

Jail 0290348

ARREST / NOTICE TO APPEAR

116mm 12531 ANB

3215

AD M I N I S T R A T I O N	OBTS Number	Agency ORI Number 0501700		Agency Name Jupiter Police Department		Agency Report Number (N.T.A.'s only) 5 4 16-004929		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: <input 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		If Weapon Seized Enter Type NONE		Multiple Clearance Indicator																																																																																																						
	Location of Arrest (Including Name of Business) 125 DOCKSIDE CIR, JUPITER, FL					Location of Offense (Business Name, Address) 125 DOCKSIDE CIR, JUPITER, FL 33477																																																																																																					
	Date of Arrest 10/12/2016		Time of Arrest 23:19		Booking Date 10/12/2016		Booking Time 23:40		Jail Date		Jail Time		Location of Vehicle																																																																																														
C O D E F	Name (Last, First, Middle) MENDIGUREN, JON MICHAEL												Alias: WEST PALM BEACH,																																																																																														
	Race W - White B - Black O - Oriental/Asian W		Sex M		Date of Birth 02/01/1974		Height 5'11		Weight 200		Eye Color BROWN		Hair Color BROWN		Complexion LIGHT		Build 19																																																																																										
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)												Marital Status D		Religion		Indication of: Alcohol Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk. <input type="checkbox"/> Drug Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk. <input type="checkbox"/>		Residence Type: 1. City 2. County 3. Florida 4. Out of State		Address Source FL ID																																																																																						
	Local Address (Street, Apt. Number) 150 HAMPTON CIR, JUPITER, FL 33458						(City) JUPITER		(State) FL		(Zip) 33458		Phone (561) 262-6440		Occupation Pool Builder																																																																																												
	Permanent Address (Street, Apt. Number) 150 HAMPTON CIR, JUPITER, FL 33458						(City) JUPITER		(State) FL		(Zip) 33458		Phone (561) 262-6440		Occupation Pool Builder																																																																																												
	Business Address (Name, Street) 150 HAMPTON CIR, JUPITER, FL 33458						(City) JUPITER		(State) FL		(Zip) 33458		Phone (561) 262-6440		Occupation Pool Builder																																																																																												
	D/L Number, State M532433740410 / FL				Soc. Sec. Number [REDACTED]				INS Number [REDACTED]				Place of Birth (City, State) WEST PALM BEACH, FL				Citizenship U.S. Born																																																																																										
	Co-Defendant Name (Last, First, Middle)				Race				Sex				Date of Birth				<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 6. Other																																																																																										
	Co-Defendant Name (Last, First, Middle)				Race				Sex				Date of Birth				<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 6. Other																																																																																										
	J U V E N I L E	<input type="checkbox"/> Parent <input type="checkbox"/> Other: OR Name (Last, First, Middle) [REDACTED]												Residence Phone																																																																																													
<input type="checkbox"/> Legal Custodian Address (Street, Apt. Number) [REDACTED]												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.												Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				Description of Property				Value of Property																																																																																							
<input type="checkbox"/> Yes, by: <input type="checkbox"/> No: <input type="checkbox"/> Other: OR												Drug Type N. N/A A. Amphetamine				B. Barbiturate C. Cocaine E. Heroin				H. Hallucinogen M. Marijuana O. Opium/Deriv.				P. Paraphernalia/ Equipment S. Synthetic				U. Unknown Z. Other																																																																															
Charge Description DISORDERLY CONDUCT - DISORDERLY INTOXICATION												Statute Violation Number 856.011				Violation of ORD #																																																																																											
Drug Activity N				Drug Type N				Amount / Unit /				Offense # 16-004929				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 #																																																																																											
Drug Activity				Drug Type				Amount / Unit				Offense #				Counts				Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N				Warrant / Capias Number				Bond																																																																															
Charge Description												Statute Violation Number				Violation of ORD #																																																																																											
Drug Activity				Drug Type				Amount / Unit				Offense #				Counts				Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N				Warrant / Capias Number				Bond																																																																															
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 Explain:																																																																																														
	Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> T.O.T. County Jail												PROPERTY - Received By												Released By				Released To																																																																														
	<input type="checkbox"/> Posted Bond <input type="checkbox"/> South County Mental Health												Date Transported												Time Transported				Other																																																																														
	Transported By												Location (Court, Room) North County PALM BEACH GARD												Court Date and Time 11/16/2016 08:30:00												No Photo Available																																																																						
	<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.												I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT I SHOULD 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 [REDACTED]												Name Verification (Printed by Arrestee) [REDACTED]																																																																																		
	<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other												Name of Arresting Officer (Print) KITCHENS, GUY W.												I.D. # 1156												PAGE 1 OF 1																																																																						
	Intake Deputy												Transporting Officer KITCHENS												I.D. # 381												Agency JUPITER												Witness here if subject signed with an "X".																																																										
	A D M I N I S T R A T I O N												J U V E N I L E												C O D E F												C H A R G E												C H A R G E												C H A R G E												I N T A K E												N O T I C E												T O A P P E A R										

OCT 13 2016

PROBABLE CAUSE AFFIDAVIT

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

1

JUVENILE

OBTS Number

Agency ORI Number

FL 0501700

Agency Name

JUPITER POLICE DEPARTMENT

Agency Report Number

5 4 16-004929

Charge Type:
Check as many
as apply.

☐ 1. Felony

☐ 2. Traffic Felony

☒ 3. Misdemeanor

☐ 5. Ordinance

☐ 4. Traffic Misdemeanor

☐ 6. Other

Special Notes:

Name (Last, First, Middle)

MENDIGUREN, JON MICHAEL

Alias

Race

Sex

Date of Birth

W

M

02/01/1974

Charge Description

856.011 DISORDERLY CONDUCT - DISORDERLY INTOXICATION

Charge Description

Charge Description

Charge Description

Victim's Name (Last, First, Middle)

FLORIDA,

Race

Sex

Date of Birth

02/09/1925

Local Address (Street, Apt. Number)

(City)

(State)

(Zip)

210 MILITARY TRL, JUPITER, FL 33458

Phone

(561) 799-4445

Address Source

Business Address (Name, Street)

(City)

(State)

(Zip)

Phone

(561) 746-6201

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.

☐ confessed to

admitting to the below facts.

☐ was observed by

who told

that he/she saw the arrested person commit the below acts.

☒ was found to have committed the below acts, resulting from my (described) investigation.

On the 13 day of October, 2016 at 00:09 (Specifically include facts constituting cause for arrest.)

On 10-12-16 at approximately 2226 hours I responded to 125 Dockside Circle (Calaveras Cantina) in reference to an intoxicated subject who was refusing to leave. Upon arrival I made contact with Manager Chris Acosta (W/M 4-14-83) who stated the following:

"A male wearing a blue shirt and white shorts was asked to leave after causing a disturbance. He is highly intoxicated and yelling at random people. He is now sitting near the road across from the Cantina. I would like him trespassed indefinitely."

Officer Kolenich and I made contact with the suspect Jon Mendiguren (W/M 2-1-74). Mendiguren was sitting on the side of a road on a concrete planter with his head in his hands. I informed Mendiguren I was a Jupiter Police Officer and that I needed his identification. Mendiguren began to say over and over, "It's all good bro." I asked Mendiguren again for his identification again he handed me his cell phone. Officer Kolenich then picked up Mendiguren's wallet and removed the driver's license from it. I could smell and unknown alcoholic beverage coming from Mendiguren's person. Mendiguren had difficulty standing and slurred all of his words as he talked. I informed Mendiguren that he was trespassed indefinitely from Calaveras Cantina. Mendiguren stated again, "It's all good bro," over and over.

I requested our dispatch to call a taxi for Mendiguren. As we waited with the suspect, Mendiguren began yelling at the top of his lungs, "Oh yeah!" repeatedly. Officers informed Mendiguren to not yell due to the Wyndamn Hotel rooms right above us. We informed him that we was causing a disturbance and needed to stop immediately. While continuing to wait for the taxi Mendiguren would randomly yell out things to customers across the street at the Cantina. I informed him that I would not warn him again and to stop causing a disturbance or he would go to jail.

I was informed by dispatch at this current time that the taxi company forgot to place

SWORN AND SUBSCRIBED BEFORE ME

NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

10/13/2016

DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

KITCHENS, GUY WILLIAM (1156)

NAME OF OFFICER (PLEASE PRINT)

10/13/2016

DATE

PAGE

1 OF 2

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.

OBTS Number		PROBABLE CAUSE AFFIDAVIT SUPPLEMENT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	JUVENILE
Agency ORI Number FL 0501700		Agency Name JUPITER POLICE DEPARTMENT		Agency Report Number 5 4 16-004929					
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) MENDIGUREN, JON MICHAEL		Alias		Race W		Sex M		Date of Birth 02/01/1974	
<p>the call to have a taxi respond and did not know the estimated time it would show up. I asked Mendiguren if he would like a courtesy ride to his home to speed up the process and to eliminate any further disturbances by Mendiguren. Mendiguren agreed and stated that he would be calm. Once Mendiguren was in my patrol car I began to drive forward. I didn't get more than 10 feet when Mendiguren began to punch the back of my patrol car's cage and yell out, "Stop hitting me bro!" I then stopped got out and placed Mendiguren under arrest for disorderly intoxication. He was handcuffed, which were double locked and checked for proper tightness. He was transported to the Palm Beach County Jail with no issues.</p> <p>My investigation found that was unlawfully intoxicated and endangered the safety of another person or property, or was intoxicated or drank an alcoholic beverage in a public place or in or upon a public conveyance and caused a public disturbance, contrary to Florida Statute 856.011(1).</p>									
<div style="font-size: 4em; opacity: 0.1; transform: rotate(-30deg); position: absolute; top: 50%; left: 50%;">NOT A CERTIFIED COPY</div>									
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>SWORN AND SUBSCRIBED BEFORE ME</p> <p><i>[Signature]</i> 324/090</p> <p>NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)</p> <p>10/13/2016</p> <p>DATE</p> </div> <div style="width: 45%;"> <p><i>[Signature]</i> 381</p> <p>SIGNATURE OF ARRESTING / INVESTIGATING OFFICER</p> <p>KITCHENS, GUY WILLIAM (1156)</p> <p>NAME OF OFFICER (PLEASE PRINT)</p> <p>10/13/2016</p> <p>DATE</p> </div> </div>									
								PAGE 2 OF 2	

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.