

0401623 19MM1971 2601

ARREST / NOTICE TO APPEAR

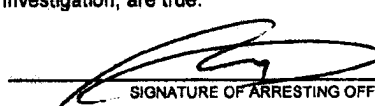
ADMINISTRATIVE	ORBS Number		Agency ORI Number 0501700		Agency Name Jupiter Police Department		Agency Report Number (N.T.A.'s only) 5, 4 19-000703		1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Copies 1		JUVENILE	
	Charge Type: Check as many as apply: ☐ 1. Felony ☐ 2. Traffic Felony ☒ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other		Location of Arrest (Including Name of Business) 404 FERN ST #4C		Location of Offense (Business Name, Address) 404 FERN ST 3C, JUPITER, FL 33458		If Weapon Seized Enter Type OTHER WEAPON		Multiple Clearance Indicator			
	Date of Arrest 02/15/2019		Time of Arrest 11:32		Booking Date		Booking Time		Jail Date		Jail Time	
	Name (Last, First, Middle) PATEL, GEETABEN NIMESH		Alias: Alias (Name, DOB, Soc. Sec. #, Etc.)		Race W - White B - Black O - Oriental/Asian W		Sex F		Date of Birth 12/07/1971		Height 5'00	
	Weight 120		Eye Color BROWN		Hair Color BLACK		Complexion DARK		Build Small		Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) SCAR L UPPER ARM / SCAR LT UPPER ARM	
	Local Address (Street, Apt. Number) 404 FERN ST 3C, JUPITER, FL 33458		(City) JUPITER		(State) FL		(Zip) 33458		Phone (561) 741-8006		Indication of: Alcohol Influence Drug Influence Yes ☐ No ☒ Unk. ☐	
	Permanent Address (Street, Apt. Number) 404 FERN ST 3C, JUPITER, FL 33458		(City) JUPITER		(State) FL		(Zip) 33458		Phone (561) 741-8006		Residence Type: 1. City 2. County 3. Florida 4. Out of State	
	Business Address (Name, Street) P340294719470 / FL		(City) JUPITER		(State) FL		(Zip) 33458		Phone (561) 741-8006		Address Source	
	D/L Number, State P340294719470 / FL		Soc. Sec. Number [REDACTED]		INS Number [REDACTED]		Place of Birth (City, State) VILLAS, India		Citizenship II		Occupation Unemployed	
	DEFENDANT	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				
☐ Parent ☐ Other: _____		Name (Last, First, Middle)		Residence Phone								
☐ Legal Custodian		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 ☐ defendant and/or ☐ 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								
☐ Yes, by: _____ ☐ No: _____		Property Crime? ☐ Yes ☒ No		Description of Property		Value of Property						
Drug Activity S. Sell N. N/A P. Possess		R. Smuggle D. Deliver T. Traffic		K. Disperse/ Distribute		M. Manufacture/ Produce/ Cultivate		Z. Other		Drug Type N. N/A A. Amphetamine		
B. Barbiturate C. Cocaine E. Heroin		A. Hallucinogen M. Marijuana D. Opium/Deriv.		P. Paraphernalia/ Equipment S. Synthetic		U. Unknown Z. Other						
CHARGE	Charge Description BATTERY-SIMPLE (TOUCH OR STRIKE)		Statute Violation Number 784.03(1)(A)(1)		Violation of ORD #							
	Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence ☒ Y ☐ N	
	Warrant / Capias Number		Bond									
	Charge Description		Statute Violation Number		Violation of ORD #							
	Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence ☐ Y ☒ N	
	Warrant / Capias Number		Bond									
	Charge Description		Statute Violation Number		Violation of ORD #							
	Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence ☐ Y ☒ N	
	Warrant / Capias Number		Bond									
	Health / Apparent Physical Condition of Defendant		Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries		Explain:							
NOTICE TO APPEAR	Check which applies: ☐ Released O.R. ☐ Released to Parent/Guardian ☐ T.O.T. County Jail ☐ Posted Bond ☐ South County Mental Health		PROPERTY - Received By		Released By		Released To					
	Transported By		Date Transported		Time Transported		Other					
	☒ INSTRUCTION NO. 1 - Mandatory appearance in court ☐ INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.		Location (Court, Room)		Court Date and Time							
	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		Signature of Arresting Officer		Name Verification (Printed by Arresting Officer)		FEB 15 PM 1:15					
	☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other		Name of Arresting Officer (Print) PANTALOUKAS, ANDREAS		I.D. # 1214		(PRINT)					
	Initials DS		Pouch #		Transporting Officer Pantaloukas		I.D. # 332		Agency JPD		Witness here if subject signed with an "X".	
											PAGE 1 OF 1	

FEB 16 2019

DOMESTIC VIOLENCE PROBABLE CAUSE

AFFIDAVIT

Palm Beach County

A D M I N	Date / Time 02/15/2019 11:43		Agency ORI Number FL 0501700		Agency Name JUPITER POLICE DEPARTMENT		Agency Report Number 5 4 19-000703																																																																	
	Name (Last, First, Middle) PATEL, GEETABEN NIMESH						Race W	Sex F	Date of Birth 12/07/1971																																																															
C H A R G E S	Charge Description 784.03(1)(A)(1) BATTERY-SIMPLE (TOUCH OR STRIKE)																																																																							
	Victim's Name (Last, First, Middle) PATEL, NIMESH MUKUNDBHAI						Race W	Sex M	Date of Birth 03/30/1967																																																															
V I C T I M	Local Address (Street, Apt. Number) (City) (State) (Zip) 404 FERN ST 3C, JUPITER, FL 33458				Phone (561) 741-8006		Address Source LICENSE																																																																	
	Business Address (Name, Street) (City) (State) (Zip) SHELL GAS STATION, 14731 US HIGHWAY 1, JUNO BEACH, FL 33408				Phone (561) 627-4012		Occupation CASHIER																																																																	
	<table border="0"> <tr> <td>DEFENDANT'S STATEMENTS:</td> <td>Written ☐</td> <td>Taped ☒</td> <td>Oral ☐</td> <td colspan="5" rowspan="2">OBSERVATIONS OF VICTIM (PHYSICAL & EMOTIONAL): UPSET</td> </tr> <tr> <td>VICTIM'S STATEMENTS:</td> <td>☐</td> <td>☒</td> <td>☐</td> </tr> </table>								DEFENDANT'S STATEMENTS:	Written ☐	Taped ☒	Oral ☐	OBSERVATIONS OF VICTIM (PHYSICAL & EMOTIONAL): UPSET					VICTIM'S STATEMENTS:	☐	☒	☐																																																			
DEFENDANT'S STATEMENTS:	Written ☐	Taped ☒	Oral ☐	OBSERVATIONS OF VICTIM (PHYSICAL & EMOTIONAL): UPSET																																																																				
VICTIM'S STATEMENTS:	☐	☒	☐																																																																					
A D D I T I O N A L I N F O R M A T I O N	RELATIONSHIP BETWEEN VICTIM & SUSPECT MARRIED																																																																							
	<table border="0"> <tr> <td>PHOTOGRAPHS:</td> <td>Scene: ☒</td> <td>YES ☒</td> <td>NO ☐</td> <td colspan="5" rowspan="10"> <div style="position: absolute; top: 50%; left: 50%; transform: translate(-50%, -50%); opacity: 0.1; font-size: 100px; pointer-events: none;">CERTIFIED COPY</div> </td> </tr> <tr> <td></td> <td>Victim: ☒</td> <td>☒</td> <td>☐</td> </tr> <tr> <td>911 CALL:</td> <td>☐</td> <td>☒</td> <td>CALLER:</td> </tr> <tr> <td>WEAPON USED:</td> <td>☒</td> <td>☐</td> <td>TYPE: BROOMSTICK</td> </tr> <tr> <td>WITNESSES:</td> <td>☒</td> <td>☐</td> <td>(If YES, attach witness list)</td> </tr> <tr> <td>INJURIES:</td> <td>☒</td> <td>☐</td> <td></td> </tr> <tr> <td>MEDICAL TREATMENT:</td> <td>☐</td> <td>☒</td> <td></td> </tr> <tr> <td>AT: Scene:</td> <td>☐</td> <td>☒</td> <td>PARAMEDICS:</td> </tr> <tr> <td>Hospital:</td> <td>☐</td> <td>☒</td> <td>PHYSICIAN(S) / HOSPITAL:</td> </tr> <tr> <td>ACT COMMITTED IN PRESENCE OF MINOR(S):</td> <td>☐</td> <td>☒</td> <td>NAMES/AGES:</td> </tr> <tr> <td>H. R. S. NOTIFIED:</td> <td>☐</td> <td>☒</td> <td></td> </tr> <tr> <td>VICTIM PREGNANT:</td> <td>☐</td> <td>☒</td> <td></td> </tr> <tr> <td>VIOLATION OF RESTRAINING ORDER:</td> <td>☐</td> <td>☒</td> <td>CASE #:</td> </tr> <tr> <td>PRIOR HISTORY OF DOMESTIC VIOLENCE:</td> <td>☐</td> <td>☒</td> <td></td> </tr> <tr> <td>ALCOHOL OR DRUGS INVOLVED:</td> <td>☐</td> <td>☒</td> <td></td> </tr> </table>								PHOTOGRAPHS:	Scene: ☒	YES ☒	NO ☐	<div style="position: absolute; top: 50%; left: 50%; transform: translate(-50%, -50%); opacity: 0.1; font-size: 100px; pointer-events: none;">CERTIFIED COPY</div>						Victim: ☒	☒	☐	911 CALL:	☐	☒	CALLER:	WEAPON USED:	☒	☐	TYPE: BROOMSTICK	WITNESSES:	☒	☐	(If YES, attach witness list)	INJURIES:	☒	☐		MEDICAL TREATMENT:	☐	☒		AT: Scene:	☐	☒	PARAMEDICS:	Hospital:	☐	☒	PHYSICIAN(S) / HOSPITAL:	ACT COMMITTED IN PRESENCE OF MINOR(S):	☐	☒	NAMES/AGES:	H. R. S. NOTIFIED:	☐	☒		VICTIM PREGNANT:	☐	☒		VIOLATION OF RESTRAINING ORDER:	☐	☒	CASE #:	PRIOR HISTORY OF DOMESTIC VIOLENCE:	☐	☒		ALCOHOL OR DRUGS INVOLVED:	☐	☒
PHOTOGRAPHS:	Scene: ☒	YES ☒	NO ☐	<div style="position: absolute; top: 50%; left: 50%; transform: translate(-50%, -50%); opacity: 0.1; font-size: 100px; pointer-events: none;">CERTIFIED COPY</div>																																																																				
	Victim: ☒	☒	☐																																																																					
911 CALL:	☐	☒	CALLER:																																																																					
WEAPON USED:	☒	☐	TYPE: BROOMSTICK																																																																					
WITNESSES:	☒	☐	(If YES, attach witness list)																																																																					
INJURIES:	☒	☐																																																																						
MEDICAL TREATMENT:	☐	☒																																																																						
AT: Scene:	☐	☒	PARAMEDICS:																																																																					
Hospital:	☐	☒	PHYSICIAN(S) / HOSPITAL:																																																																					
ACT COMMITTED IN PRESENCE OF MINOR(S):	☐	☒	NAMES/AGES:																																																																					
H. R. S. NOTIFIED:	☐	☒																																																																						
VICTIM PREGNANT:	☐	☒																																																																						
VIOLATION OF RESTRAINING ORDER:	☐	☒	CASE #:																																																																					
PRIOR HISTORY OF DOMESTIC VIOLENCE:	☐	☒																																																																						
ALCOHOL OR DRUGS INVOLVED:	☐	☒																																																																						
N A R R	On February 15th 2019, at approximately 1033 hours, I responded to 404 Fern St #4C, in reference to a domestic disturbance.																																																																							
	According to the witness, property manager Taras Stolar 10/20/51, the residents in #4C were in a verbal																																																																							
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. <div style="text-align: center; margin-top: 20px;">  333 / 1214 SIGNATURE OF ARRESTING OFFICER </div> Sworn to and subscribed to before me this <u>15</u> day of <u>February</u> , <u>2019</u> . <div style="text-align: center; margin-top: 20px;">  FRIES, IAN NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) </div> <div style="text-align: right; margin-top: 20px;"> SCANNED FEB 16 2019 </div>																																																																								

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

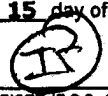
CRIME ANALYSIS

P. I. O.

DOMESTIC VIOLENCE PROBABLE CAUSE

AFFIDAVIT

Palm Beach County
Narrative Continuation

ADMINISTRATIVE	Date / Time 02/15/2019 11:43		
	Agency ORI Number FL 0501700	Agency Name JUPITER POLICE DEPARTMENT	Agency Report Number 5 4 19-000703
	<p>altercation that escalated, and became physical when Geetaben Patel 12/7/71 began to strike her husband, Nimesh M Patel 3/30/67 with a broomstick.</p> <p>Upon arrival, Stolar confirmed the altercation occurred, and pointed out the suspect, Geetaben. I then spoke with Geetaben, who could not provide a valid or coherent statement (she just kept repeating that her husband doesn't help much around the house). Geetaben had no signs of any scars, marks or bruises.</p> <p>I then spoke with Nimesh in front of his residence. Nimesh confirmed his wife hit him several times with a broomstick. I asked where he was struck, and he stated all over his right arm. Nimesh's right forearm had bruising and redness.</p> <p>Due to Nimesh's statement, and witness Stolar's statement, I determined Geetaben to be the primary aggressor and to have committed simple battery against Nimesh.</p> <p>Geetaben was placed into custody, and transported to the Jupiter Police Department for processing. Geetaben was ultimately taken to the Palm Beach County Jail.</p> <p>BATTERY (DOMESTIC) Geetaben Patel did actually and intentionally touch or strike her husband, Nimesh Patel against his will. Nimesh Patel was a family and household member of Geetaben Patel, contrary to Florida Statute 784.03(1) and 741.283 (1 DEG MISD)</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> 333 / 1214 SIGNATURE OF ARRESTING OFFICER</p> <p>Sworn to and subscribed to before me this <u>15</u> day of <u>February</u>, <u>2019</u>.</p> <p> FRIES, IAN NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)</p>			

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

SCANNED
CRIME ANALYSIS
FEB 16 2019

P. I. O.

VICTIM NOTIFICATION FORM

This form must be completed when one of the following crime(s) has been committed:

- Homicide (Ch.782)
- Sexual Offense (Ch. 794)
- Attempted Murder
- Attempted Sexual Offense
- Stalking (F.S. 784.048)
- Dating Violence
- Domestic Violence - (This includes any assault, aggravated assault, battery, aggravated battery, sexual assault, sexual battery, stalking, aggravated stalking or any criminal offense resulting in physical injury or death of one family member or household member by another, who is or was residing in the same single dwelling)

Upon completion, this form must accompany the booking paperwork.

If applying for a warrant, attach this form to the filing packet.

1. Incident Report #: 19000703 Agency: Jupiter Police Department
Offense: Simple Battery (Domestic)
Suspect/Offender: Geetaben Patel
D.O.B. 12/7/1971 Race: W Sex: F

2. Warrant #(s): _____

3a. Victim's Name: Nimesh Patel D.O.B. 3/30/1956 Race: W Sex: M
Address: 404 Fern St #4C
City: Jupiter State: FL ZIP: 33458
Home #: 561-741-8006 Work #: _____ Other: _____

3b. Victim's Next of Kin, Friend or Neighbor: _____
Address: _____
City: _____ State: _____ ZIP: _____
Home #: _____ Work #: _____ Other: _____

NOTE: PURSUANT TO F.S.119.07, THE CONTENTS OF THIS FORM MAY BE SUBJECT TO CONFIDENTIALITY

Victim/Relation Notification Waiver and Confidential Information Request.

(check applicable boxes)

- ☐ **Waiver:** I choose not to be notified when the arrestee is released from custody.
- ☐ **Confidential:** I request the information on this form be kept confidential (applicable only to sexual battery, stalking, child abuse, harassment or domestic violence cases).

Signature of person waiving notification: _____

Printed name of person waiving notification: _____

Officer's Name: _____ I.D. # _____ Date: _____

1 copy = Corrections or State Attorney (Warrant Application)

1 Copy = Warrants Section

1 copy = Central Records

SCANNED
FEB 16 2019

SUSPECT/OFFENDER: _____

COURT CASE/WARRANT #: _____
(FOR WARRANT USE ONLY)



**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: 2019005364	Date: 02/16/2019
	Specialist Name/ID: AM/31562

SCANNED
FEB 16 2019