

0437770

18CP5392

OBTS 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 FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE			Agency Report Number (N T A 's only) 06-18-082713				
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		Weapon Seized / Type 2. 1. Yes 2. No		Multiple Clearance Indicator 2	
Location of Arrest (Including Name of Business) 6548 CHASEWOOD DR JUPITER, FL. 33458				Location of Offense (Business Name, Address) 6548 CHASEWOOD DR JUPITER, FL. 33458					
Date of Arrest 06/06/2018	Time of Arrest 0700	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle			
Name (Last, First, Middle) PICCIRILLI JARED				Alias (Name, DOB, Soc. Sec. #, Etc.) NICHOLAS					
Race W - White I - American Indian B - Black O - Oriental/Asian	Sex W	Date of Birth 03/25/1996	Height 6-2	Weight 190	Eye Color BR	Hair Color BR	Complexion WHT	Build MED	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) TATTOO				Marital Status S		Religion CHRISTIAN		Indication of Alcohol Influence Drug Influence Y <input type="checkbox"/> N <input type="checkbox"/> Unk. <input checked="" type="checkbox"/>	
Local Address (Street, Apt. Number) 6548 CHASEWOOD DR		(City) (State) (Zip) JUPITER FL. 33458		Phone (561) 215-6523		Residence Type 1. City 2. County 3. Florida 4. Out of State			
Permanent Address (Street, Apt. Number) 6548 CHASEWOOD DR		(City) (State) (Zip) JUPITER, FL. 33458		Phone ()		Address Source			
Business Address (Name, Street)		(City) (State) (Zip)		Phone (561)		Occupation			
D/L Number, State P264434961050		Soc. Sec Number		INS Number		Place of Birth (City, State) BROSWICK, GA		Citizenship US	
Co-Defendant Name (Last, First, Middle)				Race	Sex	Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 2. At Large <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"/> 3. Felony <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile	
<input type="checkbox"/> Parent 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	Time	Juvenile Disposition 1. Handled/processed within Dept. and Released. 2. TOT HRS / DYS 3. Incarcerated					
Released To (Name)		Relationship		Date	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 S Sell N N/A P Possess		R Smuggle D Deliver T Traffic		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/Derv.		P Paraphernalia/ Equipment S. Synthetics		U. Unknown Z Other	
Charge Description VOP		Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number 948.06		Violation of ORD #			
Drug Activity N	Drug Type N	Amount / Unit	Offense # 18-082713	Warrant / Capias Number 16-000390CFAXX		Bond NONE			
Charge Description ESCAPE		Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number 944.40		Violation of ORD #			
Drug Activity n	Drug Type n	Amount / Unit	Offense # 18-158739	Warrant / Capias Number		Bond PER SCH			
Charge Description RESISTING W/O		Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number 843.02		Violation of ORD #			
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond			
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" 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)									
Court Date and Time Month Day Year Time AM									
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 [Signature]			Name Verification (Printed by Arrestee)				
<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other		Name of Arresting Officer (Print) Gomez, Jairo			ID # 7442		(PRINT)		
Intake Deputy Ms Welch 6015		ID # 5978		Transporting Officer [Signature]		ID # 7442		Agency 1850	
Witness here if subject signed with an "X"								PAGE 1 of 1	

1. none
2. none
3. OK

2018 JUN 11 PM 5:42
JUN 11 5:42 AM
COUNTY CLERK
BRAINARD

OBTS Number		PROBABLE CAUSE AFFIDAVIT		1 Arrest	3 Request for Warrant	1	Juvenile	N
Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 06- 18-082713				
Charge Type: Check as many as apply		Special Notes						
<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				
Name (Last, First, Middle) PICCIRILLI JARED		Alias NICHOLAS		Race W	Sex M	Date of Birth 03/25/1996		
Charge Description VOP		948.06		Charge Description ESCAPE		944.40		
Charge Description RESISTING W/O		843.02						
Victim's Name (Last, First, Middle) STATE OF FLORIDA		Race		Sex		Date of Birth		
Local Address (Street, Apt. Number) 3228 GUN CLUB RD		(City) WEST PALM BEACH, FL	(State)	(zip) 33406	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 <input checked="" type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts. <input type="checkbox"/> confessed to _____ admitting to the below facts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.								
On the 6TH day of JUNE 20__ at 0700 <input checked="" type="checkbox"/> A.M. <input type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)								
<p>On the above date and time, I responded 6548 Chasewood Dr unit H. in reference to a violation of probation warrant #16-000390cfaxx. Upon arrival, I met with the suspect Jared N. Piccirilli outside his home. I informed Jared of his violation of probation warrant at which time we entered his residence to allow his to get dressed. Jared was crying saying as he was getting dresses stating that he didn't do anything. Upon getting dressed, I cuffed Jared in the front which we usually change before putting them into the car and place waist restrains as well as ankles restrains. Jared bend down to tie his shoe was at which time he began to run southbound inside the development while cuffed in the front. I began to chase behind him through building until we hit the dead end of the development. Jared then ran eastbound along the development wall cutting through buildings ultimately running into Sargent Pfeifle. Sgt Pfeifle tackled Jared to the ground and he was subsequently taken into custody. Based on the above, Jared was charged with escape and resisting without .</p>								
STATE OF FLORIDA COUNTY OF PALM BEACH Signature of Arresting/Investigative Officer) Gomez, Jairo								
The foregoing instrument was sworn to or affirmed and subscribed before me this 6TH day of JUNE 20__ by Gomez, Jairo 7442 (Print name of Arresting/Investigative Officer) whose personally known to me and/or produced identification Type of identification produced KNOWN TO ME								
Signature of Notary Public Jairo Gomez 5186 Notary Public, Clerk of Court, Officer (F.S.S. 117.10)								

PROBABLE CAUSE STATEMENT

ADMINISTRATIVE

NOT A CRIMINAL



**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	<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"/>			
Other	<input checked="" type="checkbox"/>	119.0712(2)	Other: Personal information contained in a motor vehicle record	4
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2018018854

Date: 06-06-2018

Specialist Name/ID: Drucker/9206

SCANNED
JUN 07 2018