

16 CF 6967AXXX

OBTS Number		ARREST / NOTICE TO APPEAR				1. Arrest 3. Request for Warrant 2. N.T.A. 4. Request for Capias		1	Juvenile	N
Agency ORI Number FL 0500300		Agency Name BOYNTON BEACH POLICE DEPT.				Agency Report Number 34-16-038321				
Charge Type: Check as many as Apply. <input checked="" type="checkbox"/> 1. Felony <input 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				Multiple Clearance Indicator				
Location of Arrest (Including Name of Business) 101 N Federal Hwy(Ocean Food Mart)Boynton Beach, FL 33435						Location of Offense (Business Name, Address) 101 N Federal Hwy(Ocean Food Mart)Boynton Beach, FL				
Date of Arrest 07/11/2015		Time of Arrest 10:13		Booking Date		Booking Time		Jail Date		Jail Time
Name (Last, First, Middle) CHIAPPISI, NICHOLAS ALLEN										
Alias (Name, DOB, Soc. Sec. #, Etc)										
W - White B - Black		I - American Indian O - Oriental / Asian		Race W	Sex M	Date of Birth 12/03/1983		Height 602	Weight 210	Eye Color Blue
								Hair Color Brown	Complexion Med	Build Med
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) n/a						Marital Status		Religion		Indication of: Alcohol Influence <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Unk. Drug Influence <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Unk.
Local Address (Street, Apt. Number) 700 E Boynton Beach Blvd 1205		(City) Boynton Beach,		(State) FL	(Zip) 33435	Phone (561)866-7195		Residence Type 1. City 3. Florida 2. County 4. Out of State		
Permanent Address (Street, Apt. Number) 700 E Boynton Beach Blvd 1205		(City) Boynton Beach,		(State) FL	(Zip) 33435	Phone () - - - - -		Address Source Defendant		
Business Address (Street, Apt. Number)		(City)		(State)	(Zip)	Phone () - - - - -		Occupation		
D/L Number, State C-120-621-83-443-0				INS Number		Place of Birth Nadic Mass		Citizenship USA		
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"/> 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/DYS 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 561-355-2526) 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				
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. Barbituate C. Cocaine E. Heroin		H. Hallucinogen M. Marijuana O. Opium/Deriv.		P. Paraphernalia/ Equipment S. Synthetic		U. Unknown Z. Other		
Charge Description AGGRAVATED BATTERY		Counts 1		Domestic Violence <input type="checkbox"/> Yes <input type="checkbox"/> No		Statute Violation Number 784.045(1)(A)2		Violation of ORD#		
Drug Activity N		Drug Type N		Amount/Unit N/A		Offense # 16-038321		Warrant/Capias 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/Capias 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/Capias 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/Capias Number		Bond
Instruction No. 1 Mandatory Appearance in Court		Instruction No. 2 You need not appear in Court but must Comply with instruction on reverse side.		Location (Court, Room Number, Address) South County Courthouse, 200 West Atlantic Ave, Delray Beach, FL 33444						
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)		Date Signed						
HOLD for other Agency Name:		Signature of Arresting Officer		Name Verification (Printed by Arrestee) (PRINT)						
<input type="checkbox"/> Dangerous <input type="checkbox"/> Registered Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other		Name of Arresting Officer (Print) Ofc. Mastro 863		I.D. # BBPD		BU#107018		Page 1 OF 1		
Intake Deputy 4280		Pouch #		Transporting Officer Mastro 863 BBPD		Witness here is subject Signed with an "X".				

SCANNED

JUL 12 2016 11:23:31

OBTS Number		PROBABLE CAUSE AFFIDAVIT		1 Arrest 2 NTA		3 Request for Warrant 4 Request for Capias		1		Juvenile		N	
Agency ORI Number FL0500300		Agency Name BOYNTON BEACH POLICE DEPT.				Agency Report Number 34-16-038321							
Charge Type Check all that Apply		<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		Special Notes					
Name (Last, First, Middle) CHIAPPISI, NICHOLAS ALLEN						Race W		Sex M		Date of Birth 12/03/1983			
Charge Description AGGRAVATED BATTERY						Charge Description							
Charge Description						Charge Description							
Victim's Name (Last, First, Middle) HARB, NIDAL						Race W		Sex M		Date of Birth 09/17/1980			
Local Address (Street, Apt Number) 101 N. Federal Hwy						(City) Boynton Beach		(State) FL		(Zip) 33435		Phone 561-739-6156	
Business Address (Name, Street) 101 N. Federal Hwy						(City) Boynton Beach		(State) FL		(Zip) 33435		Phone 561-739-6156	
Occupation Store Owner													
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 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 the below facts <input checked="" type="checkbox"/> Was found to have committed the below acts, resulting from my (described) investigation.													
On The 11 Day Of July 20 2016 At 10:13 <input checked="" type="checkbox"/> A.M. <input type="checkbox"/> P.M.													

On the above date and time at 101 N Federal Hwy (Ocean Food Mart) which is located in the City of Boynton Beach, County of Palm Beach and the State of Florida I came in contact with the defendant, identified as w/m Chiappisi, Nicholas dob 12/03/1983, who was in still on scene and pushing the victim, w/m Harb, Nidal dob 09/17/1980 in an attempt to get back into the store. I spoke with the Nidal who advised the Chiappisi entered the store this morning smelling like alcohol. He came to the counter with a can of Miller Light and attempted to purchase it with a credit card that did not belong to him. Nidal asked for identification at which point Chiappisi began yelling obscenities at him. Nidal refused to sell him the alcohol at which time Chiappisi threw the can of beer at Nidal just missing his head but striking him in the upper left shoulder.

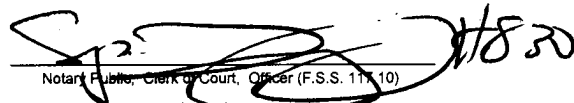
When Nidal came outside to tell Chiappisi he was no longer allowed into his store Chiappisi yelled "get away from me you quire Arab". Chiappisi repeated this multiple times while he was in my custody. Chiappisi was aggressive while on scene and while in custody. If Chiappisi was allowed to stay on scene I believe the likelihood that the violence would escalate was very high based on his demeanor.

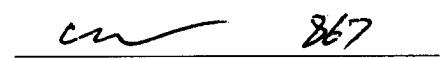
Subsequently based on the information gathered and witnessed by this officer the defendant was placed under arrest for Aggravated Battery FSS 784.045(1)(A)2.

Chiappisi was taken to Bethesda Medical Center for medical clearance then transported to BBPD for processing.

After the Defendant was processed at the Boynton Beach Police Department he was TOT PBCJ.

The foregoing instrument was sworn to or affirmed and subscribed before me


 Notary Public, Clerk of Court, Officer (F.S.S. 111.10)
 07/11/2016
 Date


 (Signature of Arresting / Investigative Officer)
 Ofc. Mastro 863
 (Print name of Arresting/Investigative Officer)

07/11/2016
 Date

SCANNED
 JUL 12 2016