3545

0458451

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

OBTS Number | 1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias | 1 | Juvenile | N

ADMINISTRATIVE

Agency ORI Number	Agency Name	Agency Report Number (N.T.A.'s only)
FLO 500000	PALM BEACH COUNTY SHERIFF'S OFFICE	06- 19033964

Charge Type: Check as many as apply. [X] 1. Felony [ ] 2. Traffic Felony [X] 3. Misdemeanor [ ] 4. Traffic Misdemeanor [ ] 5. Ordinance [ ] 6. Other

Weapon Seized / Type: 2 (1. Yes 2. No) | Multiple Clearance Indicator: 02

Location of Arrest (Including Name of Business)	Location of Offense (Business Name, Address)
1543 LAKE CRYSTAL DR G, WPB FL 33411	1522 LAKE CRYSTAL DR #G, WPB FL 33411

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
02/05/2019	2342					

DEFENDANT

Name (Last, First, Middle): **Tingler, Shane, M** | Alias (Name, DOB, Soc. Sec. #, Etc.)

Race (W - White I - American Indian B - Black O- Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	M	09/16/1991	5'10	180	BROWN	BROWN	LIGHT	THIN

Scars, Marks, Tatoos, Unique Physcal Features (Location, Type, Description) | Marital Status: Single | Religion | Indication of: Alcohol Influence [ ] Y [ ] N [ ] Unk. / Drug Influence [ ] [ ] [ ]

Local Address (Street, Apt. Number) (City) (State) (Zip): 1543 LAKE CRYSTAL DR G, WPB FL 33411 | Phone ( ) | Residence Type: 1. City 2. County 3. Florida 4. Out of State: 2

Permanent Address (Street, Apt. Number) (City) (State) (Zip): , | Phone ( ) | Address Source: VERBAL

Business Address (Name, Street) (City) (State) (Zip) | Phone ( ) | Occupation

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
T524793913360	[redacted]		WPB, FL	US

CO-DEF

Co-Defendant Name (Last, First, Middle) | Race | Sex | Date of Birth | [ ] 1. Arrested [ ] 2. At Large | [ ] 3. Felony [ ] 4. Misdemeanor [ ] 5. Juvenile

Co-Defendant Name (Last, First, Middle) | Race | Sex | Date of Birth | [ ] 1. Arrested [ ] 2. At Large | [ ] 3. Felony [ ] 4. Misdemeanor [ ] 5. Juvenile

JUVENILE

[ ] Parent [ ] Legal Custodian [ ] 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 provided by [ ] defendant and / or [ ] defendant's parents The child and / or parent was told to keep the Juvenile Court Clerk (Phone 355-2626) informed of any change of address. [ ] Yes, by: (Name) [ ] No (Reason) | School Attended | Grade

Property Crime? [ ] Yes [ ] No | Description of Property | Value of Property

Alpha No Bond

CODE

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. Barbiturate C. Cocaine E. Heroin | H. Hallucinogen M. Marijuana O. Opium/Deriv. | P. Paraphernalia/ Equipment S. Synthetics | U. Unknown Z. Other

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
DOMESTIC BATTERY BY STRANGULATION	1	[X] Y [ ] N	784.041 2A	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
N	N		19033964		

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
SIMPLE DOMESTIC BATTERY	1	[X] Y [ ] N	784.03 1A1	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
N	N		19033964		

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		[ ] Y [ ] N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		[ ] Y [ ] N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

NOTICE TO APPEAR

Location (Court, Room Number, Address)

Court Date and Time: Month Day Year Time AM 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) | Date Signed: 02/05/2019

ADMIN

HOLD for other Agency Name: | Signature of Arresting Officer: X [signature] | Name Verification (Printed by Arrestee) (PRINT)

[ ] Dangerous [ ] Resisted Arrest [ ] Suicidal [ ] Other: | Name of Arresting Officer (Print): DS. E. GEORGE | I.D. #: 9656 | PAGE

Intake Deputy [signature] I.D. # 8161 | Pouch # | Transporting Officer: DS. E. GEORGE | ID#: 9656 | Agency: PBSO | Witness here if subject signed with an "X" | OF

DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT (N.T.A.'s ONLY)

PBSO #146 REV. 8/97

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SCANNED FEB 06 2019

PROBABLE CAUSE AFFIDAVIT

ADMIN

OBTS Number:

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: 06- 19033964

Charge Type: Check as many as apply: ☐ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
Tingler, Shane, M		W	M	09/16/1991

CHARGES

Charge Description		Charge Description	
DOMESTIC BATTERY BY STRANGULATION	784.041 2A	SIMPLE DOMESTIC BATTERY	784.03 1A1
Charge Description		Charge Description	

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
Marcine, Taylor, Lynn	W	F	03/03/1995

Local Address (Street, Apt. Number)	(City)	(State)	(zip)	Phone	Address Source
15172 78th Pl N, Loxahatchee, FL 33470				( )	
Business Address (Name, Street)	**(City)**	**(State)**	**(zip)**	**Phone**	**Occupation**
				( )	

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.
☐ confessed to _____ admitting to the below facts.
☐ was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.
☐ was found to have commited the below acts, resulting from my (described) investigation

On the 05 day of FEBRUARY 20 19 at 2307 ☐ A.M. ☒ P.M. (Specifically include facts constituting cause for arrest.)

On 02/05/2019 at approximately 2307PM while I was employed with the Palm Beach County Sheriff's Office North region district 3 road patrol division, working in a marked sheriff's Office patrol vehicle with emergency lights, sirens, PBSO insignia and in full PBSO road patrol uniform, I was assigned to patrol unincorporated West Palm Beach. While I was on patrol, I was notified by the PBSO dispatch that they had received a call from a female who stated her name was Taylor Marcine and that her boyfriend Shane Tingler had hit her. PBSO dispatch had me respond to 1522 Lake Crystal Dr #G to investigate the incident.

Upon my arrival to the scene DS. Perez #14622 advised that he already had a white male detained in the rear of his vehicle.

Upon entering the residence I met with a white female who appeared to be crying and concerned that the male was going to come back into the residence. Prior to speaking with her I observed large bruising and a red mark in the shape of a bite mark on her right arm. Her neck also was bright red as if someone had been grabbing her. Upon walking into the residence I observed a large clump of hair laying on the kitchen floor and a broken cell phone on the counter.
Upon speaking to her she stated that she had recently broken up with her boyfriend, Shane Tingler, who she lives with. They had been broken up for three days and tonight was his first night back into the residence. While they were both in the bedroom Tingler told her that he had been speaking to another female and gave her his phone to see who it was. While she was looking through the phone an argument began and Tingler demanded his phone back. She refused to give the phone back and Tingler became angry. Tingler then pushed her off their bed knocking her to the floor. He then got sat on top of her preventing her from getting up and running away and began to punch her in her body. As she began to struggle to get away Tingler placed his hands around her neck and squeezed, blocking off her airway so she could not breathe. As she continued to struggle Tingler was able to bite her right arm leaving a large bruise. Eventually Tingler let go, grabbed her cell phone and ran out of the residence. Marcine stated that she was able to call 911 and lock the front door so he could not come back in. Tingler eventually came back to the residence and she opened the door to let him in. He continued to argue and began punching her body again in the kitchen. During the punching he grabbed her hair and pulled out a large amount leaving it on the floor. Tingler then walked away from her and sat on the couch. She attempted to lock herself in the bedroom but the door was broken from another incident where Tingler "attacked" her. Tingler remained calm and asked for his blanket to fall asleep. Upon her opening the bedroom door he went to the gun safe in their room and noticed that the battery was missing. He then cornered her in the bathroom until they heard DS. Perez 14622 announce himself and demand for everyone to come out of the residence.

I later completed a sworn taped statement that was recorded on my PBSO in car video system an uploaded to the district 3 YAP system with Marcine. Marcine also allowed photographs to be taken of all her injuries caused by Tingler, and was provided a Domestic Violence Brochure.

Based on the statements provided I have probable cause to arrest Shane Tingler for knowingly, willingly, and unlawfully strike Taylor Marcine against her will pursuant to F.S.S. 784.03 1a1 Domestic simple battery. I also have probable cause for knowingly, intentionally, against the will of another, impeded the normal breathing or circulation of the blood of a family or household member or of a person whom he or she is in a dating relationship, so as to create the risk of or cause great bodily harm by applying pressure on the throat or neck of the other person by blocking the nose or mouth of the other person, pursuant to F.S.S. 784.041 2a Domestic Battery by Strangulation.

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ADMINISTRATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH

DS. E. GEORGE
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 6 day of FEBRUARY 20 19 by DS. E. GEORGE 9656

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

DS. A. PEREZ 14622 #14622
Notary Public, Clerk of Court, Officer (F.S.S. 117.10)

PAGE ____ OF ____

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PBSO #0004 REV. 04/01

Palm Beach County Sheriff's Office

DOMESTIC VIOLENCE/DATING VIOLENCESUPPLEMENTAL PROBABLE CAUSE FORM

(Submit this form with the original Probable Cause affidavit)

Suspect: Tingler, Shane, M DOB: 09/16/1991 Case #: 19033964

Victim: Marcine, Taylor, Lynn DOB: 03/03/1995 Race: W Sex: F

Relationship between Victim and Defendant: BOYFRIEND GIRLFRIEND

Photographs: Scene ☒ Yes ☐ No Victim ☐ Yes ☐ No Defendant ☐ Yes ☐ No

911 Call: ☒ Yes ☐ No Caller: TAYLOR MARCINE

Weapon Used: ☐ Yes ☒ No Type: _____

Witness: ☐ Yes ☒ No Name: _____

Victim Pregnant: ☐ Yes ☒ No If yes, ___ weeks _____ months

Injuries: ☒ Yes ☐ No Description: RED NECK/ BITE ON RIGHT ARM

Medical Treatment: ☒ Yes ☐ No

At Scene: ☒ Yes ☐ No Paramedics: PBCFR 23

At Hospital: ☐ Yes ☐ No Hospital: _____ Physician: _____

Are Children Living in Home? ☒ Yes ☐ No DCF Notified? ☒ Yes ☐ No

Name: BRONSON TINGLER DOB: 11 / 25 / 2013

Name: _____ DOB: ___/___/___

Name: _____ 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: _____

Victim's Statements ☒ Yes ☐ No If yes, ☐ written ☒ recorded ☐ oral

First words Victim said when you responded to scene: HE CHOKED ME

Did the Victim contact anyone other than 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: 1522 LAKE CRYSTAL DR G, WPB FL 33411

Phone: Home (561) 876 - 2270 Work (___)___ -____ Cell (___)___ -____

Employer: _____

Name of Relative: _____ Phone (___)___ -____

Address: _____

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VICTIM NOTIFICATION FORM

SUSPECT/OFFENDER: **Tingler, Shane, M** (FOR WARRANTS USE ONLY) COURT CASE/WARRANT#: _____

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

- **Homicide** (Ch. 782)
- **Attempted Murder**
- **Stalking** (F.S. 784.048)
- **Sexual Offense** (Ch. 794)
- **Attempted Sexual Offense**
- **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 #: **19033964** Agency: **PBSO**
   Offense: **DOMESTIC BATTERY BY STRANGULATION**
   Suspect/Offender: **Tingler, Shane, M**
   D.O.B. **09/16/1991** Race: **W** Sex: **M**

2. Warrant # (s): _____

3.a. Victim's name: **Marcine, Taylor, Lynn** D.O.B. **03/03/1995** Race: **W** Sex: **F**
   Address: **1522 LAKE CRYSTAL DR G**
   City: **WPB FL 33411**
   Home #- **(561) 876 2270** Work #: **0** Other: _____

b. Victim's next of kin, friend or neighbor: _____
   Address: _____
   City: _____
   Home #: _____ 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: **Marcine, Taylor, Lynn**

Deputy's Name: **DS. E. GEORGE 9656** I.D.# **9656** Date: **02/05/2019**

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

PBSO 00029A REV. 4199

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PALM BEACH COUNTY
SHERIFF'S OFFICE
Florida State Statute Exemption Sheet

Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	☐	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	☐	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	☐	119.071(4)(c)	Undercover personnel.	
	☐	119.071(2)(f)	Confidential informants (CIs).	
	☐	119.071(2)(e)	Confession.	
Public Info. Exemptions	☐	985.04(1)	Juvenile offender records.	
	☐	119.071(h)(i)	Assets of a crime victim.	
	☐	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	☐	394.4615(7)	Mental health information.	
	☐	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.	2
Florida Rules of Judicial Administration 2.420 (Rule of 23)	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	
	☐	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	☐			
	☐			
	☐			
	☐			
	☐			
Other	☐	119.0712(2)	Other: Personal Information contained in a motor vehicle record (s).	
	☐	393202(5)	Other: Person reporting Child Abuse	

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REVIEW COMPLETED BY

Booking Number: 2019004153	**Date:** 2/6/2019
	Specialist Name/ID: M. Tooks #8557