

IN THE CIRCUIT COURT OF THE  
EIGHTEENTH JUDICIAL CIRCUIT  
IN AND FOR BREVARD COUNTY,  
FLORIDA

**ADMINISTRATIVE ORDER NO.:**  
**11-29-B**

**IN RE:           Criminal – Standardized Brevard County Arrest Affidavit**

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WHEREAS, Florida Rules of Judicial Administration (Rule 2.050) states that the chief judge “shall exercise administrative supervision over all courts within the judicial circuit in the exercise of judicial power over the judges and officers of the court” and “shall develop an administrative plan for the efficient and proper administration of all courts within that circuit”, which included a “mandatory periodic review of the status of the inmates of the county jail”; and

WHEREAS, the sheriff and municipal law enforcement agencies in Brevard County have historically used a standard arrest form which was at one time provided by the Clerk of the Court, but has now become the financial responsibility of each law enforcement agency; and

WHEREAS, many law enforcement agencies are generating forms or are considering programs that generate forms through their computer systems; and

WHEREAS, continued standardization of Brevard County’s Arrest Affidavit will maintain efficiency, effectiveness, statistical information and sharing of information among various state, county and municipal agencies; and

WHEREAS, continued standardization of Brevard County’s Arrest Affidavit will avoid inefficiency, court-related costs, labor hours, redundancy, data entry and clerical mistakes.

IT IS ORDERED AND ADJUDGED that the Standard Affidavit of Arrest attached hereto as Attachment “A”, which shall include a Notice Of Confidential Information when required under Florida Rule of Judicial Administration 2.420(d)(2), is hereby adopted for use by all law enforcement agencies within Brevard County. Said Arrest Affidavit, whether pre-printed or computer generated, is required to maintain the same basic format in the inclusion and presentation of information to the court.

DONE AND ORDERED, this 21st day of September, 2011.

ALAN A. DICKEY  
ALAN A. DICKEY  
CHIEF JUDGE

Distribution:

All Circuit and County Court Judges (Brevard County)

Court Administration (Brevard & Seminole County)

Clerk of Court (Brevard County)

State Attorney (Brevard County)

Public Defender (Brevard County)

Sheriff (Brevard County)

Bar Association (Brevard County)

Law Library (Brevard County)

All Law Enforcement Agencies (Brevard County)

FCIC CHECK <input type="checkbox"/> YES <input type="checkbox"/> NO  OBTS Number		<b>ATTACHMENT "A"</b> <b>ARREST/NOTICE TO APPEAR</b> <b>PROBABLE CAUSE AFFIDAVIT/</b> <b>JUVENILE REFERRAL</b>		1. Arrest 2. Notice to Appear 3. Arrest Affidavit 4. Complaint Affidavit 5. Request for Capias 6. Juvenile Referral <div style="float: right; text-align: right;"> <input type="checkbox"/> Juvenile  <input type="checkbox"/> </div>	
Agency ORI Number <b>FL 005035 A</b>		Agency Name		Agency Report Number	
Check Type. Check as many as apply: <input 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			Weapon Seized/Type <input type="checkbox"/> Yes <input type="checkbox"/> No		Agency Arrest Number
Location of Arrest (Include Name of Business)		City		Location of Offense Business Name, Address	
Date of Arrest		Time of Arrest		BCSO Date	
Date of Offense		FDLE Number		DOC Number	
Name (Last, First, Middle)		Alias			
Race: W-White I-American Indian B-Black O-Oriental/Asian		Sex		Date of Birth	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)		Height		Weight	
Local Address (Street, Apt, Number)		(City)		(State) (Zip)	
Permanent Address (Street, Apt, Number) or Parent's Name if Juv.		(City)		(State) (Zip)	
Business Address (Name, Street,) or Parent's Address if Juvenile		(City)		(State) (Zip)	
Driver's License State/Number		Social Security Number		I.C.E. Number	
Co-Defendant Name (Last, First, Middle)		Race		Sex	
Co-Defendant Name (Last, First, Middle)		Race		Sex	
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		Type N. N/A P. Possess		B. Barbiturate C. Cocaine E. Heroin	
H. Hallucinogen M. Marijuana O. Opium / Derivative		P. Paraphernalia / Equipment S. Synthetic		U. Unknown Z. Other	
Charge Description		Counts		Statute Violation Number	
Activity		Drug Type		Amount/Unit	
<input type="checkbox"/> PC <input type="checkbox"/> Capias <input type="checkbox"/> AC <input type="checkbox"/> BW <input type="checkbox"/> FW <input type="checkbox"/> PW <input type="checkbox"/> Juv. PU <input type="checkbox"/> Citation		Date Issued		<input type="checkbox"/> Writ. Att. <input type="checkbox"/> Domestic Viol. Inj. <input type="checkbox"/> Order of Arrest	
Charge Description		Counts		Statute Violation Number	
Activity		Drug Type		Amount/Unit	
<input type="checkbox"/> PC <input type="checkbox"/> Capias <input type="checkbox"/> AC <input type="checkbox"/> BW <input type="checkbox"/> FW <input type="checkbox"/> PW <input type="checkbox"/> Juv. PU <input type="checkbox"/> Citation		Date Issued		<input type="checkbox"/> Writ. Att. <input type="checkbox"/> Domestic Viol. Inj. <input type="checkbox"/> Order of Arrest	
The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe the above named Defendant committed the following violation of law: <b>On the day of , 2011 at <input type="checkbox"/> A.M. <input type="checkbox"/> P.M.</b> (Specifically include facts constituting cause for arrest.)					
<b>Pursuant to Florida Statute 938.27 the investigative cost incurred by this agency is .</b>					
Continued for <input type="checkbox"/> Narrative <input type="checkbox"/> Charges					
<b>Mandatory Appearance In Court</b>		<b>Location : Brevard County Courthouse, 2825 Judge Fran Jamieson Way, Viera, FL 32940</b>			
Month		Day		Year	
Time		<input type="checkbox"/> A.M. <input type="checkbox"/> P.M.			
I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED. 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 OR A TAKE INTO CUSTODY ORDER SHALL BE ISSUED.					
Signature of Defendant/Juvenile		Signature of Juv. Parent/Custodian		Released to: (Name)	
Date		Time			
Miranda <input type="checkbox"/> Warning		Hold for Other Agency Name:		Verified By	
Adults Only: <input type="checkbox"/> Hold for First Appearance. <input type="checkbox"/> Do Not Bond Out		Reason:		Bond #	
I swear/affirm the above and attached is true and correct. <input type="checkbox"/> Yes Investigator's/Complainant's Signature _____ ID. No/Dist.		Sworn and subscribed before me, the undersigned authority this day of , 2011. Signature _____ Type name Notary/Law Enforcement Officer in Performance of Official		Bond #	
Name (Printed)		Duties. Personally Known <input type="checkbox"/> ID Produced <input type="checkbox"/>		Returnable Court Date	
				Returnable Court Date	
				Court Location:	
				Page 1 of	

**Brevard County, FL**

<b>Narrative Continuation</b>				Page of		Agency Report No.	
<b>DEFENDANT/JUVENILE</b> (Last, First, Middle)						OBTS No.	
Charge Description			Counts	<input type="checkbox"/> F.S. <input type="checkbox"/> Ord.	Statute Violation Number		Violation of Section (ORD)
Activity	Drug Type		Amount/Unit	Bond Amount	Court Number		
<input type="checkbox"/> PC <input type="checkbox"/> Capias <input type="checkbox"/> AC <input type="checkbox"/> BW <input type="checkbox"/> FW <input type="checkbox"/> PW <input type="checkbox"/> Juv. PU <input type="checkbox"/> Citation				Date Issued	<input type="checkbox"/> Writ. Att. <input type="checkbox"/> Domestic Viol. Inj. <input type="checkbox"/> Order of Arrest		
Charge Description			Counts	<input type="checkbox"/> F.S. <input type="checkbox"/> Ord.	Statute Violation Number		Violation of Section (ORD)
Activity	Drug Type		Amount/Unit	Bond Amount	Court Number		
<input type="checkbox"/> PC <input type="checkbox"/> Capias <input type="checkbox"/> AC <input type="checkbox"/> BW <input type="checkbox"/> FW <input type="checkbox"/> PW <input type="checkbox"/> Juv. PU <input type="checkbox"/> Citation				Date Issued	<input type="checkbox"/> Writ. Att. <input type="checkbox"/> Domestic Viol. Inj. <input type="checkbox"/> Order of Arrest		

Officer's Signature

Officer's Name Printed

## NOTICE OF CONFIDENTIAL INFORMATION WITHIN COURT FILING

Pursuant to Florida Rule of Judicial Administration 2.420(d)(2), the filer of a court record at the time of filing shall indicate whether any confidential information is included within the document being filed; identify the confidentiality provision that applies to the identified information; and identify the precise location of the confidential information within the document being filed.

Title/Type of Document(s): \_\_\_\_\_

Indicate the applicable confidentiality provision(s) below from Rule 2.420(d)(1)(B), by specifying the location within the document on the space provided:

- \_\_\_\_\_ Chapter 39 records relating to dependency matters, termination of parental rights, guardians ad litem, child abuse neglect, and abandonment. §39.1032(3), Fla. Stat. (If the document is filed within a Chapter 39 case, this form is not required.)
- \_\_\_\_\_ Adoption records. §63.162, Fla. Stat. (If the document is filed within a Chapter 63 adoption case, this form is not required)
- \_\_\_\_\_ Social Security, bank account, charge, debit, and credit card numbers in court records. §119.0714(1)(i)-(j), (2)(a)-(e), Fla. Stat. (Unless redaction is requested pursuant to §119.0714(2), this information is exempt only as of January 1, 2011)
- \_\_\_\_\_ HIV test results and patient identity within the HIV test results, §381.004(3)(e), Fla. Stat.
- \_\_\_\_\_ Sexually transmitted diseases - test results and identity within the test results when provided by the Department of Health or the department's authorized representative. § 384.29, Fla. Stat.
- \_\_\_\_\_ Birth and death certificates, including court-issued delayed birth certificates and fetal death certificates. §§382.008(6), 382.025(1)(a), Fla. Stat.
- \_\_\_\_\_ Identifying information in petition by minor for waiver of parental notice when seeking to terminate pregnancy. §390.01116, Fla. Stat. (If the document is filed within a Ch. 390 waiver of parental notice case, this form is not required)
- \_\_\_\_\_ Identifying information in clinical mental health records under the Baker Act. §394.4615(7), Fla. Stat.
- \_\_\_\_\_ Records of substance abuse service providers which pertain to the identity, diagnosis, and prognosis of and service provision to individuals who have received services from substance abuse service providers. § 397.501(7), Fla Stat.
- \_\_\_\_\_ Identifying information in clinical records of detained criminal defendants found incompetent to proceed or acquitted by reason of insanity. § 916.107(8), Fla. Stat.
- \_\_\_\_\_ Estate inventories and accountings. §733.604(1), Fla. Stat.
- \_\_\_\_\_ Victim's address in domestic violence action on petitioner's request. §741.30(3)(b), Fla. Stat.
- \_\_\_\_\_ Information identifying victims of sexual offenses, including child sexual abuse. §§119.071(2)(h), 119.0714(1)(h), Fla. Stat.
- \_\_\_\_\_ Gestational surrogacy records. §742.16(9), Fla. Stat.
- \_\_\_\_\_ Guardianship reports, and orders appointing court monitors in guardianship cases. §§744.1076, 744.3701, Fla. Stat.
- \_\_\_\_\_ Grand jury records. Ch. 905, Fla. Stat. (If the document is filed in Ch. 905 grand jury proceedings, this form is not required)
- \_\_\_\_\_ Information acquired by courts and law enforcement, regarding family services for children. §984.06(3)-(4), Fla. Stat. (If the document is filed in Ch. 984 family services for children case, this form is not required)
- \_\_\_\_\_ Juvenile delinquency records. §§985.04(1), 985.045(2), Fla. Stat. (If the document is filed in a Ch. 985 juvenile delinquency case, this form is not required)
- \_\_\_\_\_ Information disclosing the identity of persons subject to tuberculosis proceedings and records of the Department of Health in suspected tuberculosis cases. §§392.545, 392.65, Fla. Stat.