

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

1 Juvenile **N**

2017 199097XX

ADMINISTRATIVE	OBTS Number		Agency ORI Number FLO 500000				Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE				Agency Report Number (N.T.A.'s only) 06-17147936											
	Charge Type: Check as many as apply.		1. Felony <input type="checkbox"/>		2. Traffic Felony <input type="checkbox"/>		3. Misdemeanor <input type="checkbox"/>		4. Traffic Misdemeanor <input checked="" type="checkbox"/>		5. Ordinance <input type="checkbox"/>		6. Other <input type="checkbox"/>									
	Location of Arrest (Including Name of Business) 4200 South Ocean Blvd, Highland Beach FL 33487		Time of Arrest 0037		Booking Date		Booking Time		Jail Date		Jail Time		Location of Vehicle Interstate Towing									
DEFENDANT	Name (Last, First, Middle) Seewah Kelvin Bisaan												Alias (Name, DOB, Soc. Sec. #, Etc.)									
	Race W - White I - American Indian B - Black O - Oriental/Asian		Sex M		Date of Birth 04/10/1989		Height 5'5"		Weight 130		Eye Color Brown		Hair Color Black		Complexion Dark		Build Small					
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) Tattoo on left bicep										Marital Status Single		Religion Hindu		Indication of: Alcohol Influence <input type="checkbox"/> Drug Influence <input type="checkbox"/>		Y <input type="checkbox"/> N <input type="checkbox"/> Unk. <input type="checkbox"/>					
	Local Address (Street, Apt. Number) 222 NW 1st Avenue						(City) Hallandale, FL		(State) FL		(Zip) 33009		Phone (954) 8051659		Residence Type: 1. City <input type="checkbox"/> 2. County <input type="checkbox"/> 3. Florida <input type="checkbox"/> 4. Out of State <input checked="" type="checkbox"/>		Address Source FL DL					
	Permanent Address (Street, Apt. Number)						(City)		(State)		(Zip)		Phone		Occupation Mechanic Manager							
CO-DEF	D/L Number, State S00050289130, FL		Soc. Sec. Number		INS Number		Place of Birth (City, State) Bronx, New York				Citizenship USA											
	Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth		1. Arrested <input type="checkbox"/>		3. Felony <input type="checkbox"/>		5. Juvenile <input type="checkbox"/>							
	Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth		1. Arrested <input type="checkbox"/>		3. Felony <input type="checkbox"/>		5. Juvenile <input type="checkbox"/>							
	Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other: <input type="checkbox"/>												Residence Phone									
	Address (Street, Apt. Number)												(City)		(State)		(Zip)		Business Phone			
JUVENILE	Notified by: (Name)				Date		Time		Juvenile Disposition 1. Handled/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									
	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 DUI				Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number 316.193(1)				Violation of ORD #									
	Drug Activity N		Drug Type N		Amount / Unit		Offense # 17147936		Warrant / Capias Number				Bond									
	Charge Description				Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" 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) PALM BEACH COUNTY COURTHOUSE CRIMINAL JUSTICE COMPLEX, 3228 GUN CLUB RD, WEST PALM BEACH, FL 33406 - PH: (561) 355-2996																					
	Court Date and Time Month December		Day 7th		Year 2017		Time 0830		AM <input checked="" type="checkbox"/>		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.																					
	Signature of Defendant (or Juvenile and Parent /Custodian) <i>[Signature]</i>												Date Signed 11/05/2017									
	HOLD for other Agency Name:		Signature of Arresting Officer <i>[Signature]</i>				Name Verification (Printed by Officer) NOV 5 AM 2:24															
<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest		<input type="checkbox"/> Suicidal <input type="checkbox"/> Other:		Name of Arresting Officer (Print) Inv. Christopher Ficarra				I.D. # 8368														
Inmate Deputy Capone/720V		I.D.#		Pouch #		Transporting Officer Inv. C. Ficarra		ID # 8368		Agency PBSO		Witness here if subject signed with an "X"		PAGE 1 OF 1								

DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT (N.T.A.'s ONLY)

PBSO #148 REV. 8/97

0493093

NOV 5 AM 2:24

	PROBABLE CAUSE AFFIDAVIT	1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	Juvenile	N			
ADMIN	OBTS Number	Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 06-17-147936			
	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		
DEF	Name (Last, First, Middle) SEEWAH, KELVIN, BISAAN					Alias	Race W	Sex M	Date of Birth 04/10/1989
	Charge Description DUI		316.193(1)		Charge Description				
VICTIM	Victim's Name (Last, First, Middle) THE 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 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 checked="" 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 5TH day of NOVEMBER 20 17 at 00:45 <input checked="" type="checkbox"/> A.M. <input type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)</p> <p>ON 11/05/2017 AT 0028 HOURS, I RESPONDED TO BACKUP INV. C. FICARRA #8368, WHO RESPONDED TO A TRAFFIC STOP IN THE TOWN OF HIGHLAND BEACH. I RESPONDED TO 4200 S OCEAN. UPON MY ARRIVAL I OBSERVED A WHITE FOUR DOOR MERCEDEZ CAR BEARING A FLORIDA TAG OF 527XCA. I OBSERVED THAT THE VEHICLE HAD DAMAGE ON THE DRIVER'S SIDE, FRONT BUMBER, AND REAR BUMPER.</p> <p>AS INV. C. FICARRA WAS CONDUCTING HIS INVESTIGATION, I WAS STANDING BEHIND KELVIN SEEWAH, I OBSERVED THAT HE WAS SWAYING WHILE STANDING MORE THAN TWO INCHES IN ALL DIRECTIONS. I ALSO OBSERVED THE OBVIOUS ODOR OF AN UNKNOWN ALCOHOLIC BEVERAGE COMING FROM THE AREA WHERE KELVIN WAS STANDING, AND AS BEGAN TO SPEAK WITH INV. FICARRA, IT BECAME STRONGER.</p> <p>IT SHOULD BE NOTED THAT KELVIN DID NOT APPEAR THAT HE WAS WET, NOR DID HE APPEAR TO HAVE MOISTENED CLOTHING, AS IT APPEARED DRY.</p> <p>AS INV. FICARRA ASKED HIM IF HE HAD BEEN DRINKING, HE TOLD INV. FICARRA THAT HE HAD NOT.</p> <p>THIS IS A SUPPLEMENT TO INV. FICARRA'S REPORT.</p>									
ADMINISTRATIVE	STATE OF FLORIDA COUNTY OF PALM BEACH		INV. S. LEVEY #9415						
	(Signature of Arresting/Investigative Officer)								
	The foregoing instrument was sworn to or affirmed and subscribed before me this 5TH day of NOVEMBER 20 17 by INV. S. LEVEY								
(Print name of Arresting/Investigative Officer) who is personally known to me and/or produced identification. Type of identification produced PERSONALLY KNOWN LEO									
D/S J. YOUNG #15911									
Notary Public, Clerk of Court, Officer (F.S.S. 117.10)									
PAGE 1 OF 1									

NOT A CERTIFICATE

PROBABLE CAUSE AFFIDAVIT

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

Juvenile

OBTS Number

Agency ORI Number

Agency Name

Agency Report Number

FLO 5 0 3 8 0 0

HIGHLAND BEACH POLICE DEPARTMENT

11710725

Charge Type:
Check as many as apply

1. Felony

3. Misdemeanor

5. Ordinance

2. Traffic Felony

4. Traffic Misdemeanor

6. Other

Special Notes:

Name (Last, First, Middle)
SEEWAH KELVIN BISAAN

Race

Sex

Date of Birth

M

M

04/10/89

Charge Description

DCU

Charge Description

Charge Description

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

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.

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.

confessed to _____ admitting to the below facts.

On the 5th day of November 2017 at 0000 A.M. P.M. (Specifically include facts constituting cause for arrest.)

IN THE TOWN OF HIGHLAND BEACH PALM BEACH COUNTY, FLORIDA
AT APPROXIMATELY MIDNIGHT ON NOVEMBER 5 2017 I HEARD
AND OBSERVED A WHITE 4D MERCEDES (FLS27 XCA) DRIVING
NORTHBOUND INTO HIGHLAND BEACH DRAGGING ITEMS IN THE
UNDERCARRIAGE. THE VEHICLE SWERVED OUT OF THE
NORTHBOUND LANE SO I ACTIVATED MY EMERGENCY LIGHTS
GOT BEHIND THE MERCEDES AND CONDUCTED A TRAFFIC STOP
I WAS BEHIND THE VEHICLE WITH LIGHTS AND SIREN ON
AND THE VEHICLE / DRIVER (IDENTIFIED BY FL DL AS
KELVIN B SEEWAH DOB 4/10/89) WOULD NOT PULL OVER.
THE VEHICLE WAS UNABLE TO STAY IN THE NORTHBOUND
LANE AND DID NOT PULL OVER UNTIL I PULLED UP
ALONGSIDE AND YELLED THROUGH THE OPEN
MERCEDES WINDOWS "PULL OVER". WHEN I MADE
CONTACT WITH KELVIN SEEWAH HIS EYES WERE GLASSY.
KELVIN TOLD ME HE LEFT AVENTURA (MIAMI) AND WAS ON HIS
WAY HOME TO PEMBROKE PINES (BROWARD COUNTY) KELVIN
TOLD ME HE HAD ONE MORE MILE TO GET TO
PEMBROKE PINES. WHEN I ASKED HIM ABOUT THE
DAMAGE, HE STATED HE WASN'T AWARE OF ANYTHING

SWORN AND SUBSCRIBED BEFORE ME

WV C 28317
NOTARY PUBLIC / CLERK OF COURT / POLICE OFFICER

11/5/17
DATE

OFC Sample #077
SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

OFC W SAMPLE 077
NAME OF OFFICER (PLEASE PRINT)

11/5/17
DATE

PAGE
1 OF 2

PROBABLE CAUSE AFFIDAVIT

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

Juvenile

OBTS Number _____ Agency Name **HIGHLAND BEACH POLICE DEPARTMENT** Agency Report Number **117-0725**

Agency ORI Number **FLO 503800** Special Notes: _____

Charge Type: Check as many as apply. 1. Felony 3. Misdemeanor 5. Ordinance 2. Traffic Felony 4. Traffic Misdemeanor 6. Other _____

Name (Last, First, Middle) **SEWELL KELVIN BESAN** Alias _____ Race **C** Sex **M** Date of Birth **4-10-85**

Charge Description **DUI** Charge Description _____

Victim's Name (Last, First, Middle) **STATE OF FLORIDA** (City) _____ (State) _____ (Zip) _____ Phone _____ Address Source _____

Local Address (Street, Apt. Number) _____ (City) _____ (State) _____ (Zip) _____ Phone _____ Occupation _____

Business Address (Name, Street) _____

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. was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.

confessed to _____ admitting to the below facts. was found to have committed the below acts, resulting from my (described) investigation.

On the **5th** day of **NOV** 20**17** at **ORLA** A.M. P.M. (Specifically include facts constituting cause for arrest.)

CONT'D FROM PAGE 1

AND THEN STATED HE MAY HAVE HIT A TIRE.
 AT THIS TIME I REQUESTED A PBSO DUI UNIT
 AND DIS VEHICUL RESPONDED

PROBABLE CAUSE STATEMENT

SWORN AND SUBSCRIBED BEFORE ME

IMV C [Signature] 8368

NOTARY PUBLIC / CLERK OF COURT / POLICE OFFICER

11/5/17 DATE

[Signature] 077

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

[Signature] 077

NAME OF OFFICER (PLEASE PRINT)

11/5/17 DATE

PAGE 2 OF 2

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 4th DAY OF November 20 17, AT 2354 AM PM

SUBJECT: Seewah Kelvin Bisaan CASE NUMBER: 17147936

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: Inv. Christopher Ficarra
PERSONAL CONTACT

DRIVING PATTERN: ACTUAL PHYSICAL CONTROL (PHYSICAL EVIDENCE OR STATEMENTS PUTTING DEF. BEHIND WHEEL OF VEHICLE)

On 11/04/2017 at approximately 0028 hours I responded to the 4200 block of South Ocean Blvd, in the Town of Highland Beach, in reference to a DUI investigation. PBSO Dispatch advised that Highland Beach Police Department requested a PBSO DUI Investigator for a traffic stop that they conducted. Upon my arrival I observed a white Mercedes 4 door car bearing Florida tag 527XCA stopped on the east side of Ocean Blvd facing in the north direction. I then spoke with Highland Beach Police Officer William Semple ID:077 who stated to me the following: He had heard the vehicle traveling on the road way first because the vehicle was dragging items below it. The vehicle was also swerving as it traveling into town. Ofc. Semple was going to conduct a stop of the vehicle and conduct a welfare check because the vehicle appeared that it may have been in a crash. As he attempted to stop the vehicle, using his emergency lights and sirens, he observed that the vehicle would not stop. Ofc. Semple had to pull next to the vehicle and tell the driver to pull over. The vehicle still did not immediately pull over. Ofc. Semple made contact with the driver of the vehicle, later identified as Kelvin Seewah through his Florida issued driver's license, who stated that he had about one more mile till he got to Pembroke Pines (which was located in Broward County, approximately 40 miles south of his current location). The driver stated that he thought that he may have hit a tire. Ofc. Semple stated that Kelvin's eyes were very glassy. Kelvin stated that he did not notice the lights or sirens and the windows were down in his vehicle (see Ofc. Semple's supplemental PC for further).

OBSERVATION OF DRIVER:

I then made contact with Kelvin who was still sitting in the driver's seat of the Mercedes. As I approached the vehicle I observed that he had damage to his rear bumper and driver's side front rim. The rim of the tire appeared as if it had scraped against an object as there was damage around the outside of the rim. I asked Kelvin, who was wearing a black long sleeve shirt, blue jeans, and black shoes if he was okay or if he needed Fire Rescue. Kelvin stated that he was okay and did not need rescue. I observed that his eyes appeared very glassy and slightly red. They also appeared droopy as if he was tired. I asked Kelvin if he had any medical issues such as diabetes or seizures to which he stated he was good. As Kelvin spoke I observed that his speech appeared slurred and mumbled. I asked Kelvin to step out of the vehicle so that I could speak with him which he did. I did so I observed that Kelvin had slowed movements. As he came out of the vehicle he maintain a hold of the door. He also dropped money out of his front left pocket which I alerted him to. He appeared to sway front to back and side to side while he stand still. I asked Kelvin if he knew why he was stopped to which he stated no but stated that he thought it was due to his flat tire (none of his tires appeared flat). Kelvin stated he spoke English well. He stated he had no issues with his eyes but wore soft contact lenses (which were in). I asked Kelvin if he may have hit anything because of the damage to his vehicle which he stated he may have when he was coming across on Ocean. Kelvin stated that he was going home to Pembroke Pines. Kelvin stated that he was in Miami Gardens at that time. I explained to Kelvin that he was far passed Miami Gardens and his home. The more and more Kelvin spoke the more I could smell the obvious odor of an unknown alcoholic beverage coming from his mouth. He did not appear as if he spilled anything on him which would give off that scent. I explained to Kelvin the reasons he was stopped.

DRIVER'S STATEMENTS:

I confirmed that he had no speech issues normally, no physical defects or injuries, and that he could walk in his shoes without issue. I also explained to Kelvin the fact that he did not hear or see the police officers as they attempted to stop him which also was a concern. Kelvin stated that he was on the phone so he may not have heard them. I asked Kelvin if he had taken any illegal drugs or prescription medication which he stated he did not. He also stated that he had nothing to drink that night and was trying to get home. I explained my concerns to Kelvin and asked him to submit to SFSTs. Kelvin asked if he could take his car to the shop and he would call his friend. I explained to Kelvin Taylor Warnings at that time. Kelvin again stated he was trying to get home. Kevin continued to go in circles and was repetitive in his answers failing to give a yes or no answer to SFSTs. Kelvin eventually refused to do the tasks. Inv. Levey ID: 9415 observed Kelvin's impairment indicators and filled out a supplemental PC (see attached).

ODORS:

Obvious odor of unknown alcoholic beverage on breath as he spoke.

GENERAL OBSERVATIONS

SPEECH: Slurred, mumbled

ATTITUDE: Slow movements, dazed, repetitive, cooperative

CLOTHING: Black long sleeve shirt, blue jeans, black shoes

MEDICAL/OTHER: No medical issues (no diabetes or seizures), no physical defects or injuries, no issues with eyes (wears soft contacts, in at that time), no prescription medication or illegal drugs taken, stated had nothing to drink that night

STATE OF FLORIDA
COUNTY OF PALM BEACH

Inv. Christopher Ficarra
(Signature of Arresting/Investigative Officer)

Inv. Christopher Ficarra

The foregoing instrument was sworn to or affirmed and subscribed before me this 5th day of Novemebr 20 17 by Inv. Christopher Ficarra

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced Known

Sue Owen (#3184)

Notary Public, Clerk of Court, Officer (F.S.S 117.10)

