

0439298

17mm768 474

OBTS Number		ARREST / NOTICE TO APPEAR Juvenile Referral Report		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		Juvenile	
Agency ORI Number FLO 5 0 2 6 0 0		Agency Name PALM BEACH GARDENS POLICE DEPT.		Agency Report Number (N.T.A.'s only) 7 8 1 1 7 1 0 0 3 7 4 2 1 1					
Charge Type: Check as many as apply.		1. Felony 2. Traffic Felony		3. Misdemeanor 4. Traffic Misdemeanor		5. Ordinance 6. Other		If Weapon Seized Enter Type	
Location of Arrest (Including Name of Business)		3231 Meridian Way S Palm Beach Gardens		Location of Offense (Business Name, Address) Same					
Date of arrest 0 6 2 2 1 7		Time of Arrest 0 0 5 0		Booking Date		Booking Time		Jail Date	
Jail Time		Location of Vehicle							
Name (Last, First, Middle) Nalli, Stark R		Alias (Name, DOB, Soc. Sec. #, Etc.)							
Race W - White B - Black O - Oriental/Asian		Sex M		Date of Birth 1 1 2 7 7 8		Height 5 0 6		Weight 1 7 5	
Eye Color BRN		Hair Color BLK		Complexion Med		Build Med			
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) None Visible		Marital Status S		Religion N/A		Indication of: Alcohol Influence Drug Influence Y N Unk. 3. Florida 4. Out of State 1 1			
Local Address (Street, Apt. Number) 3231 Meridian Way S		(City) PBG		(State) FL		(Zip) 33410		Phone (561) 506-8531	
Permanent Address (Street, Apt. Number) Same as Above		(City)		(State)		(Zip)		Address Source On Scene	
Business Address (Name, Street)		(City)		(State)		(Zip)		Phone ( )	
D/L Number, State N 400 796 78 4270		Soc. Sec. Number		INS Number		Place of Birth (City, State) Pittsfield, MA		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:		Name (Last) No Bond		(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 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		Grade					
<input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)		Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property		Value of Property			
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. Synthetic		U. Unknown Z. Other	
Charge Description Battery (Simple) Domestic		Counts 1		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number 7 8 4 0 3		Violation of ORD # (1)(A)(1)	
Drug Activity N		Drug Type N		Amount / Unit N/A		Offense #		Warrant / Capias Number	
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	
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	
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	
<input 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 Reverse Side.		Location (Court, Room Number, Address)							
Court Date and Time		Month Day Year Time							
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							
HOLD for other Agency Name:		Signature of Arresting Officer X [Signature]		Name Verification (Print) JUN 22 2017					
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:		Arresting Officer (Print) Nieves		I.D. # 329		(PRINT) JUN 22 2017			
Intake Deputy [Signature]		I.D. #		Pouch #		Transporting Officer Nieves		I.D. # 329	
Agency PBGPD		I.D. #		Pouch #		Witness here if subject signed with an "X"		PAGE 1 OF 1	

DISTRIBUTION: WHITE - COURT COPY

GREEN - STATE ATTORNEY

YELLOW - AGENCY

PINK - JAIL

GOLD - DEFENDANT

## DOMESTIC VIOLENCE PROBABLE CAUSE

AFFIDAVIT.

Palm Beach County

A D M I N	Date / Time <b>06/22/2017 00:22</b>	Agency ORI Number <b>FL 0502600</b>		Agency Name <b>PALM BEACH GARDENS POLICE</b>	Agency Report Number <b>7   8   17-003742</b>	
	Name (Last, First, Middle) <b>NOLLI, STARK RYAN</b>				Alias	Race <b>W</b>
D E F	Date of Birth <b>11/27/1978</b>					
C H R G	Charge Description <b>784.03(1)(A)(1) BATTERY-SIMPLE (TOUCH OR STRIKE)</b>					

DEFENDANT'S STATEMENTS: Written ☐ Taped ☒ Oral ☐

VICTIM'S STATEMENTS: Written ☐ Taped ☒ Oral ☐

OBSERVATIONS OF VICTIM (PHYSICAL &amp; EMOTIONAL):

**BRUISED EYE**

RELATIONSHIP BETWEEN VICTIM &amp; SUSPECT

**BROTHERS**

PHOTOGRAPHS: Scene: YES ☒ NO ☐

Victim: YES ☒ NO ☐

911 CALL: YES ☒ NO ☐

CALLER: [REDACTED]

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: **PALM BEACH GARDENS FD**

Hospital: YES ☒ NO ☐

PHYSICIAN(S) / HOSPITAL: **PBG MEDICAL CENTER**

ACT COMMITTED IN PRESENCE OF MINOR(S): YES ☐ NO ☒

NAMES/AGES:

H. R. S. NOTIFIED: YES ☐ NO ☒

VICTIM PREGNANT: YES ☐ NO ☒

VIOLATION OF RESTRAINING ORDER: YES ☐ NO ☒

CASE #:

PRIOR HISTORY OF DOMESTIC VIOLENCE: YES ☐ NO ☒

ALCOHOL OR DRUGS INVOLVED: YES ☐ NO ☒

On Thursday June 22, 2017 at approximately 0025 hours I was dispatched to 3231 Meridian Way S Apartment B in reference to a complaint of battery. I was advised by dispatch that the caller claimed to have sustained an eye injury from his brother. Prior to my arrival I activated my department issued body worn camera. I then met, spoke with and swore in

STATE OF FLORIDA  
COUNTY OF PALM BEACH

Appeared before me, \_\_\_\_\_ personally known to me, who, being first duly sworn, says that the facts above, based upon my investigation, are true.



SIGNATURE OF ARRESTING OFFICER

Sworn to and subscribed to before me this 22 day of June, 2017.

**LEBLANC, GARY**

NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

SCANNED

JUN 22 2017

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.

## DOMESTIC VIOLENCE PROBABLE CAUSE

AFFIDAVIT.

Palm Beach County  
Narrative Continuation

ADMINISTRATIVE	Date / Time	06/22/2017 00:22	
	Agency ORI Number	Agency Name	Agency Report Number
	FL 0502600	PALM BEACH GARDENS POLICE	7   8   17-003742

[REDACTED] who stated that he and his brother had gotten into a fight and his brother (Stark Nolli) had caused some bruising and swelling on his eye. I was able to observe some swelling on the left eye of [REDACTED] as he spoke to me. [REDACTED] went on to say that he was in the area of his brother's residence and had intended on catching the public bus back to his residence but he had missed the last bus. [REDACTED] said he went to Stark's residence and spoke to his mother (who resides with Stark and his partner). [REDACTED] asked for a pillow and a blanket so that he could sleep outside on the grass until morning. [REDACTED]'s mother gave him a pillow and a blanket. [REDACTED] then laid down on the grass outside of the fence to Stark's property. Stark then came outside and told [REDACTED] that he was not allowed to be on the property and wanted him to leave. The two began yelling at each other and Stark punched [REDACTED] in the face causing his eye to swell. [REDACTED] stated that he did wish to prosecute his brother on the complaint of battery.

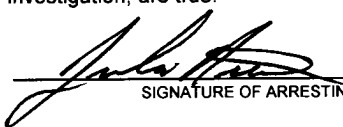
I then spoke with Stark who stated a similar account except that he claimed that his brother pushed him first thereby making him the aggressor. I explained to Stark that his brother was outside the gated area to his property laying on the grass. When Stark exited his property to confront [REDACTED], that made him the aggressor and anything that occurred after that was caused by Stark leaving the property and confronting his brother. Stark understood and surrendered himself without any incident.

[REDACTED] was transported to the Palm Beach Gardens Medical Center for treatment and observation of his injured eye. [REDACTED] was given a victims notification form and domestic violence packet by Officer Colletti. Stark Nolli was arrested and transported to the Palm Beach Gardens Police Department then to the Palm Beach County Jail for booking.


I believe the above to be true and factual based on my observations and the statements from both [REDACTED] and Stark Nolli. Furthermore; I believe that probable cause does exist for the arrest of Stark Nolli on the complaint of simple battery (domestic)

STATE OF FLORIDA  
 COUNTY OF PALM BEACH

Appeared before me, \_\_\_\_\_ personally known to me, who, being first duly sworn, says that the facts above, based upon my investigation, are true.

  
 SIGNATURE OF ARRESTING OFFICER

Sworn to and subscribed to before me this 22 day of June, 2017.

LEBLANC, GARY   
 NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

SCANNED  
 JUN 22 2017

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## VICTIM NOTIFICATION FORM

This form must be filled out in a case involving one of the following crimes:

- **Homicide** (Ch. 782)
- **Sexual Offense** (Ch. 794)
- **Attempted Murder**
- **Attempted Sexual Offense**
- **Stalking** (S. 784.048)
- **Domestic Violence** - (This includes any assault, agg. assault, battery, agg. battery, sexual assault, sexual battery, stalking, agg. 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 #: 17-003742 Agency: Palm Beach Gardens PD  
Offense: Domestic Battery  
Suspect/Offender: Stark Noll  
D.O.B. 11/27/78 Race: white Sex: Male

2. Warrant #(s): \_\_\_\_\_

3. Complete one (1) of the following:

a.



b. Victim's next of kin:

Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home #: \_\_\_\_\_ Work #: \_\_\_\_\_ Other: \_\_\_\_\_

c. Victim's designated contact other than next of kin (for example: a friend or neighbor):

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home #: \_\_\_\_\_ Work #: \_\_\_\_\_ Other: \_\_\_\_\_

4. Relevant identification or case numbers assigned to the case (please specify):  
\_\_\_\_\_

**WAIVER:** I CHOOSE NOT TO COMPLETE THIS VICTIM NOTIFICATION FORM, AND UNDERSTAND THAT I AM WAIVING MY RIGHT TO BE NOTIFIED OF THE RELEASE OF THE SUSPECT/OFFENDER.

Signature of person waiving notification: \_\_\_\_\_  
Printed name of person waiving notification: \_\_\_\_\_

Officer's Name: Colletti I.D.: 358 Date: JUN 23 2017

SUSPECT/OFFENDER: Stark Noll

COURT CASE/WARRANT #: \_\_\_\_\_  
(FOR WARRANTS USE ONLY)