

0497321-118

ARREST / NOTICE TO APPEAR

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

1

JUVENILE

ADMI N STR ATI ON	OBTS Number		Agency ORI Number <b>0500400</b>		Agency Name <b>Delray Beach Police Department</b>		Agency Report Number (N.T.A.'s only) <b>4, 0 18-005521</b>		Charge Type: Check as many as apply: <input type="checkbox"/> 1. Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other		If Weapon Seized Enter Type: <b>None/not Applicable</b>		Multiple Clearance Indicator <b>1</b>								
DEF END ANT	Location of Arrest (Including Name of Business) <b>1136 E ATLANTIC AVE DELRAY BEACH, FL 334</b>						Location of Offense (Business Name, Address) <b>1136 E ATLANTIC AVE, DELRAY BEACH, FL 33483</b>														
	Date of Arrest <b>04/10/2018</b>		Time of Arrest <b>19:21</b>		Booking Date <b>04/10/2018</b>		Booking Time <b>19:31</b>		Jail Date <b>// : :</b>		Jail Time		Location of Vehicle								
C O D E F	Name (Last, First, Middle) <b>DIPASQUALE, MICHAEL</b>												Alias (Name, DOB, Soc. Sec. #, Etc.)								
	Race W - White I - American Indian B - Black O - Oriental/Asian		Sex <b>M</b>		Date of Birth <b>08/26/1959</b>		Height <b>5'10</b>		Weight <b>200</b>		Eye Color <b>BROWN</b>		Hair Color <b>BLACK</b>		Complexion <b>LIGHT</b>		Build <b>MEDIUM</b>				
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)										Marital Status		Religion <b>CATHOLIC</b>		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"/>						
	Local Address (Street, Apt. Number) (City) (State) (Zip) <b>14747 CUMBERLAND DR APTC407, DELRAY BEACH, FL 33446</b>						Phone <b>(845) 461-5797</b>						Residence Type: 1. City 3. Florida 2. County 4. Out of State <b>1</b>								
	Permanent Address (Street, Apt. Number) (City) (State) (Zip) <b>14747 CUMBERLAND DR APTC407, DELRAY BEACH, FL 33446</b>						Phone <b>(845) 461-5797</b>						Address Source <b>FL DL</b>								
Business Address (Name, Street) (City) (State) (Zip) Phone Occupation																					
D/L Number, State <b>D124540593060 / FL</b>		Soc. Sec. Number		INS Number		Place of Birth (City, State) <b>NEW YORK, NY, United</b>				Citizenship <b>US</b>											
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									
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"/> Parent <input type="checkbox"/> Other: _____ Name (Last, First, Middle) <input type="checkbox"/> Legal Custodian Address (Street, Apt. Number) (City) (State) (Zip) Residence Phone 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.										School Attended <b>APR 10 PM 9:10</b>		Grade									
<input type="checkbox"/> Yes, by: _____ <input type="checkbox"/> No: _____										Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Description of Property		Value of Property							
Drug Activity N. N/A P. Possess		S. Sell B. Buy T. Traffic		R. Smuggle D. Deliver E. Use		K. Disperses/ 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.		Paraphernalia/ Equipment Synthetic		U. Unknown Z. Other	
Charge Description <b>DISORDERLY INTOXICATION</b>										Statute Violation Number <b>856.011</b>		Violation of ORD #									
Drug Activity		Drug Type <b>N</b>		Amount / Unit <b>/</b>		Offense # <b>18-005521</b>		Counts <b>1</b>		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 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 type="checkbox"/> N		Warrant / Capias Number		Bond							
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 checked="" 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										Transported By		Date Transported <b>// : :</b>		Time Transported		Other					
<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.										Location (Court, Room) <b>South County 200 W Atlantic Ave Delray Beach, FL 33446</b>		Court Date and Time <b>05/03/2018 08:30:00</b>		No Photo Available							
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) <b>Refused</b>		Date Signed									
HOLD for Other Agency										Signature of Arresting Officer <b>T.M.</b>		Name Verification (Printed by Arrestee) (PRINT)		PAGE <b>1 OF 1</b>							
<input checked="" type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal <input type="checkbox"/> Other		<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other		I.D. # <b>1095</b>		Name of Arresting Officer (Print) <b>KYOTIKKI, TEO J.</b>		I.D. # <b>1095</b>		Agency <b>DBPD</b>		Witness here if subject signed with an X									
I.D. #		Pouch #		Transporting Officer <b>KYOTIKKI</b>		I.D. # <b>1095</b>		Agency <b>DBPD</b>		Witness here if subject signed with an X		PAGE <b>1 OF 1</b>									

COUNTY STATE ATTORNEY AGENCY CENTRAL RECORDS JAIL

SCANNED APR 11 2018

PROBABLE CAUSE AFFIDAVIT

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

1

JUVENILE

A D M I N I S T R A T I V E	OBTS Number	Agency ORI Number <b>FL 0500400</b>	Agency Name <b>DELRAY BEACH POLICE DEPARTMENT</b>	Agency Report Number <b>4   0   18-005521</b>
	Charge Type Check as many as apply.		Special Notes:	
	<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	
D E F E N D A N T	Name (Last, First, Middle) <b>DIPASQUALE, MICHAEL</b>			Alias
		Race <b>W</b>	Sex <b>M</b>	Date of Birth <b>08/26/1959</b>
C H A R G E S	Charge Description <b>856.011 DISORDERLY INTOXICATION</b>			
V I C T I M	Victim's Name (Last, First, Middle) <b>State Of Florida</b>			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... <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. <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. On the <b>10</b> day of <b>April</b> , <b>2018</b> at <b>19:21</b> (Specifically include facts constituting cause for arrest.)				
The following incident occurred in the City of Delray Beach, Palm Beach County, Florida:  On 4/10/18 at approximately 1914 hours I responded to 1136 E Atlantic Ave (Sazio Express) in reference to an intoxicated white male inside of the business causing a disturbance. On arrival I observed the intoxicated male, who later became known to me as Michael Dipasquale, inside of the business shouting at employees.  I made contact with Dipasquale who appeared intoxicated as he was slurring his speech and had a strong odor of an unknown alcoholic beverage emanating from his breath. Dipasquale expressed that he was unhappy as the business was refusing to serve him pizza. Dipasquale continued to shout although officers were trying to calm him down.  I was then approached by an employee, Benito Magro, who stated that he wanted Dipasquale removed from the business. While Magro was speaking with me, Dipasquale aggressively approached Magro; and began to poke Magro in the chest while continuing to shout at him. Dipasquale aggressive and unruly behavior caused all the other employees in the business to stop what they were doing and watch Dipasquale act out.  At this time I grabbed Dipasquales right arm and pulled him away from Magro. Dipasquale was then placed under arrest.  Based on the aforementioned facts, Probable Cause exists to charge the Defendant, Michael Dipasquale, with one count of Disorderly Intoxication contrary to F.S.S. 856.011.				
A D M I N I S T R A T I V E	SWORN AND SUBSCRIBED BEFORE ME			
	_____ <b>FERRERI, GARY</b> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)		_____ SIGNATURE OF ARRESTING / INVESTIGATING OFFICER	
	_____ <b>04/10/2018</b> DATE		_____ <b>KYOTIKKI, TEO J (1095)</b> NAME OF OFFICER (PLEASE PRINT)	
			_____ <b>04/10/2018</b> DATE	
	PAGE <b>1 OF 1</b>			