

2107 11499

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

1. Arrest
2. N.T.A.
3. Request for Warrant
4. Request for Capias

1

Juvenile

N

ADMINISTRATIVE	OBTS Number		Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06- 21-085133																	
	Charge Type: Check as many as apply: <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony		<input type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Weapon Seized / Type <input checked="" type="checkbox"/> 1. Yes <input type="checkbox"/> 2. No		Multiple Clearance Indicator 01																	
	Location of Arrest (Including Name of Business) 11500 block of Southern Blvd, Royal Palm Beach, FL 3411				Location of Offense (Business Name, Address) 11500 block of Southern Blvd, Royal Palm Beach, FL 3411																			
	Date of Arrest 07/12/2021	Time of Arrest 22:51	Booking Date 07/13/2021	Booking Time	Jail Date	Jail Time	Location of Vehicle Kelle Sheeha's Towing, 2635 Electronics Way, West Palm Beach, FL 33407																	
DEFENDANT	Name (Last, First, Middle) Sandholzer, Colby, Annette						Alias (Name, DOB, Soc. Sec. #, Etc.)																	
	Race W - White I - American Indian B - Black O - Oriental/Asian	Sex W	Date of Birth 12/22/1966	Height 5'03	Weight 130	Eye Color brown	Hair Color brown	Complexion light																
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) none				Marital Status Single	Religion budhist	Indication of Alcohol Influence Y <input type="checkbox"/> N <input type="checkbox"/> Unk. <input type="checkbox"/>																	
	Local Address (Street, Apt. Number) 10860 Town Terrace Apt 206, Royal Palm Beach, FL 33414				Phone (561) 351 1358	Residence Type: 1. City 2. County 3. Florida 4. Out of State 2																		
CO-DEF	Permanent Address (Street, Apt. Number) 1				Phone ()	Address Source DL																		
	Business Address (Name, Street) ()				Phone ()	Occupation nail salon employee																		
	D/L Number, State S534101669620, FL		Soc. Sec. Number ()		INS Number		Place of Birth (City, State) St Johns, Michigan	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																
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																
	Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other: Name (Last) (First) (Middle) () () ()				Residence Phone ()																			
	Address (Street, Apt. Number) () () ()				Business Phone ()																			
	Notified By: (Name) ()				Date ()	Time ()	Juvenile Disposition 1. Handled processed within Dept. and Released. 2. TOT HRS / DYS 3. Incarcerated																	
CHARGE	Released To: (Name) ()				Relationship ()																			
	The above address 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 (Phone 355-2528) informed of any change of address. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)				School Attended ()																			
	Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No				Value of Property ()																			
	Description of Property ()				Value of Property ()																			
CHARGE	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			
	Charge Description Driving Under the Influence				Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number 316.193(1)(a)				Violation of ORD #													
	Drug Activity N				Drug Type N	Amount / Unit	Offense # 21-085133	Warrant / Capias Number				Bond												
	Charge Description				Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number				Violation of ORD #													
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	Drug Activity				Drug Type	Amount / Unit	Offense #	Warrant / Capias Number				Bond												
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	Drug Activity				Drug Type	Amount / Unit	Offense #	Warrant / Capias Number				Bond												
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	Drug Activity				Drug Type	Amount / Unit	Offense #	Warrant / Capias Number				Bond												
	Charge Description				Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number				Violation of ORD #													
	Drug Activity				Drug Type	Amount / Unit	Offense #	Warrant / Capias Number				Bond												
NOTICE TO APPEAR	Location (Court, Room Number, Address) Criminal Justice Complex, 3228 Gun Club Road, West Palm Beach, FL 33406 - Ph: (561) 688-4600																							
	Court Date and Time Month August Day 5th Year 2021 Time 08:30 AM <input checked="" type="checkbox"/> PM <input type="checkbox"/>																							
	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 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) (Signature) Date Signed 07/12/2021																							
ADMIN	HOLD for other Agency Name: ()				Signature of Arresting Officer (Signature)				Name Verification (Printed by Arrestee) (Signature)															
	<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other:				Name of Arresting Officer (Print) Inv. POINTU P. I.D. # 16032				(PRINT) Colby Sandholzer															
	Intake Deputy Dennis G980 I.D. # () Pouch # ()				Transporting Officer Inv. POINTU P. ID # 16032 Agency PRSO				Witness here if subject signed with an "X"															
	DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT (N.T.A.'s ONLY)				PAGE 7.1 OF 1																			

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PH 1128

		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Copies		1		Juvenile	
ADMIN	OBTS Number										
	Agency ORI Number FLO 500000	Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 06-21085133							
CHARGES	Charge type: Check as many as apply	<div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony </div> <div> <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor </div> <div> <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other </div> </div>									
	Special Notes:										
DEF	Name (Last, First, Middle) Sandholzer, Colby, Annette	Alias				Race W		Sex F		Date of Birth 12/22/1966	
	Charge Description DUI	316.193(1)(a)				Charge Description					
VICTIM	Victim's Name (Last, First, Middle) State of Florida					Race		Sex		Date of Birth	
	Local Address (Street, Apt. Number) (City) (State) (zip) Phone					Address Source					
ADMINISTRATIVE	Business Address (Name, Street) (City) (State) (zip) Phone					Occupation					
	<p>The undersigned certifies and swears that he/she has just and reasonable 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 checked="" 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 12 day of July 2021 at 2145 <input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)</p> <p>On July 12, 2021 at approximately 2145 hours, I was dispatched to a vehicle driving eastbound in the westbound lanes of traffic on 11513 Southern Blvd in the village of Royal Palm Beach.</p> <p>Upon my arrival of the area I notice a gray Nissan bearing FL tags CFRK67 parked on the median of Southern blvd facing eastbound in the westbound median. I made contact with the driver of the vehicle later identified as Colby Sandholzer. Colby stated she was unaware of where she was only near a shopping plaza. Colby told me on scene she had taken half a sleeping pill prior to driving. It should be noted Colby seemed disoriented and had no sense of direction. It should also be noted Colby was the only occupant in the car</p> <p>While on scene there was a driver who witnessed these events, later identified as Alex Martinez. Alex stated the following.</p> <p>"I was driving west on Southern passing First Watch when I noticed a vehicle partially parked on the U-turn lane so I took the next U-Turn to make sure they were okay. However while driving back east to locate the vehicle I saw the vehicle driving in the opposite lanes of traffic. I was able to make contact with the person in the vehicle and have them pull off onto the median. When i approached the vehicle the driver seemed disoriented at the wheel. I called police and awaited their arrival".</p> <p>This case is turned over to Investigator Pointu.</p>										
<p>STATE OF FLORIDA COUNTY OF PALM BEACH</p> <p>(Signature of Arresting Investigative Officer) _____</p> <p>The foregoing instrument was sworn to or affirmed and subscribed before me this 12 day of July 2021 by D/S M. Alexander</p> <p>(Print name of Arresting Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced Known LEO</p> <p>Notary Public, Clerk of Court, Officer (F.S.S. 117.10)</p>											

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 12 DAY OF July 20 21, AT 21:38 AM PM
SUBJECT: Sandholzer, Colby, Annette CASE NUMBER: 21-085133
AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: Inv. POINTU P.

PERSONAL CONTACT

DRIVING PATTERN: Actual physical control (physical evidence or statements putting def. behind wheel of vehicle)

Alex Martinez observed a dark Nissan Pathfinder stopped in the eastbound left turning lane of the 11500 block of State Road 80 (Southern Boulevard), in Royal Palm Beach, Florida. Martinez made a U turn to check on the driver, and at that time he observed the same vehicle now driving eastbound on the westbound lanes of SR 80. Martinez called 911. The Nissan eventually pulled over onto the curbed median. D/S Alexander (#30589) arrived on scene shortly after and made contact with the driver and only occupant of the Nissan who was identified by her Florida driver license as Colby Sanholzer. The engine was still running.

OBSERVATION OF DRIVER:

D/S Alexander noticed that Sanholzer appeared disoriented and unaware to where she was.

Upon my contact with Sanholzer, I observed that she was drowsy. Her reactions were slow. In the center console I observed a prescription bottle of Zolpidem 10mg that was prescribed to her and was filled today. She had one shoe off. Upon exiting her vehicle she stumbled and leaned against the car.

DRIVER'S STATEMENTS:

Sanholzer said that she was on Forest Hill near the Costco plaza. She said that she went to the pharmacy to get her Ambien prescription refilled and took one pill before driving back home. She admitted knowing that she should not take Ambien before driving.

ODORS:

None detected.

GENERAL OBSERVATIONS

SPEECH: very low, slow, slurred

ATTITUDE: cooperative

CLOTHING: maroon pants, white shirt with colored pattern, bare foot

MEDICAL/OTHER: Taking Adderall, Zolpidem

STATE OF FLORIDA
COUNTY OF PALM BEACH

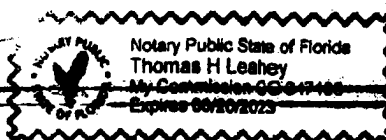
Inv. POINTU P.
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 13th day of July 20 21 by Inv. POINTU P.

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced known

Thomas Leahey (#19183)

Notary Public, Clerk of Court, Officer (F.S.S. 117.10)



SUBJECT: Sandholzer, Colby, Annette

CASE NUMBER 21-085133

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

☒ LT EYE-LACK OF SMOOTH PURSUIT

☒ RT EYE-LACK OF SMOOTH PURSUIT

☐ LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION

☐ RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION

☐ LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

☐ RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

Other Observations:

Very unsteady on her feet. Swayed. Had to be reminded multiple times to keep her head still and to follow the stimulus. No VGN. No LOC.

WALK & TURN:

Sandholzer could not balance during the instruction phase and had to step off the line. She chose to remove her shoes to complete the task. She did not touch heel to toe on any step. She stepped off the line multiple times. She took an improper number of steps. She stopped while walking before the turn asking for instructions. She performed an improper turn. She did not walk heel to toe on the way back and took an improper number of steps.

ONE LEG STAND:

Sandholzer raised her left foot. I had to remind her to watch her foot. She swayed while balancing and lowered her foot to the ground on her count of 1012 and did not resume the task.

FINGER TO NOSE:

Sandholzer swayed and opened her eyes during the task. On task 1 she searched for her nose and touched her left nostril. On task 6 she touched again her left nostril. On five of the six tasks she had to be reminded to lower her hand after touching her nose. She also used the pad of her fingers instead of the tip on five out of the six tasks. She lost her balance during the task and had to step back to recover. I observed eyelid tremors.

ROMBERG ALPHABET:

She recited the alphabet properly but swayed more than 3 inches in all directions. I also observed eyelid tremors. For the modified Romberg, she stopped the 30 seconds task at approximately 35 seconds. She also swayed more than 3 inches in all directions. Eyelid tremors were still present.

BREATH TEST RESULTS: 0.000 0.000

STATE OF FLORIDA
COUNTY OF PALM BEACH

Inv. POINTU P.

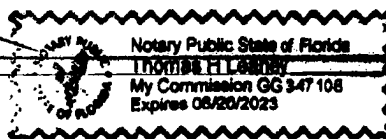
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Thomas Leahey (#19183)

Notary Public, Clerk of Court, Officer (F.S.S. 117.10)





**PALM BEACH COUNTY
SHERIFF'S OFFICE**
Florida State Statute Exemption Sheet

Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	<input type="checkbox"/>	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	<input type="checkbox"/>	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	<input type="checkbox"/>	119.071(4)(c)	Undercover personnel.	
	<input type="checkbox"/>	119.071(2)(f)	Confidential informants (Cis).	
	<input type="checkbox"/>	119.071(2)(e)	Confession.	
Public Info. Exemptions	<input type="checkbox"/>	985.04(1)	Juvenile offender records.	
	<input type="checkbox"/>	119.071(h)(i)	Assets of a crime victim.	
	<input type="checkbox"/>	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	<input type="checkbox"/>	394.4615(7)	Mental health information.	
	<input type="checkbox"/>	119.071(4)(d)(2)(a)	Home address, telephone, Social Security number, date of birth, or photos of active/former LE personnel, spouses, and children.	
Florida Rules of Judicial Administration 2.420 (Rule of 23)	<input checked="" type="checkbox"/>	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	<input type="checkbox"/>	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	<input type="checkbox"/>	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	<input type="checkbox"/>	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2021017241

Date: 7/13/2021

Specialist Name/ID: T Howard/7185