

17mm 8219

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

1 Juvenile N

ADMINISTRATIVE	OBTS Number		Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06-17-098666		1		Juvenile N													
	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) 4329 SPRINGFIELD ST, WEST PALM BEACH, FL 33461						Location of Offense (Business Name, Address) 4329 SPRINGFIELD ST, WEST PALM BEACH, FL 33461																	
	Date of Arrest 07/05/2017		Time of Arrest 0145		Booking Date		Booking Time		Jail Date		Jail Time		Location of Vehicle											
DEFENDANT	Name (Last, First, Middle) Withey, Jason, Robert												Alias (Name, DOB, Soc. Sec. #, Etc.)											
	Race W - White I - American Indian B - Black O - Oriental/Asian		Sex W M		Date of Birth 03/08/1977		Height 5'07		Weight 150		Eye Color BRO		Hair Color BRO		Complexion LIGHT		Build THIN							
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) SCAR HEAD. TAT BACK OF EACH LEG												Marital Status MARRIED		Religion NONE		Indication of Alcohol Influence Y N Unk. 1. City 2. County 3. Florida 4. Out of State		2					
	Local Address (Street, Apt. Number) (City) (State) (Zip) 4329 Springfield St, Lake Worth, FL 33461						Phone (561) 657-3442						Residence Type: 1. City 2. County 3. Florida 4. Out of State											
	Permanent Address (Street, Apt. Number) (City) (State) (Zip)						Phone ()						Address Source FL ID											
	Business Address (Name, Street) (City) (State) (Zip)						Phone ()						Occupation NONE											
	D/L Number, State W300436770880, FL				Soc. Sec. Number [REDACTED]				INS Number				Place of Birth (City, State) COURTLAND, NY				Citizenship US							
	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									
	CO-DEF	<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other:												Residence Phone ()										
Address (Street, Apt. Number) (City) (State) (Zip)												Business Phone ()												
Notified by: (Name)						Date		Disposition 1. Released / 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								
JUVENILE	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 SIMPLE BATTERY (DOMESTIC RELATED)						Counts 01		Domestic Violence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number 784.03 (1)(A)(1)						Violation of ORD #							
	Drug Activity N		Drug Type N		Amount / Unit		Offense # 17-098666		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									
	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	Charge Description						Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number						Violation of ORD #							
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	Drug Activity		Drug Type		Amount / Unit		Offense #		Warrant / Capias Number						Bond									
NOTICE TO APPEAR	Location (Court, Room Number, Address)												SCANNED											
	Court Date and Time Month Day Year Time JUL 05 2017 AM												PM											
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 07/05/2017																								
Signature of Defendant (or Juvenile and Parent /Custodian)												Date Signed												
ADMIN	HOLD for other Agency Name:						Signature of Arresting Officer D/S J.TOLBERT						Name Verification (Printed by Arrestee) JUL 5 AM 3:22											
	<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal						<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:						(PRINT)											
	Intake Deputy						I.D. #		Pouch #		Transporting Officer D/S J.TOLBERT						I.D. # 18338		Agency PBSO		PAGE 1 OF 1			
	Witness here if subject signed with an "X"												1											

DISTRIBUTION: WHITE - COURT COPY

GREEN - STATE ATTORNEY

YELLOW - AGENCY

PINK - AGENCY

GOLD - DEFENDANT (N.T.A.'s ONLY)

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ADMIN		PROBABLE CAUSE AFFIDAVIT		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 06-17-098666									
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:					
Name (Last, First, Middle) Withey, Jason, Robert		Alias		Race W		Sex M		Date of Birth 03/08/1977					
Charge Description SIMPLE BATTERY (DOMESTIC RELATED)		784.03 (1)(A)(1)		Charge Description									
Charge Description				Charge Description									
Victim's Name (Last, First, Middle) Nocha, Danielle, Nicole		Race W		Sex F		Date of Birth 11/08/1984							
Local Address (Street, Apt. Number) 4329 Springfield St, Lake Worth, FL 33461		(City)		(State)		(zip)		Phone (561) 720-5644		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. The Person taken into custody</p> <p><input 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.</p> <p><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.</p> <p>On the 05 day of JULY 20 17 at 0115 <input checked="" type="checkbox"/> A.M. <input type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)</p> <p>On Wednesday, July 5th 2017, at approximately 0110 hours, I responded to 4329 Springfield Street, Lake Worth, FL 33461, in reference to a domestic dispute. While en-route, Palm Beach County Sheriff's Office (PBSO) Dispatch advised they were on the phone with a female later identified as Danielle Nocha who stated that her husband defendant, Jason Withey choked and pushed her. Upon my arrival, I spoke to Nocha who stated that Withey arrived home and invited her into his room. She stated once inside they began to get into a verbal argument. She stated that Withey grabbed her by her neck and pushed her up against the wall. I asked her if he choked her and she stated "no it was only a push" I asked if she was blocking his path to exit and she stated "No". It should be known, Nocha did not have any marks on her person. Her skin was slightly red from her demonstrations to me about what occurred.</p> <p>At this time, I spoke to Withey who told me that Nocha instigated the argument and he never touched her. He stated that she just had him arrested recently and has been taken his lawyers advise of staying away from her. Withey stated that Nocha suffers from a mental illness and is lying.</p> <p>I spoke with Nocha again and explained the severity of filing a false police report. Nocha provided a sworn recorded statement of her testimony and understood the consequences of filing a false report. At this time, I find probable cause exist to arrest Withey for Simple Battery (Domestic Related), pursuant to Florida Statute 784.03(1)(A)(1).</p>													
<p>STATE OF FLORIDA COUNTY OF PALM BEACH</p> <p>D/S J.TOLBERT</p> <p>(Signature of Arresting/Investigative Officer)</p> <p>The foregoing instrument was sworn to or affirmed and subscribed before me this 5th day of July 20 17 by D/S J.Tolbert</p> <p>(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced LEO</p> <p>D/S J.JURADO 20332</p> <p>Notary Public, Clerk of Court, Officer (F.S.S. 117.10)</p>													
PAGE 1 OF 1													