

ARREST / NOTICE TO APPEAR		16-8673	
OBTS Number		1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias	
Agency ORI Number		Agency Report Number (N.T.A.'s only)	
0500800		9, 4 2016-0013456	
Agency Name		West Palm Beach Police Department	
Charge Type: Check as many as apply		If Weapon Seized	
1. Felony 2. Traffic Felony 3. Misdemeanor 4. Traffic Misdemeanor 5. Ordinance 6. Other		Enter Type	
Location of Arrest (Including Name of Business)		Location of Offense (Business Name, Address)	
Date of Arrest		Booking Date	
Time of Arrest		Booking Time	
Name (Last, First, Middle)		Alias (Name, DOB, Soc. Sec. #, Etc.)	
GARRETT, ZACHARY TAYLOR		Alias:	
Race		Eye Color	
W - White 1 - American Indian B - Black Q - Oriental/Asian		HAZEL	
Sex		Hair Color	
M		BROWN	
Date of Birth		Complexion	
01/12/1994		FAIR	
Height		Build	
6'00			
Weight			
180			
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)		Marital Status	
		S	
		Religion	
		UNKNOWN	
Local Address (Street, Apt. Number)		Phone	
3414 PRIMROSE CT, PALM BEACH GARDENS, FL 33410		(703) 581-5437	
Permanent Address (Street, Apt. Number)		Phone	
3414 PRIMROSE CT, PALM BEACH GARDENS, FL 33410		(703) 581-5437	
Business Address (Name, Street)		Phone	
SEASONS 52,			
D/L Number, State		Citizenship	
A61371327 / VA		United States	
INS Number		Place of Birth (City, State)	
		United States	
Co-Defendant Name (Last, First, Middle)		Race	
Sex		Date of Birth	
Co-Defendant Name (Last, First, Middle)		Race	
Sex		Date of Birth	
Parent		Other	
Legal Custodian		Name (Last, First, Middle)	
Address (Street, Apt. Number)		(City) (State) (Zip)	
Notified by: (Name)		Date	
Released To: (Name)		Relationship	
The above address was provided by		defendant and/or	
The child and/or parent was told to keep the Juvenile Court Clerk's Office		(Phone 355-2526) informed of any change of address.	
Property Crime?		Description of Property	
Yes		No	
Drug Activity		S. Sell	
N. N/A		B. Buy	
P. Possess		T. Traffic	
R. Smuggle		D. Deliver	
K. Disperse/Distribute		M. Manufacture/Produce/Cultivate	
Z. Other		Drug Type	
		N. N/A	
		A. Amphetamine	
		B. Barbiturate	
		C. Cocaine	
		E. Heroin	
		H. Hallucinogen	
		M. Marijuana	
		P. Paraphernalia/Equipment	
		S. Synthetic	
		U. Unknown	
		Z. Other	
Charge Description		Statute Violation Number	
SEXUAL BATTERY VICTIM OVER 12YOA NO PHYSICAL FORCE		794.011(5) (B)	
Drug Activity		Amount / Unit	
N		/	
Drug Type		Offense #	
N		2016-0013456	
Counts		Domestic Violence	
1		Y N	
Warrant / Capias Number		Bond	
Charge Description		Statute Violation Number	
Drug Activity		Amount / Unit	
Drug Type		Offense #	
Counts		Domestic Violence	
		Y N	
Warrant / Capias Number		Bond	
Charge Description		Statute Violation Number	
Drug Activity		Amount / Unit	
Drug Type		Offense #	
Counts		Domestic Violence	
		Y N	
Warrant / Capias Number		Bond	
Health / Apparent Physical Condition of Defendant		Any knowledge of the following:	
		Mental Escape Risk Medication Deformities Injuries	
Check which applies:		Released O.R.	
Released to Parent/Guardian		T.O.T. County Jail	
PROPERTY - Received By		Released By	
Transported By		Date Transported	
		Time Transported	
		Other	
INSTRUCTION NO. 1 - Mandatory appearance in court		Location (Court, Room)	
INSTRUCTION NO. 2 - You need not appear in Court		Court Date and Time	
but must comply with instructions on Page 2.			
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		Signature of Arresting Officer	
Dangerous		Name of Arresting Officer (Print)	
Resisted Arrest		I.D. #	
Suicidal		Other	
Intake Deputy		Pouch #	
I.D. #		Transporting Officer	
		I.D. #	
		Agency	
		Name Verification (Printed by Arrestee)	
		(PRINT)	
		Witness here if subject signed with an "X".	
		PAGE	
		1 OF 1	

OBTS Number A D M I N D E F C H A R G E S V I C T I M P R O B A B L E C A U S E S T A T E M E N T A D M I N I S T R A T I V E	PROBABLE CAUSE AFFIDAVIT	1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias	<div style="border: 1px solid black; padding: 2px; width: 30px; margin: 0 auto;">3</div>	JUVENILE	
Agency ORI Number FL 0500800		Agency Name WEST PALM BEACH POLICE DEPARTMENT		Agency Report Number 9 4 2016-0013456	
Charge Type: <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) GARRETT, ZACHARY TAYLOR		Alias	Race W	Sex M	Date of Birth 01/12/1994
Charge Description 794.011 (5)(B) SEXUAL BATTERY		Charge Description			
Charge Description		Charge Description			
Victim's Name (Last, First, Middle) <div style="background-color: black; width: 100%; height: 1.2em;"></div>		Race W	Sex F	Date of Birth 01/21/1994	
Address <div style="background-color: black; width: 100%; height: 1.2em;"></div>		Address Source			
Business Address (Name, Street, City, State, Zip) <div style="background-color: black; width: 100%; height: 1.2em;"></div>		Occupation			
<p>The undersigned certifies and swears that he/she has just and resonable 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> <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> confessed to _____ admitting to the below facts. </div> <div> <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation. </div> </div> <p>On the <u>18</u> day of <u>July</u>, <u>2016</u> at <u>00:00</u> (Specifically include facts constituting cause for arrest.)</p> <p>During the early morning hours of Monday, July 18th, 2016 the criminal act of sexual battery occurred at [REDACTED]</p> <p>On the afternoon of Thursday, August 18th, 2016 the victim, [REDACTED], provided a recorded sworn statement to your affiant detailing her recollection of the morning in question. During her statement [REDACTED] said that on the evening of Sunday, July 17th, 2016 she'd met the defendant, Zachary Garrett at a mutual friend's house and had allowed him to stay at her home because he'd had nowhere else to stay. After [REDACTED] fell asleep she woke up to find Zachary beside her in bed digitally penetrating her vagina. He then had unprotected, non-consensual vaginal intercourse with her and ejaculated on her bedsheets. These bedsheets have been retained as evidence.</p> <p>During a one party consent call Zachary implicated himself in the above described sexual activity and apologized for his actions explaining he'd been "High" on heroin.</p> <p>At this time due to the above stated case facts, I feel there is sufficient probable cause to charge Zachary Garrett, white male, date of birth: 1/12/94 with one count of Sexual Battery pursuant to FSS 794.011(5) (b).</p>					
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 45%;"> <p>SWORN AND SUBSCRIBED BEFORE ME</p> <p></p> <p>COGNETTI-CHASE, CATHY</p> <p>NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)</p> <p><u>08/29/2016</u></p> <p>DATE</p> </div> <div style="width: 45%; text-align: center;"> <p></p> <p>SIGNATURE OF ARRESTING / INVESTIGATING OFFICER</p> <p>MACCARTHY, DARRIN P. (01361)</p> <p>NAME OF OFFICER (PLEASE PRINT)</p> <p><u>08/29/2016</u></p> <p>DATE</p> </div> </div>					

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.