

18mm 9365

0499368-360

NA

ADMINISTRATIVE	OBTS Number		Arrest / Notice to Appear Juvenile Referral Report				1. Arrest 3. Request for Warrant 2. N.T.A. 4. Request for Capias		1		Juvenile <input type="checkbox"/>	
	Agency ORI Number FLO 502700		Agency Name PALM SPRINGS POLICE DEPARTMENT				Agency Report Number 82-18-12318					
	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 type="checkbox"/> 4. Traffic Misdemeanor		<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Weapon Seized / Type N/A		Multiple Clearance Indicator	
DEFENDANT	Location of Arrest (Including Business Name) 125 Ainsworth Circle Palm Springs, FL 33461						Location of Offense (Business Name, Address) 125 Ainsworth Circle Palm Springs, FL 33461					
	Date of Arrest 06/27/2018		Time of Arrest 18:52 Hrs		Booking Date		Booking Time		Jail Date		Jail Time	
	Name (Last, First, Middle) Connors, Noushin		Alias Alias									
CO-DEF	Race: W - White I - American Indian B - Black O - Oriental/Asian		Sex W	Date of Birth 04/10/1963	Height 5'5	Weight 132 lb	Eye Color Brown	Hair Color Brown	Complexion Med	Build Med		
	Scars, Marks, Tattoos, Unique Physical features (Location, Type, Description) None						Marital Status Divorced	Religion Christian	Indication Of	Alcohol Influence Drug Influence	No No	
	Local Address (Street, Apt, Number) (City) (State) (Zip) 251 Bonnie Blvd. Apt #113 Palm Springs, FL 33461						Phone 561-577-7772		Residence Type: 1 City 3 Florida 2 County 4 Out of State 1			
	Permanent Address (Street, Apt, Number) (City) (State) (Zip) 251 Bonnie Blvd. Apt #113 Palm Springs, FL 33461						Phone 561-577-7772		Address Source Defendant			
	Business Address (Street, Apt, Number) (City) (State) (Zip) Unknown						Phone Unknown		Occupation Medical Social Worker			
JUVENILE	D/L Number, State C562-620-63-630-0, Florida		Social Security Number		INS Number N/A		Place of Birth (City, State) Tehran, Iran		Citizenship			
	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				
CHARGE	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 <input type="checkbox"/> Legal Custodian		Name (Last, First, Middle)						Residence Phone			
	Local 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		
NOTICE TO	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. <input type="checkbox"/> Yes by: (name) <input type="checkbox"/> No:								School Attended		Grade	
	Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property						Value of Property			
CHARGE	Drug Activity		S. Sell N. N/A		R. Smuggle D. Deliver		K. Dispense/ Distribute		M. Manufacture/ Produce/ Cultivate		Z. Other	
	P. Possess T. Traffic		E. Use									
CHARGE	Charge Description Battery (domestic)				Counts 1	Domestic Violence Yes	Statute Violation Number 784.03 (1) (a) (1)		Violation of ORD #			
	Drug Activity N		Drug Type N	Amount / Unit 0 / 0		Offense Number 18-12318		Warrant / Capias Number		Bond		
CHARGE	Charge Description				Counts	Domestic Violence	Statute Violation Number		Violation of ORD #			
	Drug Activity		Drug Type	Amount / Unit		Offense Number		Warrant / Capias Number		Bond		
CHARGE	Charge Description				Counts	Domestic Violence	Statute Violation Number		Violation of ORD #			
	Drug Activity		Drug Type	Amount / Unit		Offense Number		Warrant / Capias Number		Bond		
CHARGE	Charge Description				Counts	Domestic Violence	Statute Violation Number		Violation of ORD #			
	Drug Activity		Drug Type	Amount / Unit		Offense Number		Warrant / Capias Number		Bond		
ADMIN	<input type="checkbox"/> Instruction No. 1 Mandatory Appearance in Court				Location (Court, Room Number, Address)							
	<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: Day: Year: Time: <input type="checkbox"/> A.M. <input type="checkbox"/> P.M.							
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.										Date Signed		
Signature of Defendant (or Juvenile and Parent / Custodian)								Date Signed				
ADMIN	HOLD for other agency Name:				Signature of Arresting Officer Ofc. Kubiak				Name Verification (Printed by Arrestee) (PRINT)			
	<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal		<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other		Name of arresting Officer (Print) Ofc. Kubiak		I.D.# 103					
	Intake Date		I.D.# 8019		Pouch #		Transporting Officer Ofc. Kubiak		I.D.# 103		Agency PSPD	
Witness here if subject signed with X										Page 1 Of 1		

PALM SPRINGS POLICE DEPARTMENT
DOMESTIC VIOLENCE
PROBABLE CAUSE AFFIDAVIT
PALM BEACH COUNTY

ON THE 27th DAY OF June 2018, AT 06:01 AM / PM
SUBJECT: Connors, Noushin DOB: 04/10/1963 CASE NUMBER: 18-12318
CHARGE DESCRIPTION: DOMESTIC BATTERY STATUE NUMBER: 784.03 (1) a (1)
VICTIM: Bakonyi, Nasrin DOB: 11/25/1952 RACE: W SEX: F
LOCAL ADDRESS: 142 Las Brisas Circle Hypoluxo, Florida 33462

PERSONAL CONTACT

NARRATIVE:

On June 27, 2018 at approximately 06:09 PM I was dispatched to 125 Ainsworth Cir. Palm Springs, FL 33461 (Blue Ribbon Care, LLC – Elder care residence) in reference to a domestic disturbance between two sisters. Upon arrival I observed two white females inside the residence later identified as Nasrin Bakonyi and Noushin Connors. I separated the two and talked to Connors outside the home. Connors told me she was in an argument with her sister prior to my arrival because of an issue regarding her mother, Batoul Tabatabaie. Connors stated she was upset with Bakonyi because she believes staff members at the residence were mocking her mother and Bakonyi remained friendly with them.

Connors said the argument began in the living room, became physical and she was punched in the jaw by Bakonyi. Connors told me she was talking with her mother, did not want Bakonyi to talk to her mother, blocked the pathway leading to Tabatabaie and was punched by Bakonyi. I did not observe any injuries on Connors face.

I talked to Bakonyi and asked her about what happened prior to my arrival. Bakonyi stated she does not have a good relationship with her sister. She stated they argued in the living room of the home and was pushed and scratched by Connors. Bakonyi showed me several scratch marks that resemble the curved shape of a nail mark on her right arm. Bakonyi told me she was talking with her mother when Connors pushed and scratched her because she was upset. I asked Bakonyi if she could provide me with a sworn video statement describing the incident but she did not wish to cooperate further in the investigation. Bakonyi also refused to have pictures taken of the scratch marks on her right arm.

I talked to Gabrielle Azan who works as a staff member in the home and was in the residence at the time of the argument. Azan stated she did not see the physical altercation but said Bakonyi and Connors were in an argument over their mother. Later, Rennay Rose (owner of Blue Ribbon Care, LLC) arrived on scene and was able to review video with me of the incident captured by security cameras inside the home. While reviewing video, I observed Connors and Bakonyi near Tabatabaie in the living room. At 18:03 hours (camera time) I observed Bakonyi near Tabatabaie as if she was giving her a hug. While Bakonyi was leaning over toward Tabatabaie, Connors can be seen grabbing Bakonyi and Bakonyi lifting her arm up in a way to break the grip of Connor. The altercation continued a short while and the two separated. I asked Connors if she would like to provide a sworn statement describing the incident but she requested legal counsel prior to continuing with the investigation. Based on the totality of circumstances, Connors was arrested. She was handcuffed to her rear. The handcuffs were checked for spacing and locked for safety.

DEFENDANT'S STATEMENTS: (Written / Taped / Oral)

Stated she was in a verbal altercation with her sister Bakonyi. Stated she was hit by Bakonyi in the jaw.

VICTIM'S STATEMENTS: (Written / Taped / Oral)

Stated she was in a verbal altercation with Connors. Stated she was pushed/scratched by Connors.

OBSERVATIONS OF VICTIM (PHYSICAL AND EMOTIONAL)

Bakonyi appeared mildly upset about the incident. I observed a red mark on her right arm that she said was caused by Connors.

RELATIONSHIP BETWEEN VICTIM AND SUSPECT: Sisters

PHOTOGRAPHS:

SCENE: YES NO

VICTIM NOTIFICATION FORM

This form must be completed when one of the following crime(s) has been committed:

- Homicide (Ch. 782)
- Sexual Offense (Ch. 794)
- Attempted Murder
- Attempted Sexual Offense
- Stalking (F.S. 784.048)
- Domestic Violence - (This includes any assault, aggravated assault, battery, aggravated battery, sexual assault, sexual battery, stalking, aggravated stalking or any criminal offense resulting in physical injury or death of one family member or household member by another, who is or was residing in the same single dwelling.)

Upon completion, this form must accompany the booking paperwork.
If applying for a warrant, attach this form to the filing packet.

1. Incident Report #: 18-12318 Agency: PSPD
Offense: BATTERY (DOMESTIC)
Suspect/Offender: CONNORS, NOUSHIN
D.O.B. 04-10-63 Race: W Sex: F

2. Warrant #(s): _____

3.a. Victim's name: BAKONYI, NASRIN D.O.B. 11/25/52 Race: W Sex: F
Address: 142 LAS BRISAS CIR
City: HYPOLEXO State: FL Zip: 33462
Home #: 561-856-1213 Work #: _____ Other: _____

b. Victim's next of kin, friend or neighbor: BRYAN BAKONYI
Address: 142 LAS BRISAS CIR
City: HYPOLEXO State: FL Zip: 33462
Home #: 561-806-8136 Work #: _____ Other: _____

NOTE: PURSUANT TO F.S. 119.07, THE CONTENTS OF THIS FORM MAY BE SUBJECT TO CONFIDENTIALITY.

Victim/Relation Notification Waiver and Confidential Information Request.

(check applicable boxes)

- Waiver:** I choose not to be notified when the arrestee is released from custody.
- Confidential:** I request the information on this form be kept confidential (applicable only to sexual battery, stalking, child abuse, harassment or domestic violence cases).

Signature of person waiving notification: _____

Printed name of person waiving notification: _____

Deputy's Name: Off. KUBIAK I.D.# 103 Date: 6-27-18

White/Corrections or State Attorney (Warrant Application) Yellow/Warrants Section Pink/Central Records

SUSPECT/OFFENDER: _____

(FOR WARRANTS USE ONLY)

COURT CASE/WARRANT#: _____

VICTIM: YES NO

911 CALL: YES NO

CALLER: Nasrin Bakonyi (victim)

WEAPON USED: YES NO

TYPE: Hands

WITNESSES: YES NO (IF YES, ATTACH WITNESS LIST)

INJURIES: YES NO

MEDICAL TREATMENT: YES NO

AT: SCENE: YES NO

PARAMEDICS: N/A

AT: HOSPITAL: YES NO

PHYSICIAN(S): N/A

HOSPITAL: N/A

ARE THERE CHILDREN LIVING IN THE HOME: YES NO

NAME(S) & DOB:

WAS ACT COMMITTED IN FRONT OF MINOR(S): YES NO

NAME(S) & DOB:

H.R.S. NOTIFIED: YES NO

VICTIM PREGNANT: YES NO

VIOLATION OF RESTRAINING ORDER: YES NO CASE NUMBER: _____

PRIOR HISTORY OF DOMESTIC VIOLENCE: YES NO

ALCOHOL OR DRUGS INVOLVED: YES NO

VICTIM CONTACT INFORMATION

PHONE:Hm: 561-856-1213 Wk: _____ Employer: Unknown

RELATIVE: Name: Bryan Bakonyi Phone: 561-806-8136

Address: 142 Las Brisas Circle Hypoluxo, Florida 33462

STATE OF FLORIDA
COUNTY OF PALM BEACH

Appeared before me, Ofc. Kubiak #103 (print name) personally known to me, who, being first duly sworn, says that the facts above, based upon my investigation, are true.

Ofc. 122 103
SIGNATURE OF ARRESTING OFFICER

Sworn to and subscribed to before me this 27th day of June, 2018

[Signature]
NOTARY / CLERK OF COURT / OFFICER (F.S.11710)



Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	<input type="checkbox"/>	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	<input type="checkbox"/>	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	<input type="checkbox"/>	119.071(4)(c)	Undercover personnel.	
	<input type="checkbox"/>	119.071(2)(f)	Confidential Informants (CIs).	
	<input type="checkbox"/>	119.071(2)(e)	Confession.	
Public Info. Exemptions	<input type="checkbox"/>	985.04(1)	Juvenile offender records.	
	<input type="checkbox"/>	119.071(h)(i)	Assets of a crime victim.	
	<input type="checkbox"/>	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	<input type="checkbox"/>	394.4615(7)	Mental health information.	
	<input type="checkbox"/>	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)	<input checked="" type="checkbox"/>	(ii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	<input type="checkbox"/>	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	<input type="checkbox"/>	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	<input type="checkbox"/>	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	<input type="checkbox"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2018021380	Date: 06/28/18
	Specialist Name/ID: Stewart/5660