

**7th. Judicial Circuit 707
Charging Affidavit - Volusia**

Arrest # _____ Bk # _____ Pg # 1 of 4

ARREST <input checked="" type="checkbox"/> NOTICE TO APPEAR <input type="checkbox"/> AFFIDAVIT <input type="checkbox"/> C.C. <input type="checkbox"/> ADULT <input checked="" type="checkbox"/> JUVENILE <input type="checkbox"/>		Court Case Number: 2021 308743 MMDB	
(ORI) FL: <u>FL0640300</u>	Agency Name: <u>NEW SMYRNA BEACH POLICE DEPARTMENT</u>	Agency Case Number: <u>210800195</u>	
FCIC/NCIC Check? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	OBTS # _____	U.C.R. _____	Date Arrested: <u>08-22-2021</u> Time of Arrest: <u>0016</u>
ADDRESS OF ARREST (Street, City, State, Zip): <u>414 FLAGLER AV NEW SMYRNA FL 32169</u>		Arrested By: <u>GRANDIA, MILTON</u>	ID Number: <u>NS1718</u>
DEFENDANT	NAME (Last) <u>TUZCUOGLU</u> (First) <u>NACI</u> (Middle) <u>B</u>	A.K.A.: _____	Sex: <u>M</u> Race: <u>W</u>
DOB: <u>08-10-1992</u>	Age: <u>29</u> Driver's Lic./ ID No.: _____	State: <u>FL</u> Year Expires: <u>2028</u>	S.S.# - _____
Height: <u>6' 01"</u>	Weight: <u>230</u> Hair: <u>BRO</u> Eyes: <u>BRO</u>	P.O.B. (City, State, Country): <u>STANBUL TY</u>	Statement: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Scars, Marks, Tattoos: _____	Business & Occupation: _____	Citizenship: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Probation: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Sexual Predator: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	English: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Deaf/Mute: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Address - Mailing/Permanent (STREET, APT. NUMBER) <u>3009 BLUE SHORES WAY</u>		(CITY) <u>NEW SMYRNA</u> (STATE) <u>FL</u> ZIP CODE <u>32168</u>	RESIDENCE PHONE <u>(732) 925-9146</u>
Address - Local (STREET, APT. NUMBER) _____		(CITY) _____ (STATE) _____ ZIP CODE _____	RESIDENCE PHONE _____
Address - Other (Employer/School) (STREET, APT. NUMBER) _____		(CITY) _____ (STATE) _____ ZIP CODE _____	BUS/SCHOOL PHONE _____

CHARGES	DOMESTIC VIOLENCE? Yes <input type="checkbox"/>	Attachments: Affidavit(s)? <input type="checkbox"/> Statement(s) <input checked="" type="checkbox"/> NTA Schedule <input type="checkbox"/> Report <input type="checkbox"/> Traffic Infraction(s) <input type="checkbox"/> DUI <input type="checkbox"/>	Total Charges: <u>1</u>
#1 Charge: <u>Battery Touch/Strike</u>	FEL <input type="checkbox"/> MISD <input checked="" type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD: <u>784.03(1)(A)1</u>	Citation No.: _____ Bond: <u>500</u>
#2 Charge: _____	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD: _____	Citation No.: _____ Bond: _____
#3 Charge: _____	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD: _____	Citation No.: _____ Bond: _____

CO-DEFENDANT	Co-Def #1. Arrested? Y <input type="checkbox"/> N <input type="checkbox"/> Fel. <input type="checkbox"/> Misd. <input type="checkbox"/> Traf. <input type="checkbox"/> Ord. <input type="checkbox"/> NTA <input type="checkbox"/>	Co-Def #2. Arrested? Y <input type="checkbox"/> N <input type="checkbox"/> Fel. <input type="checkbox"/> Misd. <input type="checkbox"/> Traf. <input type="checkbox"/> Ord. <input type="checkbox"/> NTA <input type="checkbox"/>
#1 NAME (Last) _____ (First) _____ (Middle) _____	Race: _____ Sex: _____ DOB: _____	Age: _____
#2 NAME (Last) _____ (First) _____ (Middle) _____	Race: _____ Sex: _____ DOB: _____	Age: _____

NARRATIVE

The undersigned certifies and swears that there is probable cause to believe the above-named defendant,

on the 22 day of August, 2021, at approximately 1203 a.m. p.m.

at 421 FLAGLER AV NEW SMYRNA within Volusia County, violated the law and did then and there:

1 intentionally struck the victim against his will.

2

3 I responded to 421 Flagler Avenue (Peanuts Restaurant & Lounge) in reference to a Battery. Upon arrival, I was shown a photograph obtained from

4 the bouncer, Todd Brisebois, of the defendant (later to be identified as, Naci Tuzcuoglu). I then heard shouting that the defendant was located on the

5 balcony of the Flagler Tavern (414 Flagler Avenue). I walked into the Flagler Tavern and observed the defendant that positively matched the

6 photograph, walking out of the stairway. I then detained the defendant.

7

8 I then spoke with Officer Dunbar who stated the following:

9

10 He spoke with the victim, _____ who advised he was standing outside of the bar (Peanuts), when a male hit him. _____ advised the

11 male told him that he was a cop. _____ filled out a sworn written statement, and Marsy's law form, which he wants his information withheld. _____

12 _____ sustained a small cut on his left eye, and bridge of his nose. _____ wants to pursue charges.

13

14 He then spoke with the bouncer, Mr. Brisebois, who stated the following:

15

NOTICE TO APPEAR	MANDATORY APPEARANCE <input type="checkbox"/>	YOU NEED NOT APPEAR IN COURT BUT MUST COMPLY WITH INSTRUCTIONS ON THE REVERSE SIDE OF YOUR COPY <input type="checkbox"/>	FINE, AND COSTS AMOUNT: _____
I AGREE TO APPEAR IN COURT HEREIN TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE INDICATED, I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED, OR PAY THE LISTED FINE, I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST WILL BE ISSUED.			

SIGNATURE OF DEFENDANT _____	Date _____	RELATIONSHIP TO JUVENILE _____	JUVE DISP. _____
SIGNATURE OF JUVENILE PARENT OR CUSTODIAN _____		CITATION No. _____	

Sworn to and subscribed before me, the undersigned this <u>22</u> day of <u>August</u> , <u>2021</u> , Name: <u>Sgt. M. SUTY</u>	I swear/affirm the above statements are correct and true <u>Sgt. M. SUTY</u> OFFICER'S/COMPLAINANT'S SIGNATURE	Rt Thumb _____
Notary Public <input type="checkbox"/> Law Enforcement or Corrections Officer <input checked="" type="checkbox"/>	<u>GRANDIA, MILTON</u> <u>NS1718</u> NAME (PRINTED) ID NUMBER	
Personally Known <input checked="" type="checkbox"/> Produced Identification <input type="checkbox"/>	Type of Identification: _____	

Volusia**Notice to Appear Instruction Sheet**

Follow these instructions according to the boxes checked.

Court Case Number:
Agency Case Number:

- Mandatory Court Appearance -- You MUST appear at COURT. You will receive a Notice of Arraignment from the County Clerk's Office at the mailing address you have given. Failure to appear at the time and place designated, will result in a warrant being issued for your arrest.**
- Court Appearance Not Mandatory -- You MUST comply with EITHER A or B:**

**PAYMENTS SHOULD BE MADE PAYABLE TO:
CLERK OF THE COURT.**

A. Pay the Fine: You must complete the waiver information below and either mail or personally present this citation at the Clerk's Office checked below, from 8:00 a.m. to 4:30 p.m., Monday through Friday within 15 days of the issuance of this Notice to Appear. ***Fines may be paid in cash, personal check, money order or certified check made payable to: Clerk of the Court . (DO NOT MAIL CASH.)***

Total fine and costs you must pay: \$ _____

B. Contest the Citation: You MUST request that a court date be set within 15 days of the issuance of this Notice to Appear (if the 15th day falls on a Saturday, Sunday or legal holiday, the period is extended to the next working day) by either appearing between the hours of 8:00 a.m. and 10:00 a.m. at the Clerk's Office checked below, or by mailing your written request to the Clerk of the Court at the address checked below.

COUNTY CLERK'S OFFICES:

- Volusia County Courthouse, room B155, 101 N. Alabama Avenue, Deland, FL, 32724
- Court House Annex, room 109, 125 E. Orange Avenue, Daytona Beach, FL, 32114
- Volusia County Courthouse, room 6, 124 N. Riverside Drive, New Smyrna Beach, FL, 32169

I agree to appear at the time and place as designated above to answer the listed charge(s) or pay the fine and costs. I understand that if I willfully fail to request a court date and/or fail to appear before the court as required by this Notice to Appear, or fail to pay the indicated fine and costs on or before the date set forth above, I may be held in contempt of court and a warrant for my arrest will be issued.

DEFENDANT'S SIGNATURE (MANDATORY): _____

ATTENTION: PERSONS WITH DISABILITIES

If you are a person with a disability who needs any accommodation in order to participate in this proceeding, you are entitled, at no cost to you, to the provision of certain assistance. Please contact Court Administration, 125 E. Orange Avenue, Ste.300, Daytona Beach, FL 32114; Telephone: 386-257-6096 within two (2) working days of your receipt of this notice: If you are hearing or voice impaired, call 1-800-955-8771 or 1-800-955-8770. **THIS IS NOT A COURT INFORMATION LINE.**

Plea and Waiver Information

If this notice indicates that you have the option to pay a fine or appear in court and you choose to pay the fine, follow the instructions in paragraph A above. Read and sign this page. This page MUST be returned to the clerk's office with your fine payment.

- In consideration of my not appearing in court, I enter my plea on the affidavit in this case, for the offense charged, waiving my right to be present and the reading of the affidavit. I understand the nature of the charge(s) against me and hereby enter my plea of guilty or nolo contendere (no contest) .
- In doing so, I understand the nature of the charge(s) against me, I understand that I waive my right to counsel, the right to a trial before a judge or jury, the right to a continuance, and the right to appeal. Payment of this fine will result in adjudication of guilt to this charge being withheld.
- By my signature, I acknowledge that I understand the above statements. I am not under the influence of alcohol or drugs. I also certify that my address listed below is correct.

Defendant's Signature: _____
(First) (Middle) (Last)

Date: _____

Defendant's Name (print): _____

Defendant's Address: _____


Narrative Supplement 707-B

Arrest
 Affidavit
 Notice to Appear
 Adult
 Juvenile

Court Case Number:

Defendant Name: TUZCUOGLU	(Last)	NACI	(First)	B	(Middle)	Agency Case Number: 210800195
CHARGES		DOMESTIC VIOLENCE? Yes <input type="checkbox"/>	Attachments: Affidavit(s)? <input type="checkbox"/>		Statement(s) <input checked="" type="checkbox"/>	NTA Schedule <input type="checkbox"/> Report <input type="checkbox"/> Traffic Infraction(s) <input type="checkbox"/> Total Charges: 1
#	Charge:	FEL <input type="checkbox"/>	MISD <input type="checkbox"/>	ORD <input type="checkbox"/>	FS/ORD:	Citation No.: Bond:
#	Charge:	FEL <input type="checkbox"/>	MISD <input type="checkbox"/>	ORD <input type="checkbox"/>	FS/ORD:	Citation No.: Bond:
#	Charge:	FEL <input type="checkbox"/>	MISD <input type="checkbox"/>	ORD <input type="checkbox"/>	FS/ORD:	Citation No.: Bond:

16 The male with the long sleeve blue shirt punched [redacted] knocking him to the flower pot. N [redacted] wife, Katie P [redacted] got in between [redacted]
17 [redacted] and the defendant. The defendant punched [redacted] two more times in the face while he was laying on the flower pot. He then got in
18 between [redacted] and the defendant. Mr. Brisebois advised [redacted] did not start anything, only the defendant. Mr. Brisebois filled out a
19 sworn written statement.
20
21 He then spoke with [redacted], who stated the following:
22
23 She was standing outside the bar (Peanuts) with her husband [redacted]. The defendant came up and punched [redacted] knocking him onto a
24 flower pot. She got in between the defendant and [redacted]. The defendant then punched [redacted] two more times, before leaving. Ms.
25 [redacted] advised at some point after punching [redacted] the defendant showed a badge stating "I'm a cop what are you going to do about it".
26
27 Sergeant Kirkland arrived on scene and spoke with the involved parties also. [redacted] told him that the whole incident started inside the bar.
28 She and her sister, Ivy Eilerman were on the stage singing karaoke when the defendant approached her and put his hands on her hips. She told him
29 she was married and not interested. After a couple more advances, [redacted] said that one of the band members told the defendant to calm down
30 and go sit down. After they were done on stage, [redacted] went outside and was speaking with her husband. This is when the defendant
31 approached them. She said that her husband told the defendant he was a ranger and the defendant showed her husband a badge, claiming to be a
32 cop. The defendant then slapped her husband in the face.
33
34 Sergeant Kirkland also spoke with [redacted] who stated the defendant did not slap him, he actually punched him, causing the laceration above his
35 eye. He also told Sergeant Kirkland that the defendant did not actually show him a badge and only told him that he was an officer. Sergeant Kirkland
36 also confirmed that [redacted] wanted to pursue criminal charges against the defendant.
37
38 Fire/Rescue was called to the scene to treat [redacted]'s injuries. However, [redacted] refused all medical treatment on scene.
39
40 Officer Dunbar captured four digital photographs of [redacted] injuries and uploaded them to evidence.com.
41
42 Please see Officers Dunbar's supplement for more details.
43
44 Officer Wilford obtained a one digital photograph of the picture Mr. Brisebois obtained, which was also uploaded to evidence.com.
45
46 Please see Officer Wilford's supplement for more details.
47
48 While the defendant was in custody, he did advise he had his credentials on his person. However, when I searched him he did not have any
49 credentials on his person.
50
51 The defendant was arrested for Battery, and later transported to the Volusia County Branch Jail.
52
53 I submitted the sworn written statements, and Marsy's law form into records at the New Smyrna Beach Police Department.
54
55 A body worn camera was used.

Sworn to and subscribed before me, the undersigned this <u>22</u> day of <u>August</u> , 2021 Name: <u>Sgt. R. [redacted]</u>	I swear/affirm the above statements are correct and true 	Right Thumb
Notary Public <input type="checkbox"/> Law Enforcement Officer <input checked="" type="checkbox"/> Personally Known <input checked="" type="checkbox"/> Produced Identification <input type="checkbox"/> Type of Identification:	OFFICER'S/COMPLAINANT'S SIGNATURE GRANDIA, MILTON NAME (PRINTED)	NS1718 ID NUMBER

Witness/Victim/Evidence Form 707-A

Arrest
 Affidavit
 Notice to Appear
 Adult
 Juvenile

Court Case Number:

Defendant (Last) (First) (Middle)			Agency Case Number:							
Name: TUZCUOGLU NACI B			210800195							
Name: (Last) (First) (Middle)			Vic <input checked="" type="checkbox"/>	Race:	Sex:	Age:	DOB:	SSN:		
Address (#, Street, City, State):			[REDACTED]							Statement: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Bus/School Address:			Zip:		Bus: Phone:					
Relative/Contact Name			Relative/Contact Address:		Phone:					
Name: (Last) (First) (Middle)			Vic <input type="checkbox"/>	Race:	Sex:	Age:	DOB:	SSN:		
Name: [REDACTED] KATIE J			Wit <input checked="" type="checkbox"/>	W	M <input type="checkbox"/> F <input checked="" type="checkbox"/>	36	11-12-1984	[REDACTED]		
Address (#, Street, City, State):			Zip:		Home: Phone: (912) 401-3110		Statement: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Bus/School Address:			Zip:		Bus: Phone:					
Relative/Contact Name			Relative/Contact Address:		Phone:					
Name: (Last) (First) (Middle)			Vic <input type="checkbox"/>	Race:	Sex:	Age:	DOB:	SSN:		
Name: BRISEBOIS TODD P			Wit <input checked="" type="checkbox"/>	W	M <input checked="" type="checkbox"/> F <input type="checkbox"/>	33	10-30-1987	[REDACTED]		
Address (#, Street, City, State): 5298 GOLD TREE CT ORLANDO FL			Zip: 32808		Home: Phone: (407) 486-2101		Statement: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Bus/School Address:			Zip:		Bus: Phone:					
Relative/Contact Name			Relative/Contact Address:		Phone:					
Name: (Last) (First) (Middle)			Vic <input type="checkbox"/>	Race:	Sex:	Age:	DOB:	SSN:		
Name: EILERMAN IVY E			Wit <input checked="" type="checkbox"/>	W	M <input type="checkbox"/> F <input checked="" type="checkbox"/>	42	09-02-1978	[REDACTED]		
Address (#, Street, City, State): 128 BILTMORE DR GUYTON GA			Zip: 31312		Home: Phone: (912) 656-3524		Statement: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Bus/School Address:			Zip:		Bus: Phone:					
Relative/Contact Name			Relative/Contact Address:		Phone:					
Name: (Last) (First) (Middle)			Vic <input type="checkbox"/>	Race:	Sex:	Age:	DOB:	SSN:		
[REDACTED]			Wit <input type="checkbox"/>		M <input type="checkbox"/> F <input type="checkbox"/>			[REDACTED]		
Address (#, Street, City, State):			Zip:		Home: Phone:		Statement: <input type="checkbox"/> Yes <input type="checkbox"/> No			
Bus/School Address:			Zip:		Bus: Phone:					
Relative/Contact Name			Relative/Contact Address:		Phone:					
Name: (Last) (First) (Middle)			Vic <input type="checkbox"/>	Race:	Sex:	Age:	DOB:	SSN:		
[REDACTED]			Wit <input type="checkbox"/>		M <input type="checkbox"/> F <input type="checkbox"/>			[REDACTED]		
Address (#, Street, City, State):			Zip:		Home: Phone:		Statement: <input type="checkbox"/> Yes <input type="checkbox"/> No			
Bus/School Address:			Zip:		Bus: Phone:					
Relative/Contact Name			Relative/Contact Address:		Phone:					

EVIDENCE COLLECTED

Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
(5) DIGITAL PHOTOS UPLOADED TO EDC	08-22-2021		
Owner Name (Last) (First) (Address)		(Phone)	Value
NSBPD 246 INDUSTRIAL PARK AV NSB FL 32169		(386) 424-2000	1.00
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount

I certify that the foregoing is a complete list of witnesses/victims & evidence known to me.

GRANDIA, MILTON
Investigating Officer

OFC M. S. LITTE NS1718
ID Number

NSPD
Agency