.										Court Date and Time 09/12/2019 08:30:00											
	Signature of Defendant (or Juvenile and Parent/Custodian)										Date Signed											
A D M I N	HOLD for Other Agency										Signature of Arresting Officer		Name Verification (Printed by Arrestee)									
	<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other										Name of Arresting Officer (Print) WINDSOR, NICHOLAS		I.D. # 1029		(PRINT)							
I N T A K E	Intake Agency DELRA										I.D. # 1029		Agency DELRA		PAGE 1 OF 1							
	Witness here if subject signed with an "X".																					

COURT STATE ATTORNEY AGENCY CENTRAL RECORDS JAIL CRIME ANALYSIS DEFENDANT

SCANNED

AUG 21 2019

PROBABLE CAUSE AFFIDAVIT

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

1 JUVENILE

A D M I N	OBTs Number		Agency ORI Number FL 0500400		Agency Name DELRAY BEACH POLICE DEPARTMENT		Agency Report Number 4 0 19-013181		
	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:		
D E F	Name (Last, First, Middle) HAWARI, FIRAS AHMAD					Alias	Race W	Sex M	Date of Birth 12/15/1973
	Charge Description 800.03 INDECENT EXPOSURE IN PUBLIC					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	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 WITNESS who told
 confessed to _____ OFFICER 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 20 day of August, 2019 at 12:22 (Specifically include facts constituting cause for arrest.)

The following occurred in the City of Delray Beach, County of Palm Beach, FL.

On 08/20/19 at 1222hrs I responded to 1626 S. Federal Hwy. (TJ Maxx) in reference to a white male suspect who exposed his sexual organ in front of the business. The business was open during normal business hours and the shopping plaza has a large number of pedestrians in the area. The female witness was walking toward TJ Maxx and went to discard an item in the trash can when she observed the suspect turn and face her. The suspect had all of his genitalia exposed through the zipper opening of his shorts. The witness stated the suspect did not say anything to her and did not touch himself during the incident. The witness turned around and walked toward TJ Maxx in attempt to find a security guard. The witness stated the suspect began to walk away from her and while turning his head back toward her direction while smiling. The witness felt the suspect was attempting to get a reaction out of her and did not know if he was trying to scare her or make a sexual gesture toward her. The witness called the police and kept observing the suspect walk around in the parking lot from a distance. The witness stated the suspect was standing near a red minivan in the parking lot but did not see him get inside. When the police arrived, the suspect went inside TJ Maxx where police officers could not see him. The witness informed me the suspect was inside TJ Maxx and described his clothing as a maroon shirt with blue shorts. I searched the entire business and located the suspect in the men's restroom. I detained the suspect and placed him in handcuffs. I read the suspect his Miranda Rights and he acknowledged these warnings on my body worn camera. The suspect verbally identified himself as Firas Ahmad Hawari and I later confirmed his identity by his FL DL. Post Miranda, Hawari admitted to exposing himself but stated he was trying to adjust his clothing. Hawari stated he had no intent toward the nearby female by exposing himself. Hawari stated he was at TJ Maxx to purchase clothing before flying to Puerto Rico. Hawari only had a vehicle key in his possession and had no wallet or means to purchase any merchandise when he was detained in the restroom. Ofc. R. Addea and myself escorted Hawari to my patrol vehicle outside

A D M I N I S T R A T I V E	SWORN AND SUBSCRIBED BEFORE ME		SIGNATURE OF ARRESTING / INVESTIGATING OFFICER	
	<u>SCOTT, TERANCE</u> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)		<u>WINDSOR, NICHOLAS (1029)</u> NAME OF OFFICER (PLEASE PRINT)	
	<u>08/20/2019</u> DATE		<u>08/20/2019</u> DATE	
			PAGE 1 OF 2	

PROBABLE CAUSE AFFIDAVIT
SUPPLEMENT

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

1

JUVENILE

A D M I N	OBTS Number		Agency ORI Number FL 0500400		Agency Name DELRAY BEACH POLICE DEPARTMENT		Agency Report Number 4 0 19-013181	
	Charge Type: Check as many as apply.		Special Notes:					
		<input type="checkbox"/> 1. Felony	<input checked="" 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				

D E F	Name (Last, First, Middle) HAWARI, FIRAS AHMAD				Alias		Race W	Sex M	Date of Birth 12/15/1973
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the business. I asked the witness if Hawari was the male who exposed himself and she replied "yes". The witness provided a sworn recorded statement on my body worn camera.

Based on the above facts and statements, Probable Cause does exist to charge Firas Ahmad Hawari with Indecent Exposure in Public FSS 800.03.

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NOT A CERTIFIED COPY

A D M I N I S T R A T I V E	SWORN AND SUBSCRIBED BEFORE ME		SIGNATURE OF ARRESTING / INVESTIGATING OFFICER	
	SCOTT, TERENCE <i>[Signature]</i>		WINDSOR, NICHOLAS (1029)	
	NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)		NAME OF OFFICER (PLEASE PRINT)	
	08/20/2019		08/20/2019	
DATE		DATE		PAGE 2 OF 2

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P.I.O.

SCANNED
AUG 21 2019



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)(f)	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: 2019027234	Date: 8/21/2019
	Specialist Name/ID: J. Beck/9007

SCANNED
AUG 21 2019