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N/R 2019CF008290 P3085  
AMB

ARREST / NOTICE TO APPEAR  
Juvenile Referral Report

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

ADMINISTRATIVE	OBTS Number		Agency ORI Number <b>FLO 500000</b>		Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>		Agency Report Number (N.T.A.'s only) <b>06-19-110205</b>				
	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 1. Yes 2. No		Multiple Clearance Indicator 1						
	Location of Arrest (including Name of Business) <b>8898 Lyons Road, Boynton Beach, FL 33472</b>				Location of Offense (Business Name, Address) <b>8898 Lyons Road #P-210, Boynton Beach, FL 33472</b>						
DEFENDANT	Date of Arrest <b>08/31/2019</b>		Time of Arrest <b>1528</b>		Booking Date		Booking Time				
	Name (Last, First, Middle) <b>Marin Nava, Jetzer, Jose</b>		Alias (Name, DOB, Soc. Sec. #, Etc.)								
	Race W - White 1 - American Indian B - Black 0 - Oriental/Asian		Sex W M	Date of Birth <b>06/2/1992</b>	Height <b>5'8"</b>	Weight <b>200</b>	Eye Color <b>Brown</b>	Hair Color <b>Black</b>	Complexion <b>light</b>	Build <b>Medium</b>	
CO-DEF	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) <b>Scar left cheek</b>				Marital Status <b>Married</b>	Religion <b>NONE</b>	Indication of Alcohol Influence Drug Influence Y N Unk <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
	Local Address (Street, Apt. Number) (City) (State) (Zip) <b>8898 Lyons Road, apt. P-210, Boynton Beach, FL 33472</b>				Phone <b>(786) 201-9675</b>		Residence Type: 1. City 2. County 3. Florida 4. Out of State <b>2</b>				
	Permanent Address (Street, Apt. Number) (City) (State) (Zip)				Phone		Address Source <b>Verbal</b>				
JUVENILE	Business Address (Name, Street) (City) (State) (Zip)				Phone		Occupation <b>Grounds Keeper</b>				
	DL Number, State <b>M6S1439920466, FL</b>		Soc. Sec. Number		INS Number		Place of Birth (City, State) <b>Venezuela</b>	Citizenship <b>No</b>			
	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			
NOTICE TO APPEAR	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 <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other:		Address (Street, Apt. Number) (City) (State) (Zip)				Residence Phone		Business Phone		
	Notified by: (Name)				Date	Time	Juvenile Disposition 1. Handled/processed within Dept. and Released. 2. TOT HRS (DYS) 3. Incarcerated				
CHARGE	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 365-2528) 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				
CHARGE	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 <b>Domestic Battery by Strangulation</b>		Counts <b>1</b>	Domestic Violence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number <b>784.041(2)(a) 3</b>	Violation of ORD #
	Drug Type <b>N</b>		Amount / Unit		Offense # <b>19-110205</b>		Warrant / Capias Number		Bond <b>NONE</b>		
CHARGE	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 #				
CHARGE	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		
NOTICE TO APPEAR	Location (Court, Room Number, Address)										
	Court Date and Time Month Day Year Time 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 <b>08/31/2019</b>										
ADMIN	Signature of Defendant (or Juvenile and Parent /Custodian)				Date Signed						
	HOLD for other Agency Name:		Signature of Arresting Officer <b>D/S J. Frommer</b>			Name Verification (Printed by Arrestee)					
	<input type="checkbox"/> Dangerous <input type="checkbox"/> Related Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other:		Name of Arresting Officer (Print) <b>D/S J. Frommer</b>			(PRINT) <b>SCANNED</b> PAGE					
Mental Health #		Transporting Officer <b>D/S J. Frommer</b>			ID # <b>31297</b>		Agency <b>PBSO</b>		Witness here if subject signed with me <b>SEP 01 2019</b> OF 1		

OBTS Number		<b>PROBABLE CAUSE AFFIDAVIT</b>		1. Arrest	3. Request for Warrant	1	Juvenile	N
ADMIN	Agency ORI Number	Agency Name	Agency Report Number					
	<b>FLO 50000</b>	<b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>	<b>06- 19-110205</b>					
CHARGES	Charge Type: Check as many as apply.		Special Notes:					
	<input checked="" type="checkbox"/> 1. Felony	<input 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					
DEF	Name (Last, First, Middle)		Alias	Race	Sex	Date of Birth		
	<b>Marin Nava, Jetzer, Jose</b>			W	M	06/2/1992		
CHARGES	Charge Description		Charge Description					
	Domestic Battery by Strangulation		784.041(2)(a)					
VICTIM	Victim's Name (Last, First, Middle)		Race	Sex	Date of Birth			
	<b>Briceno, Mariam,</b>		W	F	12/28/1993			
VICTIM	Local Address (Street, Apt. Number)		(City)	(State)	(zip)	Phone	Address Source	
	8898 Lyons Road, apt. P-210, Boynton Beach, FL. 33472					(561) 513-7768		
VICTIM	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 <u>31st</u> day of <u>August</u> 20<u>19</u> at <u>1528</u> <input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)</p>								
<p>On Saturday, August 31st, 2019, at approximately 1241 hours, I responded to 2360 North Federal Highway, Boynton Beach, Florida, in reference to a delayed domestic battery that occurred at 8898 Lyons Road, apt. P-210, in unincorporated Boynton Beach, Florida.</p> <p>Upon my arrival, I made contact with the victim, Mariam Briceno. It should be noted that D/S Lasso #19729 translated due to Ms. Briceno not speaking English. Ms. Briceno advised that on 8/29/2019 at approximately 2130 hours, her and her husband, Jetzer Marin Nava, got into an argument over Ms. Briceno finding Jetzer with another female. During the argument, Ms. Briceno attempted to leave the apartment. As she was walking toward the door Briceno grabbed her by the hair and pulled her back toward him to prevent her from leaving. Jetzer then covered Ms. Briceno's mouth with his hand which caused a minor cut to her bottom lip. Jetzer then slid his hand down to Ms. Briceno's neck, squeezed her neck, and began to choke her. Ms. Briceno stated that she had a very difficult time breathing due to Jetzer choking her. Ms. Briceno then broke free from Jetzer's grip and again attempted to leave the apartment because she was extremely scared of Jetzer and that he would continue hurting her. As Ms. Briceno was walking toward the door, Jetzer grabbed her purse and her cell phone from her back pocket. Ms. Briceno was too scared to attempt to get her property back so she left the residence without her belongings and started running away. It should be noted that Ms. Briceno was holding their 1 year old son in her arms during the entire incident. The child was not harmed.</p> <p>While speaking with Ms. Briceno, I could observed scratches and bruising on her neck that is consistent with someone being choked. Digital photographs were taken of Ms. Briceno's injuries. Ms. Briceno was issued a victim rights brochure. She did not want to complete a sworn written statement due to her being too scared.</p> <p>I then responded to 8898 Lyons Road and located Jetzer in the office of Bay 2. I utilized Security Officer Chrismonde Servius for Spanish translation due to Jetzer not speaking english. Jetzer was read his miranda warning in spanish and he advised that he understood his rights. Jetzer admitted that they were arguing over him being with another woman and that he pulled Ms. Briceno by her hair in attempts to keep her from leaving. Jetzer also admitted that he took her purse and phone from her in hopes that she wouldn't leave. Jetzer denied smacking her mouth and grabbing her by the neck. Jetzer stated that Ms. Briceno did not touch him and that he had no injuries.</p> <p>Based on the above facts, I find there probable cause to charge Jetzer Marin Nava with domestic battery by strangulation due to him smacking her in the mouth and then using his hand to choke her. Jetzer was placed under arrest and was transported and lodged in the Palm Beach County Jail.</p>								
<p>STATE OF FLORIDA COUNTY OF PALM BEACH</p> <p><i>[Signature]</i> D/S J. Frommer (Signature of Arresting/Investigative Officer)</p> <p>The foregoing instrument was sworn to or affirmed and subscribed before me this <u>31</u> day of <u>August</u> 20<u>19</u> by <u>D/S J. Frommer</u></p> <p>(Print name of Arresting/Investigative Officer, who is personally known to me and/or produced identification. Type of identification produced <u>LE ID</u>)</p> <p><i>[Signature]</i> Notary Public, Clerk of Court, Officer (F.S.S. 17.10)</p>								
PAGE _____ OF _____								

# VICTIM NOTIFICATION FORM

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

- Homicide (Ch. 782)
- Attempted Murder
- Stalking (F.S. 784.048)
- 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.)
- Sexual Offense (Ch. 794)
- Attempted Sexual Offense

Upon completion, this form must accompany the booking paperwork.  
If applying for a warrant, attach this form to the filing packet.

1. Incident Report #: 19-110205 Agency: PBSO  
Offense: Domestic Battery by Strangulation  
Suspect/Offender: Marin Nava, Jetzer, Jose  
D.O.B. 06/2/1992 Race: W Sex: M

2. Warrant # (s): \_\_\_\_\_

3.a. Victim's name: Briceno, Mariam D.O.B. 12/28/1993 Race: W Sex: F  
Address: 8898 Lyons Road, apt. P-210  
City: Boynton Beach, FL. 33472  
Home #- (561) 513-7768 Work #: 0 Other: \_\_\_\_\_

b. Victim's next of kin, friend or neighbor: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
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: Briceno, Mariam

Deputy's Name: D/S J. Frommer I.D.# 3297 Date: 08/31/2019  
White/Corrections or State Attorney (Warrant Application) Yellow/Warrants Section Pink/Central Records

SUSPECT/OFFENDER: **Marin Nava, Jetzer, Jose** COURT CASE/WARRANT# \_\_\_\_\_  
(FOR WARRANTS USE ONLY)