

17CP5604

Rough Arrest Only

OBTS Number		ARREST / NOTICE TO APPEAR Juvenile Referral Report						1. Arrest 3. Request for Warrant 2. N.T.A. 4. Request for Capias		Juvenile				
ADMINISTRATION	Agency ORI Number	Agency Name		PALM BEACH COUNTY SHERIFF'S OFFICE						Agency Report Number 06.17-027948				
	FL0500000									Weapon Seized/Type	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Multiple Clearance Indicator 0 1	
Charge Type:	<input checked="" 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		Type:							
Location of Arrest (Including Name of Business)	Location of Offense (Business Name, Address) 8050 TUMBLESTONE CT, Apt 216, Delray Beach, FL 33484													
5350 Linton Blvd, Delray Beach, FL (Delray Community Hospital)	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle								
Jan 17, 2017	2322													
Alias (Name, DOB, Soc. Sec. #, Etc.)														
DEFENDANT	Name (Last, First, Middle) HARBIN, PATRICK, CARLOS													
	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build						
	W M	8/18/1983	5'7	185	HAZ	BRO	MED	MED						
	Race W-White I- American Indian B- Black O- Oriental/Asian													
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)													
	NONE OBSERVED													
CO-DEF	Local Address (Street, Apt. Number) 8050 TUMBLESTONE CT													
	(City)	(State)	(Zip)	Phone										
	DELRAY BEACH	Florida	33484	(561) 573-6915										
	Permanent Address (Street, Apt. Number)													
	(City)	(State)	(Zip)	Phone										
	Business Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone									
JUVENILE	D/L Number, State H615663832980													
	Soc. Sec. Number	INS Number		Place of Birth		Citizenship								
				SEAL, CA		YES								
	Co-Defendant Name (Last, First, Middle)													
	Race	Sex	Date of Birth	<input checked="" type="checkbox"/> 1. Arrested <input checked="" type="checkbox"/> 2. At Large		<input checked="" type="checkbox"/> 3. Felony <input checked="" type="checkbox"/> 4. Misdemeanor								
	Co-Defendant Name (Last, First, Middle)													
	Race	Sex	Date of Birth	<input checked="" type="checkbox"/> 1. Arrested <input checked="" type="checkbox"/> 2. At Large		<input checked="" type="checkbox"/> 3. Felony <input checked="" type="checkbox"/> 4. Misdemeanor								
CODE	Parent Name (Last) (First) (Middle)													
	Legal Custodian													
	Other													
CHARGE	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/CYF							
	Released To: (Name)													
	Relationship	FCIC/NCIC	Date	3. Incarcerated										
	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 informed of any change of address.													
	Yes, by: (Name) No: (Reason)													
CHARGE	Recovery Information													
	0. N/A 1. Voluntary 2. Located Not Returned 3. Hospitalized 4. HRS Custody 5. Law Enforcement Custody 6. Returned to Parent 7. Deceased 8. Other													
	Drug Activity S. Sell R. Smuggle K. Dispense/ M. Manufacture Z. Other Drug Type B. Barbituate H. Hallucinogen P. Paraphernalia/ U. Unknown N. N/A B. Buy D. Deliver Distribute Produce/ C. Cocaine M. Marijuana Equipment Z. Other P. Possess T. Traffic E. Use Cultivate A. Amphetamine E. Heroin S. Synthetic													
CHARGE	Charge Description SIMPLE BATTERY													
	Drug Activity Drug Type Amount/Unit Offense # N/A N/A N/A 16-135184													
CHARGE	Charge Description AGGRAVATED BATTERY WITH A DEADLY WEAPON													
	Drug Activity Drug Type Amount/Unit Offense # N/A N/A N/A													
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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 reverse side.													
	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.													
ADMIN.	Signature of Defendant (or Juvenile and Parent/Custodian)													
	Signature of Arresting Officer X													
	Name Verification (Printed by Arrestee) (PRINT) .....													
	HOLD for other Agency		Signature of Arresting Officer		Name Verification (Printed by Arrestee) (PRINT) .....		PAGE							
	Name: <input checked="" type="checkbox"/> Dangerous <input checked="" type="checkbox"/> Resisted Arrest		Name of Arresting Officer (Print) T. Farrington		I.D. # 6465		61							
	<input checked="" type="checkbox"/> Suicidal <input checked="" type="checkbox"/> Other: _____		Transporting Officer T. Farrington		I.D. # 6465		PAGE							
	Intake Deputy I.D. # _____		Pouch #		Agency PBSO		1 OF 1							
	Witness here if subject signed with an 'X'.													

		PROBABLE CAUSE AFFIDAVIT						
ADMIN	CBTS Number					1 Arrest 2 NTA	3 Request for Warrant 4 Request for Capias	1
	Agency ORI Number FLO. 5.0.0.0.0.0	Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE					Agency Report Number 17-027948	Juvenile
DEF	Charge Type Check as many as apply	1 Felony 2 Traffic Felony	3 Misdemeanor 4 Traffic Misdemeanor	5 Ordinance 6 Other	Special Notes			
CHARGES	Name (Last, First, Middle) HARBIN, PATRICK CARLOS		Alias				Race W	Sex M
	Charge Description SIMPLE BATTERY		Charge Description AGGRAVATED BATTERY WITH A DEADLY WEAPON				Date of Birth 8/18/83	
VICTIM	Victim's Name (Last, First, Middle) SMOOT, MEGAN RENAE						Race W	Sex F
	Local Address (Street, Apt Number) 8050 TUMBLESTONE CT, 216		(City) DELRAY BEA	(State) FL	(Zip) 33484	Phone (561) 777-0900	Address Source	
	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> <p><input type="checkbox"/> committed the below acts in my presence.</p> <p><input type="checkbox"/> confessed to _____ admitting to the below facts.</p> <p><input type="checkbox"/> was observed by _____ who told _____</p> <p><input checked="" type="checkbox"/> that he/she saw the arrested person commit the below acts. _____ was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the <u>17</u> day of <u>July</u> <u>20</u> <u>17</u> at <u>7:24</u> <input type="checkbox"/> A.M <input checked="" type="checkbox"/> P.M (Specifically include facts constituting cause for arrest.)</p>								

On the above date and time, I responded to 8050 Tumblestone Ct. Apt 216, Unincorporated Delray Beach, Florida in reference to a possible stabbing investigation. Upon our arrival, I met with Trooper R. Sayir ID 1498. He advised that he was patrolling the parking lot when he noticed a w/f crying and sitting on the curb in front of building 8050. She was later identified as Megan Smoot. He asked her what was wrong and she told him that she had been beaten up by her boyfriend, Patrick Harbin who had stabbed himself in the chest and locked himself inside of her apartment. I entered Smoot's apartment and noticed a w/m laying on the kitchen floor with a bloody knife next to him. The male was later identified as Patrick Harbin. He was transported to Delray Community Hospital for evaluation. Upon my arrival at the Hospital, I took a sworn tape statement from Megan Smoot. She advised me that the two got into an argument and during the argument, she called him a bitch. She stated that he approached her and spit in her face. He then kicked her and punched her in the face with an closed fist. She stated that he punched her in the face and nose. Smoot advised that while she was on the floor, Harbin held a knife to her throat and told her that he would kill her. Smoot sustained a surface cut across her throat area. This was consistent with the above accounts. She stated that she was able to get away. Smoot advised that Harbin threatened to stab himself and then call the police. While speaking with her, I noticed bruises to her lower thigh area, left cheek, cut to her inner lip, a small bruise above her right eye and a knife cut to the middle neck area. This is consistent with Smoot's accounts of what had occurred during the altercation with Harbin. After speaking with her, I interviewed Harbin and he admitted grabbing and fighting with Smoot over a crack pipe that she had. He stated that he was only trying to take the crack and crack pipe from Smoot which resulted in the crack pipe and crack being destroyed. During the conversation, Harbin attempted to convince me that Smoot had stabbed him because she was mad at him for destroying her crack pipe and crack cocaine. Harbin sustain a 2 cm laceration to the upper chest area that required stitches. He also had a small cut to his right middle finger. Based on my investigation, I determined that Patrick Harbin was the primary aggressor. He was arrested and charged with Aggravated Battery with a deadly weapon and simple battery. He was transported to the Palm Beach County Jail for processing.

PROBABLE CAUSE STATEMENT

STATE OF FLORIDA  
COUNTY OF PALM BEACH

*DIS* *6465*  
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 17 day of January 20 17 by D/S T. FARRINGTON 6465

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced

PERSONALLY KNOWN

*VISUNKY 7/119 PBSO*  
Notary Public, Clerk of Court, Officer (F.S.S.) 117.10

PAGE  
1 OF 1



**FHP Offense Report**  
FLORIDA HIGHWAY PATROL  
P.O. BOX 540007, GREENACRES, FL 33454

SUPPLEMENT NUMBER 1

**Offense Report**

Agency Case Number <b>FHPL17OFF004362</b>	Report Date / Time <b>01/17/2017 09:03 PM</b>	Offense Description <b>IR INCIDENT REPORT</b>
CAD Incident Number <b>LWRC17CAD009818</b>	External Case Reference Number <b>17-027948</b>	Range of Occurrence Date/Time <b>01/17/2017 07:32 PM to 01/17/2017 09:05 PM</b>

LOCATION OF OCCURRENCE					Latitude <b>N 26 27.8313</b>	Longitude <b>W 80 10.4376</b>		
County <b>PALM BEACH</b>	Address <b>8050 216 TUMBLESTONE CT, DELRAY BEACH, FL 33444</b>	Location Type <b>Apartment complex</b>	Location Description <b>ATLANTICO AT TUSCANY AP/</b>	Location Status <b>None</b>				
Location Category <b>Residence</b>								
Weather	<input checked="" type="checkbox"/> Clear	<input type="checkbox"/> Cloudy	<input type="checkbox"/> Fog	<input type="checkbox"/> Rain	<input type="checkbox"/> Snow	<input type="checkbox"/> Hail	<input type="checkbox"/> Other	<input type="checkbox"/> Unknown

INITIAL NARRATIVE: 01/17/2017 09:27 PM

Reporting Officer	Officer Name	Permanent ID Number	Approving Supervisor	Permanent ID Number
Call Number <b>1498</b>	<b>SAYIH R. A.</b>	<b>FHPT14PER000108</b>	<input type="checkbox"/>	Supervisor Name
<p>On the above date and time I received a call from residents of Atlantico at Tuscany Apartments Complex in which is the complex of where I live stating that they could hear a resident on the lower level of their apartment building screaming. The residents who called stated that they heard a woman saying "ow" and that their delivery guy advised them that he heard that someone was stabbed and that someone's car was being stolen. I then made my way to the apartment building where the situation was occurring and observed a white female in a pink hoodie and shorts, covered in blood, sitting on the edge of the sidewalk in front of the apartment building. I approached the white female and asked her what's was going on and if she was injured. She then stated that she was beat up, and the man who hit her stabbed himself in the chest and locked himself in her apartment. I then advised dispatch what was occurring and to contact the county sheriffs office. The white female then advised me that he was an ex boyfriend and he is not supposed to be on the property due to being trespassed. She continued to advised that he had a spare key and made his way in the apartment, taking away her phone and then attacking her. I then placed the white female in the back of my vehicle and awaited for the county sheriffs office to arrive on scene after being advised that the suspect was locked in the apartment by himself and armed. Palm Beach Sheriffs Office then arrived on scene, cleared the apartment and detained the suspect who was then transported to Delray Medical Center. I obtained no information on the suspect or victim involved, and I was not injured during the incident.</p>				

REF PBSO CASE #: 17-027948

REPORTING OFFICER / SUPERVISOR APPROVAL		
Reporting Officer		Approving Supervisor
Cell Number <b>1498</b>	Name <b>SAYIH R. A.</b>	ID Number
Signature 		Rank
		Name
		Signature

**Palm Beach County Sheriff's Office**  
**DOMESTIC VIOLENCE/DATING VIOLENCE SUPPLEMENTAL PROBABLE CAUSE FORM**  
(Submit this form with the original Probable Cause Affidavit)

Defendant: PATRICK      CARLOS      HARBIN      DOB: 8/18/17      Case #: 17-027948  
Victim: MEGAN      RENAE      SMOOT      DOB: 8/27/94      Race: W      Sex: F

Relationship between Victim and Defendant: BOYFRIEND

Photographs: Scene  Yes  No      Victim  Yes  No      Defendant  Yes  No  
911 Call:  Yes  No      Caller: \_\_\_\_\_  
Weapon Used:  Yes  No      Type: \_\_\_\_\_ **KNIFE**  
Witness:  Yes  No      Name: \_\_\_\_\_  
Victim Pregnant:  Yes  No      If yes, \_\_\_\_\_ Weeks \_\_\_\_\_ Months  
Injuries:  Yes  No      Description: **BRUISES FACIAL AREA, AND A LACERATION TO THE THROAT AREA**  
Medical Treatment:  Yes  No  
At Scene:  Yes  No      Paramedics: **PALM BEACH COUNTY FIRE RESCUE**  
At Hospital:  Yes  No      Hospital: **DELRAY COMMUNITY**      Physician: **FEBER**

Are children living in the home?  Yes  No      DCF Notified?  Yes  No

Name: \_\_\_\_\_  
Name: \_\_\_\_\_  
Name: \_\_\_\_\_

DOB: \_\_\_\_\_  
DOB: \_\_\_\_\_  
DOB: \_\_\_\_\_

Injunction:  Yes  No      Case #: \_\_\_\_\_

No Contact Order:  Yes  No      Case #: \_\_\_\_\_

Alcohol or Drugs:  Yes  No  Unknown

Prior history of Domestic/Dating Violence  Yes  No

Defendant's statements  Yes  No      If yes,  written  recorded  oral

First words Defendant said when you responded to scene: **THAT HIS GIRLFRIEND HAD STABBED HIM**

Victim's statements  Yes  No      If yes,  written  recorded  oral

First words Victim said when you responded to scene: **HER BOYFRIEND HAD BEATEN HER UP AND STABBED HIMSELF**

Did the Victim contact anyone other than the police within an hour of the incident regarding the incident?

Yes  No      If yes, name: \_\_\_\_\_ phone: \_\_\_\_\_

Observations of Victim (Physical & Emotional): \_\_\_\_\_

Upset  Crying  Fearful  Hysterical  Afraid  Calm  Nervous

Complained of pain  Other: \_\_\_\_\_

Victim contact information: \_\_\_\_\_

Local Address: **8050 TUMBLESTONE CT ,216, DELRAY BEACH, FL 33484**

Phone: \_\_\_\_\_ Home: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

Employer: \_\_\_\_\_ N/A \_\_\_\_\_ Phone: \_\_\_\_\_

Name of Relative: \_\_\_\_\_ N/A \_\_\_\_\_ Phone: \_\_\_\_\_