0500978 NH 3814 SB

ARREST · NOTICE TO APPEAR

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

1 JUVENILE

ADMINISTRATION

OBTS Number

Agency ORI Number: 0500400

Agency Name: Delray Beach Police Department

Agency Report Number (N T A's only): 4 , 0 | 18-012710

Charge Type (Check as many as apply): ☐ 1 Felony ☒ 3 Misdemeanor ☐ 5 Ordinance ☐ 2 Traffic Felony ☐ 4 Traffic Misdemeanor ☐ 6 Other

If Weapon Seized, Enter Type: None/not Applicable

Multiple Clearance Indicator: 1

Location of Arrest (Including Name of Business): 709 SE 3RD AVE DELRAY BEACH FL

Location of Offense (Business Name, Address): 709 SE 3RD AVE, DELRAY BEACH, FL 33483

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
08/25/2018	20:48	08/25/2018	21:01	/ /	: :	

DEFENDANT

Name (Last, First, Middle): TAYLOR, NATALIE

Alias (Name, DOB, Soc. Sec. # Etc.): Alias:

Race (W - White, I - American Indian, B - Black, O - Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eyes	Hair Color	Complexion	Build
W	F	01/11/1988	5'05	120	BROWN UNKNOW	BLOND OR	LIGHT	SMALL

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description):

Marital Status: Religion:

Indication of Alcohol Influence: Yes ☒ No ☐ Unk ☐ Drug Influence ☐

Local Address (Street, Apt Number) (City) (State) (Zip): 709 SE 3RD AVE, DELRAY BEACH, FL 33483

Phone: (917) 743-4083

Residence Type: 1 City 3 Florida 2 County 4 Out of State

Permanent Address (Street, Apt Number) (City) (State) (Zip): 709 SE 3RD AVE, DELRAY BEACH, FL 33483

Phone: (917) 743-4083

Address Source:

Business Address (Name, Street) (City) (State) (Zip):

Phone: Occupation:

D/L Number, State: / [redacted] Number:

Place of Birth (City, State): NEW YORK CITY, NY

Citizenship: US

CO-DEF

Co-Defendant Name (Last, First, Middle): Race: Sex: Date of Birth: ☐ 1 Arrested ☐ 3 Felony ☐ 5 Juvenile ☐ 2 At Large ☐ 4 Misdemeanor

Co-Defendant Name (Last, First, Middle): Race: Sex: Date of Birth: ☐ 1 Arrested ☐ 3 Felony ☐ 5 Juvenile ☐ 2 At Large ☐ 4 Misdemeanor

JUVENILE

☐ Parent ☐ Other ☐ Legal Custodian

Name (Last, First, Middle): Residence Phone:

Address (Street, Apt Number) (City) (OR) (State) (Zip): Business Phone:

Notified by (Name): Date: Time: JUVENILE DISPOSITION: 1 Handled Within Department and Released 2 TOT JAC 3 Detained

Released To (Name): Relationship: 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 (Phone 355-2526) informed of any change of address
☐ Yes, by ☐ No

School Attended: Grade:

Property Crime? ☐ Yes ☒ No Description of Property: Value of Property:

FILED
AUG 26 2018
SHARON R. BOCK
Clerk & Comptroller

CODE

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/Derv, P Paraphernalia/Equipment, S Synthetic, U Unknown, Z Other

CHARGE

Charge Description: TRESPASS

Statute Violation Number: 810.08 (2A) Violation of ORD #:

Drug Activity	Drug Type	Amount / Unit	Offense #	County	Domestic Violence	Warrant / Capias Number	Bond
	N	/	18-012710	1	☐ Y ☒ N		

Charge Description: Statute Violation Number: Violation of ORD #:

Drug Activity	Drug Type	Amount / Unit	Offense #	County	Domestic Violence	Warrant / Capias Number	Bond
		/			☐ Y ☐ N		

Charge Description: Statute Violation Number: Violation of ORD #:

Drug Activity	Drug Type	Amount / Unit	Offense #	County	Domestic Violence	Warrant / Capias Number	Bond
		/			☐ Y ☐ N		

INTAKE

Health / Apparent Physical Condition of Defendant:

Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries
Explain:

Check which applies: ☐ Released O.R. ☐ Released to Parent/Guardian ☒ T O T County Jail ☐ Posted Bond ☐ South County Mental Health

PROPERTY - Received By: Released By: Released To:

Transported By: Date Transported: / / Time Transported: : Other:

NOTICE TO APPEAR

☒ INSTRUCTION NO. 1 - Mandatory appearance in court
☐ INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.

Location (Court, Room): South County 200 W Atlantic Ave Delray Beach, FL 33444

Court Date and Time: 09/20/2018 08:30:00

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.

Refuse to Sign

Signature of Defendant (or Juvenile and Parent Custodian) Date Signed

No Photo Available

ADMIN

HOLD for Other Agency:

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other

Intake Deputy: D/S B. SHATARA #7623 ID #: Print Name:

Signature of Arresting Officer:

Name of Arresting Officer (Print): FERREIRO, DANIEL C. ID #: 1100

Transporting Officer: FERREIRO ID #: 1100 Agency: DBPD

Name Verification (Printed by Arrestee): (PRINT)

Witness here if subject signed with an "X"

☐ COURT ☐ STATE ATTORNEY ☐ AGENCY ☐ CENTRAL RECORDS ☐ JAIL ☐ CRIME ANALYSIS ☐ P.I.O. ☐ DEFENDANT

2018mm009828AXXSB

Received WB
AUG 28 2018 SM

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PROBABLE CAUSE AFFIDAVIT

OBTS Number:

1 Arrest 2 NTA 3 Request for Warrant 4 Request for Capias | 1 | JUVENILE

ADMIN

Agency ORI Number	Agency Name	Agency Report Number
FL 0500400	DELRAY BEACH POLICE DEPARTMENT	40 18-012710

Charge Type (Check as many as apply): ☐ 1 Felony ☒ 3 Misdemeanor ☐ 5 Ordinance ☐ 2 Traffic Felony ☐ 4 Traffic Misdemeanor ☐ 6 Other

Special Notes:

DEF

Name (Last First Middle)	Alias	Race	Sex	Date of Birth
TAYLOR, NATALIE		W	F	01/11/1988

CHARGES

Charge Description	Charge Description
810.08 TRESPASS	

VICTIM

Victim's Name (Last First Middle)	Race	Sex	Date of Birth
LIFESKILLS,			

Local Address (Street Apt Number) (City) (State) (Zip)	Phone	Address Source
709 SE 3RD AVE, DELRAY BEACH, FL 33483		
Business Address (Name, Street) (City) (State) (Zip)	**Phone**	**Occupation**

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

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 my (described) investigation.

On the 25 day of August, 2018 at 20:48 (Specifically include facts constituting cause for arrest.)

PROBABLE CAUSE STATEMENT

This incident occurred in the City of Delray Beach, Palm Beach County FL.

On 8/25/18 at 8:00 PM I was dispatched to 709 SE 3rd Ave in reference to a subject who was refusing to leave the premises. I made contact with the complainant, Rod Emile, who advised that the subject, Natalie Taylor, was intoxicated and refusing to leave this location. Rod stated that he would like Natalie to leave and also to be trespassed. I advised Natalie that she has to get her belongings and leave the property because she was now trespassed. Natalie understood and started to get her belongings. Natalie's parents arrived on scene to take Natalie home but Natalie attempted to go back into the property and also refused to get her belongings. At that time I commanded Natalie to grab her belongings and leave the property or she would be arrested for trespassing after warning in which she continued to refuse. Natalie was placed in handcuffs and arrested for trespassing after warning.

Based upon the above facts probable cause exists to charge W/F Natalie Taylor per F.S.S. 810.08.

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

PACHECO, ADAN

NOTARY PUBLIC / CLERK OF COURT / OFFICER (F S S 117 10)

8/25/18

DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

FERREIRO, DANIEL C (1100)

NAME OF OFFICER (PLEASE PRINT)

08/25/2018

DATE

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O.

PALM BEACH COUNTY
SHERIFF'S OFFICE
Florida State Statute Exemption Sheet

Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	☐	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	☐	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	☐	119.071(4)(c)	Undercover personnel.	
	☐	119.071(2)(f)	Confidential informants (CIs).	
	☐	119.071(2)(e)	Confession.	
Public Info. Exemptions	☐	985.04(1)	Juvenile offender records.	
	☐	119.071(h)(i)	Assets of a crime victim.	
	☐	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	☐	394.4615(7)	Mental health information.	
	☐	119.071(4)(d)(2)(a)	Home address, telephone, Social Security number, date of birth, or photos of active/former LE personnel, spouses, and children.	
Florida Rules of Judicial Administration 2.420 (Rule of 23)	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	☐	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	☐			
	☐			
	☐			
	☐			
	☐			
Other	☐		Other:	
	☐		Other:	

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REVIEW COMPLETED BY

Booking Number: 2018028523	**Date:** 08/26/2018
	Specialist Name/ID: AM/31562