

0401563

1701² 1469 315ARREST/NOTICE TO APPEAR
Juvenile Referral Report

Check if Supplement is Attached

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

Juvenile

ADMINISTRATIVE	OBTS Number		Agency ORI Number		Agency Name		Agency Report Number (N.T.A.'s Only)		Check if Supplement is Attached		Juvenile	
	FLO 5 0 0 6 0 0		PALM BEACH POLICE DEPARTMENT		7 6 - 1 7 - 0 0 0 2 3 9							
	Charge Type: <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		If Weapon Seized		Enter Type:		Multiple Clearance Indicator		U K			
	Location of Arrest (Including Name of Business)		400 BLK Brazilian Ave		Location of Offense (Business Name, Address)		400 BLK Brazilian Ave					
DEFENDANT	Date of Arrest		Time of Arrest		Booking Date		Booking Time		Jail Date		Jail Time	
	0 2 1 0 1 7		2 1 2 8									
	Name (Last, First, Middle)		Mazza, Keith, Michael		Alias (Name, DOB, Soc. Sec. #, Etc.)							
	Race		W-White		Sex		M		Date of Birth		1 2 3 1 8 1	
CO-DEF	Height		5 1 0		Weight		1 6 2		Eye Color		BRN	
	Hair Color		BRN		Complexion		Fair		Build		Thin	
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)				Marital Status				Religion			
	Local Address (Street, Apt. Number)		(City)		(State)		(Zip)		Phone		()	
JUVENILE	Permanent Address (Street, Apt. Number)		(City)		(State)		(Zip)		Phone		()	
	Business Name (Name, Street)		(City)		(State)		(Zip)		Phone		()	
	DVL Number, State		M 2 0 0 5 1 3 8 1 4 7 1 0, FL		Soc. Sec. Number				INS Number			
	Co-Defendant (Last, First, Middle)				Place of Birth (City, State)		Elizabeth, NJ		Citizenship		US	
CHARGE	Co-Defendant (Last, First, Middle)				Race		Sex		Date of Birth			
	Co-Defendant (Last, First, Middle)				Race		Sex		Date of Birth			
	Parent		Name (Last)		(Middle)		Residence Phone		()			
	Legal Custodian		Name (Last)		(Middle)		Residence Phone		()			
NOTICE TO APPEAR	Address (Street, Apt. Number)		(City)		(State)		(Zip)		Business Phone		()	
	Notified By: (Name)				Date		Time		Juvenile Disposition			
	Released To: (Name)				Relationship		Date		1. Handled/Processed within Dept. and Released		2. TOTAL HOURS/DAYS	
	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.				School Attended		Grade		3. Incarcerated			
ADMIN	Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property		Value of Property							
	Drug Activity		S. Sell		R. Smuggle		K. Dispense/Distribute		M. Manufacture/Produce/Cultivate		Z. Other	
	N. N/A		B. Buy		D. Deliver		E. Use					
	P. Possess		T. Traffic									
CHARGE	Charge Description		Possession of Heroin		Counts		2		Domestic Violence		<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	
	Drug Activity		P		Drug Type		E		Amount/Unit		.29g	
	Offense #		17-239		Statute Violation Number		8 9 3 1 3		Warrant/Capias Number		(1)(a)(1)	
	Bond				Violation of ORD #							
CHARGE	Charge Description		Possession of Controlled Substance IV		Counts		1		Domestic Violence		<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	
	Drug Activity		P		Drug Type		A		Amount/Unit		.13g	
	Offense #		17-239		Statute Violation Number		8 9 3 1 3		Warrant/Capias Number		(1)(a)(2)	
	Bond				Violation of ORD #							
CHARGE	Charge Description		Possession of Paraphernalia		Counts		1		Domestic Violence		<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	
	Drug Activity		P		Drug Type		P		Amount/Unit		1	
	Offense #		17-239		Statute Violation Number		8 9 3 1 4 7		Warrant/Capias Number			
	Bond				Violation of ORD #							
CHARGE	Charge Description				Counts				Domestic Violence		<input type="checkbox"/> Y <input type="checkbox"/> N	
	Drug Activity				Drug Type				Amount/Unit			
	Offense #				Statute Violation Number				Warrant/Capias Number			
	Bond				Violation of ORD #							
NOTICE TO APPEAR	Location (Court, Room Number, Address)				Court Date and Time				Month		Day	
	Month		Day		Year		Time		A.M.		P.M.	
	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 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					
	Signature of Defendant (or Juvenile and Parent/Custodian)				Date Signed							
ADMIN	HOLD for other agency				Signature of Arresting Officer		Name Verification (Printed by Arrestee)		(PRINT)			
	<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other:				Signature of Arresting Officer		Name Verification (Printed by Arrestee)		(PRINT)			
	Make Identifying Mark		Pouch #		Transporting Officer		I.D. #		Agency		PAGE	
	Thomas E. E.				Michele E.		9214		PBP		1 OF 1	

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 0500600	Agency Name PALM BEACH POLICE DEPARTMENT	Agency Report Number 7 6 17-000239	
Charge Type: Check as many as apply <input checked="" 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) MAZZA, KEITH MICHAEL	Alias	Race W	Sex M Date of Birth 12/31/1981
Charge Description 893.13(1A)(1) POSSESSION OF HEROIN	Charge Description 893.13(1)(A)(2) POSS LSD SELL/POSS/MANUF/CONTROLLE		
Charge Description 893.147 POSSESSION/USE DRUG PARAPHERNALIA	Charge Description		
Victim's Name (Last, First, Middle) State Of Florida	Race	Sex	Date of Birth
Local Address (Street, Apt. Number) (City) (State) (Zip)	Phone	Address Source	
Business Address (Name, Street) (City) (State) (Zip)	Phone	Occupation	
<p>The undersigned certifies and swears that he/she has just and resonable grounds to believe, and does believe that the above named Defendant committed the following violation of law.</p> <p>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 committ 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 10 day of February, 2017 at 21:28 (Specifically include facts constituting cause for arrest.)</p> <p>On February 10, 2017 at approximately 2128 hours, Sergeant Walley and Officer Pumalo observed a white male on the corner of Cocconut Row and Brazilian Avenue that appeared to be intoxicated. I arrived on scene and observed the white male leaning and almost falling backwards. I made contact with the male who was verbally identified as W/M Keith M. Mazza DOB: 12/31/1981.</p> <p>While speaking with Mazza, his speech was extremely slurred and he was unable to keep his balance. Mazza stated he was just getting off of work at Bice Restaurant, which is located at 313 1/2 Worth Ave and stated he only had one drink of vodka. I asked Mazza if he had anything in his pockets and Mazza stated no. I asked Mazza if he would empty his pockets at which time he stated yes. Mazza then emptied his shirt pocket and pulled a hand rolled cigarette. Mazza stated that the cigarette contained marijuana. Mazza was subsequently patted down for any other illegal contraband, at which time a small plastic baggie was located in his left sock. Inside of the baggie was two small clear capsules containing a brown powder, one green pill with S 90 written on top and a small straw with narcotic residue within.</p> <p>I read Mazza his Miranda Rights from a pre-printed card provided by The Palm Beach Police Department. Mazza stated he understood each right and signed the card confirming the same. Post Miranda, I asked Mazza what was inside the baggie and he stated the brown pills were Heroin and the small green pill was possibly Xanax. Mazza also stated the small straw was used to "snort" the Heroin. The brownish substance within the pill was tested utilizing a Sirchie NAR 10022 Test Kit. The test yielded a positive result for Heroin. Both pills together weighed 0.29 grams. I contacted Poison Control (case# M3558679) and Mandana confirmed the green pill to be Alprazolam, which is a Schedule IV Controlled Substance. The green pill weighed 0.13 grams.</p> <p>Based on the above facts, I have probable cause to arrest Keith M. Mazza for Possession</p>			
<p>SWORN AND SUBSCRIBED BEFORE ME</p> <p>PINA, ADAM LEE NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)</p> <p>02/10/2017 DATE</p> <p>MACCARONE, DAVID R (0292140) NAME OF OFFICER (PLEASE PRINT)</p> <p>02/10/2017 DATE</p>			

PAGE
1 OF 2

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.

**PROBABLE CAUSE AFFIDAVIT
SUPPLEMENT**

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

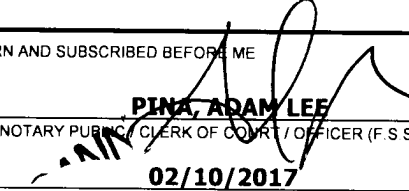

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JUVENILE

OBT'S Number		Agency ORI Number FL 0500600		Agency Name PALM BEACH POLICE DEPARTMENT		Agency Report Number 7 6 17-000239	
Charge Type: Check as many as apply		<input checked="" 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) MAZZA, KEITH MICHAEL						Race W	Sex M
Alias						Date of Birth 12/31/1981	

of Heroin in pursuant to F.S.S. 893.13 (1A) (1), Possession of Schedule IV Drug in pursuant to F.S.S. 893.13 (1) (A) (2) and Possession of Drug Paraphernalia in pursuant to F.S.S. 893.147. Mazza was transported to The Palm Beach Police Department for processing and was later transported to the Palm Beach County Jail without further incident.

NOT A CERTIFIED COPY

SWORN AND SUBSCRIBED BEFORE ME  PINA, ADAM LEE NOTARY PUBLIC, CLERK OF COURT / OFFICER (F.S.S. 117.10) 02/10/2017 DATE	 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER MACCARONE, DAVID R (0292140) NAME OF OFFICER (PLEASE PRINT) 02/10/2017 DATE
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