

17CT10792

17mm9299

OBTS Number		ARREST / NOTICE TO APPEAR Juvenile Referral Report		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1		Juvenile N	
Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE				Agency Report Number (N.T.A.'s only) 06-17-089528					
Charge Type: Check as many as apply: <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Weapon Seized / Type 1. Yes 2. No		Multiple Clearance Indicator							
Location of Arrest (Including Name of Business) 1500 West Boynton Beach Blvd, Boynton Beach, FL				Location of Offense (Business Name, Address) 1500 block West Boynton Beach Blvd, Boynton Beach, FL 33426							
Date of Arrest 06/13/2017		Time of Arrest 0005		Booking Date		Booking Time		Jail Date		Jail Time	
Location of Vehicle Zuccala's towing											
Name (Last, First, Middle) Cornelius, Noah, C											
Alias (Name, DOB, Soc. Sec. #, Etc.)											
Race W - White I - American Indian B - Black O - Oriental/Asian		Sex W		Date of Birth 09/07/1978		Height 6'00		Weight 225		Eye Color Haz	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)		Marital Status		Religion		Indication of: Alcohol Influence Drug Influence		Y <input type="checkbox"/>		N <input type="checkbox"/>	
Local Address (Street, Apt. Number) 5505 NATHAN LN APT 1, PLYMOUTH, MN 55442		(City)		(State)		(Zip)		Phone ()		Residence Type: 1. City 2. County 3. Florida 4. Out of State 4	
Permanent Address (Street, Apt. Number)		(City)		(State)		(Zip)		Phone ()		Address Source DL	
Business Address (Name, Street)		(City)		(State)		(Zip)		Phone ()		Occupation	
D/L Number, State V022252488704, MN		Soc. Sec. Number		INS Number		Place of Birth (City, State) Florida		Citizenship US			
Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large <input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile	
Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large <input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile	
<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other:		Address (Street, Apt. Number)		(City)		(State)		(Zip)		Residence 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 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 355-2528) 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 S. Sell P. Possess T. Traffic		S. Sell 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 Driving Under the Influence		Counts 01		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number 316.193(1)		Violation of ORD #			
Drug Activity N		Drug Type N		Amount / Unit		Offense # 17-089528		Warrant / Capias Number		Bond	
Charge Description POSSESSION OF PARAPHERNALIA		Counts 01		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number 893.147(1)(B)		Violation of ORD #			
Drug Activity P		Drug Type P		Amount / Unit		Offense # 17-089528		Warrant / Capias Number		Bond	
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		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"/> Y <input type="checkbox"/> N		Statute Violation Number		Violation of ORD #			
Drug Activity		Drug Type		Amount / Unit		Offense #		Warrant / Capias Number		Bond	
Location (Court, Room Number, Address) South County Court House, 2000 West Atlantic Ave, Delray Beach, FL 33444											
Court Date and Time Month June Day 26 Year 2017 Time 8:30 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) Y. D. D. D. Date Signed 06/13/2017											
HOLD for other Agency Name:		Signature of Arresting Officer		Name Verification (Printed by Arrestee)							
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:		Name of Arresting Officer (Print) D/S Christopher Ward # 16305		I.D. # 5		(PRINT)					
Intake Deputy		I.D. #		Pouch #		Transporting Officer D/S C. Ward		ID # 16305		Agency PBSO	
Without hearing / With hearing with an "X" 1 OF 1											

DISTRIBUTION: WHITE - COURT COPY

GREEN - STATE ATTORNEY

YELLOW - AGENCY

PINK - AGENCY

GOLD - DEFENDANT (N.T.A.'s ONLY)

		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 06-17-089528		
	Charge Type: Check as many as apply.	<input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Special Notes:						
DEF	Name (Last, First, Middle)	Cornelius, Noah, C				Alias		Race W	Sex M	Date of Birth 09/07/1978
	Charge Description	Driving Under the Influence		316.193(1)		Charge Description POSSESSION OF PARAPHERNALIA		893.147(1)(B)		
CHARGES	Charge Description					Charge Description				
	Charge Description					Charge Description				
VICTIM	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				
PROBABLE CAUSE STATEMENT	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.</p> <p>The Person taken into custody</p> <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> confessed to _____ admitting to the below facts. </div> <div> <input type="checkbox"/> was observed by _____ who told that he/she saw the arrested person commit the below acts. <input type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation. </div> </div> <p>On the <u>12</u> day of <u>June</u> 20<u>17</u> at <u>2347</u> <input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)</p> <p>At this time I found probable cause to believe that the defendant was impaired for the purposes of operating and/or being in actual physical control of a motor vehicle pursuant to Florida State Statute 316.193(1). I placed the handcuffed the defendant o the rear. I checked the handcuffs for proper fit and double locked them. I then placed the defendant in the rear of my PBSO patrol vehicle.</p> <p>An inventory search of the vehicle was conducted prior to tow per PBSO policy. Inside the trunk of the vehicle, which was registered to the defendant I fond a vacuum seal type bag, which is known to me based on my training and experience to be used for the transport of marijuana. The inside of the bag had the odor of marijuana known to me based on my training and experience.</p>									
ADMINISTRATIVE	STATE OF FLORIDA COUNTY OF PALM BEACH		D/S Christopher Ward		SCANNED					
	(Signature of Arresting/Investigative Officer)				JUN 13 2017					
The foregoing instrument was sworn to or affirmed and subscribed before me this <u>13</u> day of <u>June</u> 20 <u>17</u> by <u>D/S Christopher Ward</u>										
(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced: <u>Personally Known LEO</u>										
(Signature of Notary Public)		Notary Public - State of Florida Commission # <u>FF 969834</u> My Comm. Expires <u>JUN 28, 2020</u>								
Notary Public, Clerk of Court, Officer (F.S.S. 117.10)				PAGE <u>1</u> OF <u>1</u>						

PROBABLE CAUSE AFFIDAVIT

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

Juvenile

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ADMIN	OBS Number		Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 06-17-089528	
	Charge Type: Check as many as apply.		1. Felony 2. Traffic Felony		3. Misdemeanor 4. Traffic Misdemeanor		5. Ordinance 6. Other	
CHARGES	Name (Last, First, Middle) Cornelius		Alias Noah Christopher		Race W		Sex M	
	Date of Birth 09/07/1978		Charge Description D.U.I.		316.193(1)		Charge Description	
DEF	Charge Description		Charge Description		Charge Description		Charge Description	
	Victim's Name (Last, First, Middle) STATE OF FLORIDA		Race		Sex		Date of Birth	
VICTIM	Local Address (Street, Apt. Number)		(City)		(State)		(zip)	
	Business Address (Name, Street)		(City)		(State)		(zip)	
PROBABLE CAUSE STATEMENT	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 D/S Vespi who told D/S Ward	
	[] confessed to admitting to the below facts.		[] was found to have committed the below acts, resulting from my (described) investigation.		On the 13th day of June		20 17 at 00:05 am [] A.M. [] P.M. (Specifically include facts constituting cause for arrest.)	
ADMINISTRATIVE	<p>On June 12th, 2017 at 2347 hours, in unincorporated Boynton Beach, Palm Beach County, Florida I was sitting stationary eastbound on Boynton Beach Blvd in the 3800blk with D/S Rodriguez who was sitting westbound. D/S Rodriguez advised he has a small silver car coming from behind me traveling at 66 miles per hour in the number 3 lane (curb lane). I turned around a saw the small silver vehicle traveling eastbound in the curb lane and entered into traffic to make my way to execute a traffic stop. I initiated a traffic stop at Winchester Park Blvd and Boynton Beach Blvd at which time the final stop was in the parking lot of the U.S Post Office located at 1534 Boynton Beach Blvd. D/S Rodriguez arrived on scene and verified that was the vehicle he saw and compared it to the digital readout of 66 mph on his STALKER DUAL SERIAL # DC100412/ANT1 #KA074719 ANT2 #KA074712 STATIONARY RADAR.</p> <p>As I approached the driver's side door, the driver opened his driver side door. I identified myself and explained the reason I stopped him and asked the driver if there was a reason why he was going 66 mph in a 45 mph zone. The driver said to me he didn't realize he was going that fast and then looked up at me. At that time I noticed the driver's eyes were blood shot and watery and his speech was very slow. Based on my training and life experience, the driver appeared to be impaired. I asked the driver for his driver's license, registration and insurance card at which he was able to retrieve his driver license and insurance card from his wallet but failed to produce the registration. I asked the driver to remain in the vehicle for his safety and when I returned to my vehicle, I had D/S Rodriguez notify the District 6 Traffic Unit, D/S Ward to respond to my location to conduct a DUI investigation.</p>							
	<p>STATE OF FLORIDA COUNTY OF PALM BEACH D/S R. Vespi (Signature of Arresting/Investigative Officer)</p> <p>The foregoing instrument was sworn to or affirmed and subscribed before me this 13th day of June 20 17 by D/S R. Vespi Known LEO</p> <p>(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of Identification produced</p> <p>Notary Public, Clerk of Court, Officer (F.S.S. 117.10)</p>							

SCANNED

JUN 13 2017

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