

17mmma0582

Rough
Arrest:
Only

593

ADMINISTRATOR	OBIS Number		ARREST / NOTICE TO APPEAR Juvenile Referral Report						Arrest: 3 Request for Warrant 1 Juvenile N											
	Agency ORI Number		Agency Name RIVIERA BEACH POLICE DEPARTMENT				Agency Report Number 8a. 17-06659		2 NTA 4 Request for Capas											
	FL0500700		<input type="checkbox"/> Felony <input checked="" type="checkbox"/> Misdemeanor <input type="checkbox"/> 6 Ordinance <input type="checkbox"/> Check as many as apply <input type="checkbox"/> 2 Traffic Felony <input type="checkbox"/> 4 Traffic Misdemeanor <input type="checkbox"/> 6 Other				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> 2 N/A <input type="checkbox"/> 2 N/A		Multiple Clearance Indicator 1											
	Charge Type:		Location of Arrest (Including Name of Business) 7200 BLOCK GARDEN ROAD RIVIERA BEACH FL 33404				Location of Offense (Business Name, Address) 7289 GARDEN ROAD RIVIERA BEACH FL 33404													
	Date of Arrest 08/19/2017		Time of Arrest 1049		Booking Date		Booking Time		Jail Date		Jail Time									
	Name (Last, First, Middle) Hammad		Mater				Alias (Name, DOB, Soc Sec #, Etc) Badi													
	Race W - White L - American Indian W - M		Race B - Black C - Oriental/Asian		Sex M		Date of Birth 11/18/1990		Height 5'10		Weight 170		Eye Color BROWN		Hair Color BLACK		Complexion MED		Build LIGHT	
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) LEFT ARM												Marital Status SINGLE		Religion Islam				Indicator 3 Alcohol Influence <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> Drug Influence <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>	
	Local Address (Street, Apt. Number) 8616 Windy Circle		(City) Boynton Beach				(State) (Zip) FL 33472				Phone				Residence Type 1 City 3 Florida 2 County 4 Out of State					
	Permanent Address (Street, Apt. Number) Same as Above										Phone				Address Source Florida ID					
Business Address (Street, Apt. Number)		(City)				(State) (Zip)				Phone				Occupation						
SS Number State H530-542-90-418-0		SSN/Social Security Number		INS Number								Place of Birth TAMPA FLORIDA		Citizenship U.S.A.						
Co-Defendant Name (Last, First, Middle)						Race		Sex		Date of Birth						1 Arrested <input type="checkbox"/> 3 Felony <input type="checkbox"/> 5 Juvenile 2 At Large <input type="checkbox"/> 4 Misdemeanor				
Co-Defendant Name (Last, First, Middle)						Race		Sex		Date of Birth						1 Arrested <input type="checkbox"/> 3 Felony <input type="checkbox"/> 5 Juvenile 2 At Large <input type="checkbox"/> 4 Misdemeanor				
Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other		Name (Last) (First) (Middle)												Residence Phone						
Address (Street, Apt. Number)		(City)				(State)				(Zip)				Business Phone						
Notified by (Name)						Date		Time				Juvenile Disposition 1 Handled/Processed within Dept. and Released 2 TOT-HRS/CVS 3 Incarcerated								
Released To (Name)		Relationship								PO/OCIO		Date		Time						
The above address was provided by defendant and/or defendant's parents. The child and/or parent was told to keep the Juvenile Court Clerk's Office informed of any change of address <input type="checkbox"/> Yes by (Name) <input type="checkbox"/> No (Reason)										School Attended				Grade						
Recovery Information 0 N/A 1 Voluntary 2 Located Not Returned 3 Hospitalized 4 HRS Custody 5 Law Enforcement Custody 6 Returned to Parent 7 Deceased 8 Other																				
Drug Activity S Sell R Smuggle K Disperse M Manufacture Z Other		Drug Type B Barbiturate H Hallucinogen P Hallucinogen Z Unknown C Marijuana O Cocaine Equipment A Amphetamine E Heroin G Opium/Herb S Synthetic																		
N/A B Buy D Deliver P Possess T Traffic E Use																				
Charge Description Petit Theft						Counts		Domestic Violence <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Statute Violation Number 812.014 (3A)				Violation of ORD #						
Drug Activity N Drug Type N Amount/Unit N/A		Offense # 17-06659								Warrant/Capas Number 17-06659				Bond						
Charge Description						Counts		Domestic Violence <input type="checkbox"/> Yes <input type="checkbox"/> No		Statute Violation Number				Violation of ORD #						
Drug Activity Drug Type Amount/Unit		Offense #								Warrant/Capas Number				Bond						
Charge Description						Counts		Domestic Violence <input type="checkbox"/> Yes <input type="checkbox"/> No		Statute Violation Number				Violation of ORD #						
Drug Activity Drug Type Amount/Unit		Offense #								Warrant/Capas Number				Bond						
Charge Description						Counts		Domestic Violence <input type="checkbox"/> Yes <input type="checkbox"/> No		Statute Violation Number				Violation of ORD #						
Drug Activity Drug Type Amount/Unit		Offense #								Warrant/Capas Number				Bond						
NOTICE TO APPEAR		Location (Court, Room Number, Address) 3188 PGA BLVD PALM BEACH GARDENS FL 33410																		
<input type="checkbox"/> Instruction No 1 Vandatory Appearance in Court <input type="checkbox"/> Instruction No 2 You need not appear in Court but must Comply with instructions on reverse side		Court Date and Time Month September Day 20th Year 2017 Time 0830 AM																		
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 NOT 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)																				
HOLD for other Agency		Signature of Arresting Officer (Print)																		
Name		Name of Arresting Officer (Print) J. Borum				ID #														
<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest: <input type="checkbox"/> Suicidal <input type="checkbox"/> Other:						6331														
D/S T. BURNSIDE #5406		Transporting Officer J. Borum				ID #		Age		Witness/Defendant Subj: Signed with an 'X'										
						6331		RBBR												

SCANNED

AUG 21 2017

PAGE

1 OF 1

CB's Number FL0500700	PROBABLE CAUSE AFFIDAVIT				
Agency Or Number FL0500700	Agency Name RIVIERA BEACH POLICE DEPARTMENT	1 Arrest 3 Request for Warrant 2 NTA 4 Request for Capes	1 1 N		
Charge Type Check As Many As Apply	1 <input type="checkbox"/> Felony 2 <input type="checkbox"/> Traffic Felony	3 <input checked="" type="checkbox"/> Misdemeanor 4 <input type="checkbox"/> Traffic Misdemeanor	5 <input type="checkbox"/> Ordinance 6 <input type="checkbox"/> Other		
Name (Last, First, Middle) Hammad	Alias Maher	Race W	Sex M		
Charge Description Petit Theft	Charge Description				
Charge Description	Charge Description	Race	Sex		
Victim's Name (Last, First, Middle)			Date of Birth		
Res. Address (Street, Apt. Number) 7289 Garden Rd.	(City) Riviera Beach	(State) FL	(Zip) 33404	Phone	Address Source Victim
Business Address (Name, Street) WAWA	(City) Riviera Beach	(State) FL	(Zip) 33404	Phone 561-728-2523	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 in custody...					
<input type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrest person commit the below acts.					
<input type="checkbox"/> confessed to _____ <input type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation <input type="checkbox"/> admitting the below facts					
On the 19th day of AUGUST 2017 at 10:45 <input checked="" type="checkbox"/> A.M. <input type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest)					
PROBABLE CAUSE STATEMENT					

PROBABLE CAUSE AFFIDAVIT

Agency Name
RIVIERA BEACH POLICE DEPARTMENT

1 Arrest 3 Request for Warrant
2 NTA 4 Request for Capes
84-17-06659

Agency Report Number

1 Felony
2 Traffic Felony

3 Misdemeanor
4 Traffic Misdemeanor

5 Ordinance
6 Other

Special Notes

Alias

Badi

Race

W

Sex

M

Date of Birth

11/18/1990

Charge Description

Case Number	PROBABLE CAUSE AFFIDAVIT				
Agency Case Number	Agency Name	1 Arrest 3 Request for Warrant 2 N.T.A 4 Request for Capias	1 Juvenile N		
FL0500700	RIVIERA BEACH POLICE DEPARTMENT	Agency Report Number 84 - 17-06659			
Charge Type Check As Vary As Apply	1 <input type="checkbox"/> Felony 2 <input type="checkbox"/> Traffic Felony	3 <input checked="" type="checkbox"/> Misdemeanor 4 <input type="checkbox"/> Traffic Misdemeanor	5 <input type="checkbox"/> Ordinance 6 <input type="checkbox"/> Other		
Defendant Name (Last, First, Middle)	Hammad	Maher	Al's Badi		
Charge Description	Petit Theft				
Charge Description					
Victim's Name (Last, First, Middle)		Race	Sex		
Local Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Address Source
Business Address (Name, Street)	(City)	(State)	(Zip)	Phone	Occupation
WAWA 7289 Garden RD.	Riviera Beach	FL	33404	561-720-2523	Victim
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 in custody...					
<input type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrest person commit the below acts.					
<input type="checkbox"/> confessed to _____ admitting the below facts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.					
On the 19th day of AUGUST 2017 at 10:45 A.M. <input checked="" type="checkbox"/> A.M. <input type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)					
PROBABLE CAUSE STATEMENT					

PROBABLE CAUSE AFFIDAVIT

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

1

JUVENILE N

Agency Report Number
84 - 17-06659

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 in custody...

committed the below acts in my presence. was observed by _____ who told _____ that he/she saw the arrest person commit the below acts.

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

On the 19th day of AUGUST 2017 at 10:45 A.M. A.M. P.M. (Specifically include facts constituting cause for arrest.)

Lucci was arrested for Petit Theft and transported to the Riviera Beach Police Department for further processing.

The items that were stolen are as follows: (1) 12 Pack Corona Extra beer valued at \$14.99 and (1) 12 Pack Heineken beer valued \$14.99. Total value \$32.08.

I observed the store surveillance footage which confirmed Lucci's account of the incident. Lucci gave a sworn recorded statement and is requesting prosecution. Lucci signed an Affidavit of Complaint and was given a Victim's Rights Brochure.

While at the Riviera Beach Police Station, Hammad began to complain of chest pain therefore he was transported to St. Mary's Medical Center for medical clearance. Hammad was later transported to the Palm Beach County Jail.

SWORN AND SUBSCRIBED BEFORE ME:
Sgt. CHRISTOFFEL
NOTARY PUBLIC, C/CIRK OF COURT/C/EX/ASS 11710

08/19/2017

DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

J. BORUM #6331

NAME OF OFFICER (PLEASE PRINT)

08/19/2017

DATE

PROBABLE CAUSE STATEMENT	1	JUVENILE N
NOTARIAL SIGNATURE	2	2 of 2