

PROBABLE CAUSE AFFIDAVIT	PURPOSE On View (PC Arrest) <input checked="" type="checkbox"/> Taken into Custody (Warrant/Capias Arrest)	Capias Request _____ Summoned/Cited (NTA) _____	JUVENILE YES _____ NO <input checked="" type="checkbox"/> Referral _____ Civil Citation _____
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ADMINISTRATIVE	Arresting Agency ORI Number 051200	Arresting Agency Name CITY OF PALM BAY POLICE DEPARTMENT	Arresting Agency Case/Arrest Number 24-009938	OBT5 Number 0801-479080
	FILE Number	FBI Number	DOC Number	Transport Time
	Location of Arrest (Include Name of Business) Malabar/Babcock Rd, Palm Bay	City City of Palm Bay	Location of Offense (Include Name of Business) 411-201 THOR AVE SE	City City of Palm Bay
	Offense Date OR Date Range 12/31/2024	Arrest Date/Time 12/31/2024 21:46	Charge Type (Select as many as apply) Misdemeanor <input checked="" type="checkbox"/> Traffic _____	Felony Ordinance <input checked="" type="checkbox"/>

DEFENDANT/JUVENILE	Name (Last, First, Middle) Burroughs, Travis, David	Alias and Type	Date of Birth 09/03/2003	Age 21	Jacket Number 5072644	
	Race Other	Ethnicity N/A	Sex Male	Height 5'7"	Weight 110	
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) None					
	Local Address (Street, Apt. Number) 411 THOR AVE SE APT 201	City, State, Zip Palm Bay FL 32905	Phone/Type (include area code) 3216147357	Primary Language English <input checked="" type="checkbox"/>		
	Permanent Address (Street, Apt. Number) or parent's if Juvenile (Same as Address)	City, State, Zip	Phone/Type (include area code)	Complexion Light		
	Business Address (Street, Apt. Number)	City, State, Zip	Phone/Type (include area code)	Build Slim		
	Driver's License State/ Number/ Type B620804033230	Social Security Number* [REDACTED]	INS Number	Place of Birth Florida	Citizenship United States of America	
	Residence Type: City <input checked="" type="checkbox"/> County _____ Florida <input checked="" type="checkbox"/> Out of State _____	Mark All that Apply (Y, N, Unk) Homeless N Sex Offender N Gang Affiliation N	Suspect of Using (Y, N, Unk) Alcohol Y Computer/ Handheld Device N Drugs N			
	PARENT Driver's License State / Number / Type	PARENT Social Security Number*	Juvenile Civil Citation Not Referred Explanation	Juvenile Facility		

* Collection of social security numbers from an arrested individual is to verify identity and may be shared with other law enforcement agencies.

CHARGE	PC <input checked="" type="checkbox"/> Capias <input type="checkbox"/> Warrant <input type="checkbox"/> Additional Charge <input checked="" type="checkbox"/>	Date Issued	Writ Aff.	Domestic Violence	Order of Arrest
	Charge Description D.U.I. - At/Over 0.150 BAC	Counts 1	F.S. Ord. <input checked="" type="checkbox"/>	Statute/ Ordinance Number 316.193 (4)	Re-classifier
	Drug Activity	Drug Type	Amount/Unit	Bond Amount 500.00	Warrant / Citation / Court Number

PROBABLE CAUSE	The undersigned certifies and swears that he/she has just and reasonable grounds to believe and does believe and does believe that the above Defendant committed the following violation of law				
	On the 12/3 day of Dec, 2024 at 21:46	— AM <input checked="" type="checkbox"/> PM	(Specifically include facts constituting cause for arrest)		
	See attached narrative.				
	Confidential Victim Information Included - YES _____ NO <input checked="" type="checkbox"/>				

In accordance with F.S.S. 938.27, I hereby request reimbursement of investigative costs consisting of _____ hrs @ \$ _____ per hr and/or _____ miles @ \$ _____ per mile for a total of \$ _____.

Affidavit Attached: YES NO _____

Continue for: Narrative Charges _____

NOTICE TO APPEAR	Mandatory Appearance in Court	Location (Court, Room Number, Address) Viera Court House, 2825 Judge Fran Jamieson Way, Viera, FL 32940	Division #
	Date: _____	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 OR A TAKE INTO CUSTODY ORDER SHALL BE ISSUED.		

Signature of Defendant / Juvenile _____ Signature of Juvenile's Parent / Custodian _____ Release to: (Name) _____ Date _____ Time _____

ADMINISTRATIVE	Hold for Other Agency Name: _____	Verified By: _____	Do Not Bond Out Reason _____	Hold for 1st Appearance (Adults Only) _____	
	I swear/affirm the above and attached statements are true and correct I DO on 1/1/25	Officer's/ Complainant's Signature Ofc B. Everhart 287	Digitally signed by Ofc B. Everhart 287 Date: 2025.12.31 23:42:25 -05'00'	ID # 287	Officer's/Complainant's Name (Printed) B. Everhart 287
	Sworn and subscribed before me, the undersigned authority this 1 day of 01, 2025	Notary Signature Samantha Missale	Digitally signed by Samantha Missale Date: 2025.01.01 09:03:40 -05'00'	Notary Name (Printed) Sgt S Missale	Notary/ Law Enforcement Officer in Performance of Official Duties. Personally Known <input checked="" type="checkbox"/> ID _____

Defendant / Juvenile Name (Last, First, Middle) Burroughs, Travis, David OBTS Number

Co-Defendant name (Last, First, Middle) Not Applicable Race Sex Date of Birth or Age Juvenile (Y/N)
 Arrested At Large Cited Felony Misdemeanor
 Co-Defendant name (Last, First, Middle) Not Applicable Race Sex Date of Birth or Age Juvenile (Y/N)
 Arrested At Large Cited Felony Misdemeanor

PC Capias Warrant Additional Charge Date Issued Write Off. Domestic Violence Order of Arrest
 Charge Description Criminal Mischief Counts 1 F.S. Ord. Statute/ Ordinance Number 806.13(b)(1) Re-classifier
 Drug Activity N/A Drug Type N/A Amount/Unit Bond Amount 1000.00 Warrant / Citation / Court Number

PC Capias Warrant Additional Charge Date Issued Write Off. Domestic Violence Order of Arrest
 Charge Description Fleeing Eluding Counts 1 F.S. Ord. Statute/ Ordinance Number 843.18 Re-classifier
 Drug Activity N/A Drug Type N/A Amount/Unit Bond Amount 5000.00 Warrant / Citation / Court Number

PC Capias Warrant Additional Charge Date Issued Write Off. Domestic Violence Order of Arrest
 Charge Description Resisting w/o Violence Counts 1 F.S. Ord. Statute/ Ordinance Number 843.02 Re-classifier
 Drug Activity N/A Drug Type N/A Amount/Unit Bond Amount 5000.00 Warrant / Citation / Court Number

Year 2008 Make Honda Model Passenger Car VIN 2HGFA16918H345744 Tag / Tag State RGNF68 Primary Color Gray Secondary Color Gray
 *If Applicable, provide information related to the vehicle involved in the crime.

On the above date and time, officers responded to the above address in reference to a criminal mischief.

Upon arrival it was learned that the suspect left the area in his gray honda civic. After speaking with the reporting party, they advised, the defendant stabbed the driver side rear tire with a knife and then left the area. A witness was standing outside and observed the defendant walk over to the victim's vehicle with long knife in his hand. The witness advised he began hearing a "hissing" sound. The defendant then walked from the driver side of the vehicle, entering his vehicle, and leaving the area. The victim advised the tire cost approximately \$200.00 and did wish to pursue charges.

Officers began canvassing the area and located the honda civic. Officers attempted to conduct a traffic stop on that vehicle around the Port Malabar and Babcock intersection. The driver refused to stop and continued to "slow roll" south bound on Babcock St. The vehicle finally came to a stop at Babcock St. and Malabar Rd. This is approximately a mile and a half from where the initial stop was attempted. Upon officers addressing the defendant, he was refusing to step out of the vehicle. Ultimately the defendant had to be removed from the vehicle and was placed into custody.

It was determined at that point, that the defendant was showing signs of impairment. Officer Hodgdon 207 arrived on scene and began a DUI investigation. During Officer Hodgdon's contact with the defendant, he smelled an odor of an alcoholic beverage coming from the defendant and noticed slow, slurred speech.

The defendant performed Standardized Field Sobriety Tests and Officer Hodgdon observed the following indicators of impairment: six clues on the HGN test, at least six clues on WAT, and at least two clues on OLS.

Based on Officer Hodgdon being a DRE along with his training, education and experience he believed the defendant was DUI and placed him into custody. The defendant agreed to take a breath test. The results of the breath test were .227 and .227 g/210L.

The defendant was later turned over to the Brevard County Sheriff's Office.

Officer's/ Complainant's Signature Ofc B. Everhart 287 Digitally signed by Ofc B. Everhart 287 Date: 2024.12.31 23:48:28 -05'00' ID # 287 Officer's/Complainant's Name (Printed) B. Everhart 287

AGENCY NAME: CITY OF PALM BAY POLICE DEPARTMENT

BREVARD COUNTY, FLORIDA

Arresting Agency Case Number
24-009938

NARRATIVE: Continuation Page 3 of 4

Defendant / Juvenile Name (Last, First, Middle)

CBTS Number

Burroughs, Travis, David

PC	Class	Warrant	Additional Charge	Date Issued	Unit Off.	Domestic Violence	Order of Arrest
Charge Description	Counts	F.S.	Statute/ Ordinance Number	Re-classifier			
Drug Activity	Drug Type	Amount/Unit	Bond Amount	Warrant / Citation / Court Number			

PC	Class	Warrant	Additional Charge	Date Issued	Unit Off.	Domestic Violence	Order of Arrest
Charge Description	Counts	F.S.	Statute/ Ordinance Number	Re-classifier			
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Drug Activity	Drug Type	Amount/Unit	Bond Amount	Warrant / Citation / Court Number			

Officer's/Complainant's Signature

Ofc B. Everhart 287

Digitally signed by Ofc B. Everhart 287
Date: 2024.12.31 23:48:41 -05'00'

ID #

287

Officer's/Complainant's Name (Printed)

B. Everhart 287

AGENCY NAME: CITY OF PALM BAY POLICE DEPARTMENT	BREVARD COUNTY, FLORIDA	Arresting Agency Case Number 24-009938
VICTIM INFORMATION PAGE		
Defendant / Juvenile Name (Last, First, Middle) Burroughs, Travis, David	OBTS Number	

VICTIM INFORMATION	Victim was notified of their Marsey's Law rights - YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		Victim requests their personal information remain confidential - YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
	Victim Type <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Business	Individual Name (Last, First, Middle) or Business Name Jaigobind, Usha, Maharaj		Victim's Relationship to Offender Family Member_Parent
	Victim Address 411 THOR AVE #201, Palm Bay, FL		Business Point of Contact Name and Number	
	Contact Number / Type (include area code) 3214772715		Victim's Email Address	

VICTIM INFORMATION	Victim was notified of their Marsey's Law rights - YES <input type="checkbox"/> NO <input type="checkbox"/>		Victim requests their personal information remain confidential - YES <input type="checkbox"/> NO <input type="checkbox"/>	
	Victim Type <input type="checkbox"/> Individual <input type="checkbox"/> Business	Individual Name (Last, First, Middle) or Business Name		Victim's Relationship to Offender
	Victim Address		Business Point of Contact Name and Number	
	Contact Number / Type (include area code)		Victim's Email Address	

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Officer's/Complainant's Signature: Ofc B. Everhart 287	Digitally signed by Ofc B. Everhart 287 Date: 2024.12.31 23:48:54 -05'00'	ID # 287	Officer's/Complainant's Name (Printed) B. Everhart 287
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