

JW# 0484408

17MM497 MB Pct# 1784

| | | | | | | | | | | | | | | |
|--|-------------------------------|---|--|----------------------|--|--|--|---|---|--|--|---|----------------------------|------------------------|
| OBTS Number | | | ARREST / NOTICE TO APPEAR Juvenile Referral Report | | | | | | 1. Arrest 3. Request For Warrant 2. N.T.A. 4. Request For Capias | | 1 | Juvenile | N | |
| Agency OR# Number FLO 5 0 0 0 0 0 | | Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE | | | | | | Agency Report Number 06 | | 17025764 | | | | |
| Charge Type Check or mark as apply | | <input type="checkbox"/> 1. Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor | | | <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other | | | If Weapon Seized | | Multiple Circumstances Indicator | | | | |
| Location of Arrest (including Name of Business) 10200 FOX TRAIL RD ROYAL PLM BCH 33411 | | | | | | | | | | | | Location of Offense (including Name of Business) 112 CONASKONK CIR ROYAL PLM BCH 33411 | | |
| Date of Arrest Jan 12, 2017 | Time of Arrest 1659 | Booking Date | Booking Time | Jail Date | | Jail Time | | Location of Vehicle 10200 FOX TRAIL RD | | | | | | |
| Name (Last, First, Middle) KANDULA RAJANIKANTH | | | | | | | | | | | | Alias (Name, DOB, Soc. Sec. #, Etc.) | | |
| Race W- White 1- American Indian B- Black 0- Oriental/Asian | Sex O M | Date of Birth 08/10/1980 | Height 5'10" | Weight 178 | Eye Color BRN | Hair Color BLK | Complexion MED | Build MED | | | | | | |
| Scars, Marks, Tattoo, Unique Physical Features (Location, Type, Description) TATTOO LEFT SHOULDER LION HEAD | | | | | | Marital Status MARRIED | Religion HINDU | Location of Alcohol Influence Drug Influence | | <input type="checkbox"/> Y | <input type="checkbox"/> N | <input type="checkbox"/> Unk | | |
| Local Address (Street, Apt. Number) 112 CONASKONK CIR ROYAL PLM BEACH | | | | | | City ROYAL PLM BEACH | State FL | Zip 33411 | Phone 954-812-3877 | Residence Type 1. City 2. County | | 3. Federal 4. Det. of State | 1 | |
| Permanent Address (Street, Apt. Number) SAME | | | | | | City | State | Zip | Phone | Address Source DAVID | | | | |
| Business Address (Street, Apt. Number) 10200 FOX TRAIL RD | | | | | | City | State FL | Zip 33411 | Phone | Occupation DELIVERY DRIVER | | | | |
| Off. Number, State K534-720-80-290-0 FL | Social Security Number | | INS Number | | Place of Birth | | Citizenship | | INDIA | | | | | |
| Co-Defendant Name (Last, First, Middle) | | | | | | Race | Sex | Date of Birth | <input type="checkbox"/> Arrested | | <input type="checkbox"/> Felony | | | |
| Co-Defendant Name (Last, First, Middle) | | | | | | Race | Sex | Date of Birth | <input type="checkbox"/> At Large | | <input type="checkbox"/> Misdemeanor | | | |
| <input type="checkbox"/> Parent Legal Guardian Other | | Name (Last, First, Middle) | | | | | | <input type="checkbox"/> Juvenile | | <input type="checkbox"/> 3. Felony | | | | |
| Address (Street, Apt. No.) | | | | | | City | State | Zip | Business Phone | | | | | |
| Notified By (Name) | | | | | | Date | Time | Arrestee Disposition 1. Fined/Released with Det. and Released | | 2. TOT HR&DYS 3. Incarcerated | | | | |
| Released To (Name) | | | | | | Relationship | | Date | | Time | | | | |
| The above address was provided by <input type="checkbox"/> Victim/relative <input type="checkbox"/> defendant/parent. The child and/or parent was told to keep the Juvenile Court Clerk's Office (Phone 201-355-2522) informed of any other change <input checked="" type="checkbox"/> Yes, by (Name) <input type="checkbox"/> No, (Reason) | | | | | | School Attended | | | | Grade | | | | |
| Property Crime? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | | | | | Description of Property | | | | Value of Property | | | | |
| Drug Activity H. 109 P. Potests | | | | | | R. Smuggl B. Buy T. Traffic | K. Importer D. Other E. Use | M. Manufacture/ Produc Deliver | Z. Color | Drug Type N. N/A A. Amphetamine | B. Narcotic C. Cocaine E. Heroin | H. Hallucinogen I. Marijuana | J. Psychot K. Marijuana | L. Cocaine Z. Other |
| Charge Description BATTERY | | | | | | Counts 1 | Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N | Statute Violation Number 784.03(1)(A)(1) | | Violation or ORD. # | | | | |
| Drug Activity N | Drug Type N | Amount/Unit N/A | Offense # 17025764 | | Counts | Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N | Statute Violation Number | | Violation or ORD. # | | | | | |
| Charge Description | | | | | | Counts | Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N | Statute Violation Number | | Violation or ORD. # | | | | |
| Drug Activity | Drug Type | Amount/Unit | Offense # | | Counts | Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N | Statute Violation Number | | Violation or ORD. # | | | | | |
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| Drug Activity | Drug Type | Amount/Unit | Offense # | | Counts | Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N | Statute Violation Number | | Violation or ORD. # | | | | | |
| Location (Court, Address, Room Number) | | | | | | Counts | Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N | Statute Violation Number | | Violation or ORD. # | | | | |
| Court Date and Time | | | | | | Counts | Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N | Statute Violation Number | | Violation or ORD. # | | | | |
| Month | Day | Year | Time | | Counts | Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N | Statute Violation Number | | Violation or ORD. # | | | | | |
| I AGREE TO APPEAR AT THE ABOVE 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 Name | | | Signature of Arresting Officer D/S B. Ernstam 8783 | | | Name Verification (Printed by Arrestee) | | | | | | | | |
| <input type="checkbox"/> Dangerous <input type="checkbox"/> Seized | | | Name of Arresting Officer D/S B. ERNSTAM | | | ID # 8783 | | | (PRINT) | | | | | |
| Intake Deputy | | | Transporting Officer ID # D/S B. Ernstam 8783 PBS | | | Agency | | | | | | | | |
| Witness here if subject signed with an "X" | | | | | | | | | | | | | | |

OBTs Number

PROBABLE CAUSE AFFIDAVIT

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

1

Juvenile

N

Agency ORI Number

FLO 5 0 0 0 0

Agency Name

PALM BEACH COUNTY SHERIFF'S OFFICE

Agency Report Number

06

17025764

Charge Type:

Check as many

as apply

1. Felony

3. Misdemeanor

2. Traffic Felony

4. Traffic Misdemeanor

5. Ordinance

6. Other

Special Notes

Defendant Name (Last, First, Middle)

KANDULA

RAJANIKANTH

Race

Sex

M

Date of Birth

08/10/1980

Charge

BATTERY

Charge

Charge

Charge

Victim Name

Local Address

Business

The

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 (described) investigation.

On the 12TH day of JANUARY 2017 at 4:00

□ AM PM

I responded to _____ in reference to a domestic battery allegation. Upon my arrival, I spoke to the complainant, _____ who advised the following: On 1/11/2017 she was at her friend's home and when she returned home at approximately 1800 hrs, her husband, Rajanikant Kandula, became angry at her, stating that she was staying out too late during the day. They argued for approximately 2 hours, and the argument got heated, and he grabbed her by the front of the neck and applied pressure. She stated she was able to breathe the whole time he was applying pressure to her neck. She stated over the course of the argument, he began to leave, and she stood in front of the door and would not let him leave; she wanted to talk it over. He then grabbed her and was choking her from the back. She advised she did not lose consciousness and her normal breathing was not impeded. I observed a small scratch on her forehead, a small red mark on her chin and a small bruise on her left finger. She completed a sworn written statement attesting to the above.

Based on the investigation above, I believe there to be probable cause to charge Kandula with domestic battery contrary to F.S.S. 784.03(1)(a)(1). D/S Flores responded to Kandula's workplace and took him in to custody. I interviewed Kandula after reading him Miranda rights. He advised that when _____ returned home, he made a comment that she can stay out late yet when he is home late from work she complains. They got in to a verbal argument and were on their way to eat dinner when the arguing continued, and Kandula was driving and made a U-turn to go back home. When they returned home the argument continued. He stated _____ began hitting him in his face and groin, and he told her he didn't want to fight with her. He told her they could go their separate ways if she was unhappy. She told him to get out of her house, and he went to leave, but she then tried to prevent him from leaving. She continued to hit him in the face and chest as he tried to leave, and then threw his car keys away. He then decided he was going to defend himself, and as she went to hit him, he put his arms up and pushed her away. He advised they both fell on the floor. She slept on the couch and he slept in the bedroom.

Kandula was transported to the County Jail without incident.

The foregoing instrument was sworn to and affirmed before me this

12th

day of

January

20

17

, by:

D/S C. Flores 8478

D/S B. Ernstam 8783

Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)

D/S C. Flores 8478

Name of Arresting/Investigating Officer

8783

Signature of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)

Signature of Arresting/Investigating Officer

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1 of 1

Palm Beach County Sheriff's Office
DOMESTIC VIOLENCE/DATING VIOLENCE SUPPLEMENTAL PROBABLE CAUSE FORM
(Submit this form with the original Probable Cause Affidavit)

Defendant: **KANDULA RAJANIKANTH**

DOB: **08/10/1980** Case #: **17025764**

Victim: _____

Relationship between Victim and Defendant: _____

Photographs: Scene Yes No Victim Yes No Defendant Yes No

911 Call: Yes No Caller: _____ Victim: _____

Weapon Used: Yes No Type: _____

Witness: Yes No Name: _____

Victim Pregnant: Yes No If yes, _____ Weeks _____ Months

Injuries: Yes No Description: _____ Scratches

Medical Treatment: Yes No

At Scene: Yes No Paramedics: _____

At Hospital: Yes No Hospital: _____ Physician: _____

Are children living in the home? Yes No DCF Notified? Yes No

Name: _____ DOB: _____

Name: _____ DOB: _____

Name: _____ DOB: _____

Injunction: Yes No Case #: _____

No Contact Order: Yes No Case #: _____

Alcohol or Drugs: Yes No Unknown

Prior history of Domestic/Dating Violence Yes No

Defendant's statements Yes No If yes, written recorded oral

First words Defendant said when you responded to scene: **N/A**

Victim's statements Yes No If yes, written recorded oral

First words Victim said when you responded to scene: **Stated she and her husband got in to a fight and he choked her**

Did the Victim contact anyone other than the police within an hour of the incident regarding the incident?

Yes No If yes, name: _____ phone: _____

Observations of Victim (Physical & Emotional): **Crying**

Upset Crying Fearful Hysterical Afraid Calm Nervous

Complained of pain Other _____

Victim contact information:

Local Address: _____

Phone: _____ Home: _____ Work: _____ Cell: _____

Employer: _____

Name of Relative: _____ Phone: _____

VICTIM NOTIFICATION FORM

SUSPECT/OFFENDER:

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

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)
- **Sexual Offense** (Ch. 794)
- **Attempted Sexual Offense**
- **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 #: 17-OR 5764 Agency: PBSO
Offense: Domestic Battery
Suspect/Offender: Rajan;Karthik Mandala
D.O.B. 8/10/1980 Race: Other Sex: Male
2. Warrant #(s): NIA
- 3.a. Victim's name: [REDACTED]
Address: [REDACTED]
City: [REDACTED]
Home #: [REDACTED] Work #: [REDACTED] Other: [REDACTED]
- b. Victim's next of kin, friend or neighbor: [REDACTED]
Address: [REDACTED]
City: [REDACTED]
Home #: [REDACTED] Work #: [REDACTED] Other: [REDACTED]

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: _____

Deputy's Name: DIS B. Enstad I.D. # 8783 Date: 1/2/17

White/ Corrections or State Attorney (Warrant Application) Yellow/Warrants Section Pink/Central Records
PBSO #00228A REV. 4/09