

ADDITIONAL INFORMATION		ARREST / NOTICE TO APPEAR		1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias		JUVENILE	
DBTS Number		Agency ORI Number 0500400		Agency Name Delray Beach Police Department		Agency Report Number (N.T.A.'s only) 4 0 17-009270	
Charge Type: Check as many as 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		Location of Arrest (Including Name of Business) 1200 NW 1ST STREET		Location of Offense (Business Name, Address) 1200 NW 1ST ST, DELRAY BEACH, FL 33444		Enter Type: None/not Applicable Multiple Clearance Indicator: 1	
Date of Arrest 06/11/2017		Time of Arrest 03:46		Booking Date 06/11/2017		Booking Time 03:56	
Name (Last, First, Middle) FORD, RODNEY A		Sex M		Date of Birth 02/26/1985		Height 5'09	
Race W		Weight 185		Eye Color BLUE		Hair Color BLACK	
Complexion LIGHT		Build MEDIUM		Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)		Marital Status S	
Local Address (Street, Apt. Number) AT LARGE, DELRAY BEACH, FL 33444		(City) DELRAY BEACH		(State) FL		(Zip) 33444	
Permanent Address (Street, Apt. Number) AT LARGE, DELRAY BEACH, FL 33444		(City) DELRAY BEACH		(State) FL		(Zip) 33444	
Business Address (Name, Street) 2330747 / RI		(City) RI		(State) RI		(Zip) 02906	
D/L Number, State 2330747 / RI		Sex, Sec. Number M		INS Number 123456789		Place of Birth (City, State) PORTSMOUTH, VA	
Co-Defendant Name (Last, First, Middle) PORTSMOUTH, VA		Race W		Sex M		Date of Birth 02/26/1985	
Co-Defendant Name (Last, First, Middle) PORTSMOUTH, VA		Race W		Sex M		Date of Birth 02/26/1985	
Parent <input type="checkbox"/> Other: NO		Name (Last, First, Middle) NO		Address (Street, Apt. Number) NO		Residence Phone NO	
Legal Custodian <input type="checkbox"/>		Address (Street, Apt. Number) NO		(City) NO		(State) NO	
Notified by: (Name) NO		Date NO		Time NO		JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT / IAC 3. Incarcerated	
Released To: (Name) NO		Relationship NO		Date NO		Time NO	
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.		School Attended NO		Grade NO		Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Drug Activity N. N/A P. Possess		S. Sell B. Buy T. Traffic		R. Struggle D. Deliver E. Use		K. Disperses/ 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. Synthetic		U. Unknown Z. Other		Statute Violation Number 893.13(64)	
Charge Description POSSESSION OF COCAINE OR MARIJUANA OVER 20 GRAMS		Amount / Unit 17-009270		Offense # 1		Counts <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	
Drug Activity N		Drug Type N		Amount / Unit 17-009270		Offense # 1	
Counts <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Warrant / Capias Number 17-009270		Bond 17-009270	
Statute Violation Number 893.13(64)		Violation of ORD # 17-009270		Bond 17-009270		Violation of ORD # 17-009270	
Health / Apparent Physical Condition of Defendant NO		Any knowledge of the following: <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries		Explain: NO		PROPERTY - Received By NO	
Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Posted Bond		<input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> South County Mental Health		<input checked="" type="checkbox"/> F.O.T. County Jail		Released By NO	
Transported By NO		Date Transported NO		Time Transported NO		Other NO	
<input checked="" type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court <input type="checkbox"/> 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 NO		No Photo Available	
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/Guardian) NO		Date Signed NO		Signature of Arresting Officer CHAHINE, DEREK B.	
HOLD for Other Agency <input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal		Resisted Arrest <input type="checkbox"/> Other NO		Name Verification (Printed by Arrestee) CHAHINE, DEREK B.		I.D. # 1098	
Transporting Officer CHAHINE		I.D. # 1098		Agency DBPD		PAGE 1 OF 1	

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

DBTS Number		PROBABLE CAUSE AFFIDAVIT		1 Arrest 2 N.T.A 3 Request for Warrant 4 Request for Capias		1	JUVENILE
Agency ORI Number	FL 0500400	Agency Name	DELRAY BEACH POLICE DEPARTMENT		Agency Report Number	4 0 17-009270	
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					Special Notes	
Name (Last, First, Middle)				Alias	Race	Sex	Date of Birth
FORD, RODNEY A					W	M	02/26/1985
Charge Description				Charge Description			
893.13 (6 A) POSSESSION OF COCAINE							
Charge Description				Charge Description			
Victim's Name (Last, First, Middle)					Race	Sex	Date of Birth
State Of Florida							
Local Address (Street, Apt. Number)		(City)	(State)	(Zip)	Phone	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 checked="" 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.</p> <p><input type="checkbox"/> confessed to _____ admitting to the below facts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the 11 day of June, 2017 at 04:11 (Specifically include facts constituting cause for arrest.)</p>							
<p>The following incident occurred in the City of Delray Beach, Palm Beach County, Florida.</p> <p>While on patrol in the area of 1200 NW 1ST Street at 0314 hours, I observed a Chevy SUV bearing (Rhode Island Tag MV458) Stopped in the roadway past the stop bar of the stop sign located at the intersection of NW 12th Ave and NW 1st street. There were no other vehicles in the roadway and the vehicle stayed stopped at the intersection for an extended period of time. I honked the horn of my vehicle in an attempt to have the driver continue to proceed through the intersection, however the driver was unresponsive. I exited my fully marked Delray Beach patrol vehicle while wearing my full Delray Beach Police Department uniform. I made contact with the driver of the vehicle to conduct a welfare check. The driver of the vehicle was later identified as Rodney Ford. Ford was observed unconscious and the vehicle was still running. I knocked on the window multiple times in attempt to wake Ford up, however he was unresponsive. Ford became alert after making physical contact with him and the vehicle was turned off. In plain view in an open compartment located in the center of the vehicle I observed a clear baggy filled with a white rocky substance. Based on my training knowledge and experience I suspected the substance to be crack cocaine. The white rocky substance was field tested on scene by Officer Lunsford utilizing a Lynn Peavy Quick test kit and it yielded a positive reaction for the presence of cocaine. Ford was the sole occupant of the vehicle. Post Miranda Ford advised that he has smoked crack cocaine in the past. Ford advised the crack cocaine belonged to him.</p> <p>Based on the above I found probable cause to charge Rodney Ford under F.S.S 893.13(6A) Possession of cocaine.</p>							
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>SWORN AND SUBSCRIBED BEFORE ME</p> <p>STEVENSON, RODNEY <i>[Signature]</i></p> <p>NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 17.10)</p> <p>06/11/2017</p> <p>DATE</p> </div> <div style="width: 45%;"> <p><i>[Signature]</i></p> <p>SIGNATURE OF ARRESTING / INVESTIGATING OFFICER</p> <p>CHAHINE, DEREK B (1098)</p> <p>NAME OF OFFICER (PLEASE PRINT)</p> <p>06/11/2017</p> <p>DATE</p> </div> </div>							

JUN 11 2017