

ARREST / NOTICE TO APPEAR

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

1 JUVENILE

OBTS Number	Agency ORI Number 0501700		Agency Name Jupiter Police Department		Agency Report Number (N.T.A.'s only) 5 4 21-00026	
Charge Type: Check as many as apply: <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other	If Weapon Seized Enter Type NONE		Multiple Clearance Indicator			
Location of Arrest (Including Name of Business) 122 SOUNDINGS AVENUE			Location of Offense (Business Name, Address) 122 SOUNDINGS AVE, JUPITER, FL 33477			
Date of Arrest 01/03/2021	Time of Arrest 04:22	Booking Date 01/03/2021	Booking Time 04:32	Jail Date 01/03/2021	Jail Time 04:24	Location of Vehicle
Name (Last, First, Middle) SHEA, COLIN MICHAEL			Alias (Name, DOB, Soc. Sec. #, Etc.)			
Race W - White B - Black	1 - American Indian O - Oriental/Asian	Sex M	Date of Birth 04/07/1997	Height 5'10	Weight 160	Eye Color BLUE
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)		Marital Status S	Religion CATHOLIC	Complexion FAIR		Build
Local Address (Street, Apt. Number) 951 ESPLANADE, PELHAM, NY			(City)	(State)	(Zip)	Phone (917) 623-2112
Permanent Address (Street, Apt. Number) 951 ESPLANADE, PELHAM, NY			(City)	(State)	(Zip)	Phone (917) 623-2112
Business Address (Name, Street)			(City)	(State)	(Zip)	Phone
D/L Number, State S08162779485 /		Soc. Sec. Number	INS Number	Place of Birth (City, State) NEW YORK, NY, United		Citizenship
Co-Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile	
Co-Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth	<input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor	
<input type="checkbox"/> Parent <input type="checkbox"/> Other: _____		Name (Last, First, Middle)			Residence Phone	
<input type="checkbox"/> Legal Custodian		Address (Street, Apt. Number)			Business Phone	
Notified by: (Name)		Date	Time	JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT JAC 3. Incarcerated		
Released To: (Name)		Relationship	Date	Time		
The above address was 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's Office (Phone 355-2526) informed of any change of address.				School Attended	Grade	
<input type="checkbox"/> Yes, by: _____		<input type="checkbox"/> No:		Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Description of Property	Value of Property
Drug Activity N. N/A P. Possess	S. Sell B. Buy T. Traffic	R. Smuggle D. Deliver E. Use	K. Disperses/ Distribute	M. Manufacture/ Produce/ Cultivate	Z. Other	Drug Type N. N/A A. Amphetamine
B. Barbiturate C. Cocaine E. Heroin		H. Hallucinogen M. Marijuana O. Opium/Deriv.		P. Paraphernalia/ Equipment S. Synthetic		U. Unknown Z. Other
Charge Description BATTERY-SIMPLE (TOUCH OR STRIKE)			Statute Violation Number 784.03(1)(A)(1)		Violation of ORD #	
Drug Activity	Drug Type N	Amount / Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant / Capias Number
Charge Description			Statute Violation Number		Violation of ORD #	
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Warrant / Capias Number
Charge Description			Statute Violation Number FILED		Violation of ORD #	
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Warrant / Capias Number
Health / Apparent Physical Condition of Defendant			Any knowledge of the following: <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries Explain: JOSEPH ABRUZZO, CLERK			
Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Posted Bond		<input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> South County Mental Health		<input checked="" type="checkbox"/> T.O.T. County Jail		PROPERTY - Received By PALM BEACH COUNTY
Transported By		Date Transported	Time Transported	Other		
<input checked="" type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court <input type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.			Location (Court, Room) North County PALM BEACH GARD			No Photo Available
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.			Court Date and Time 02/03/2021 08:30:00			
Signature of Defendant (or Juvenile and Parent/Custodian)			Date Signed			
HOLD for Other Agency		Signature of Arresting Officer KOLENICH, RYAN		Name Verification (Printed by Arrestee)		
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal		<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other		Name of Arresting Officer (Print) KOLENICH, RYAN		I.D. # 1175
Intake Deputy	I.D. #	Pouch #	Transporting Officer K. ANDERSON	I.D. # 313	Agency JUPITER	PAGE 1 OF 1
Witness here if subject signed with an "X".						

Handwritten initials/signature in the bottom right corner.

PROBABLE CAUSE AFFIDAVIT

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

1

JUVENILE

OBTS Number	Agency ORI Number FL 0501700		Agency Name JUPITER POLICE DEPARTMENT	Agency Report Number 5 4 21-000026
Charge Type: Check as many as apply. <input type="checkbox"/> 1. Felony <input checked="" 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) SHEA, COLIN MICHAEL	Alias	Race	Sex M	Date of Birth 04/07/1997
Charge Description 784.03(1)(A)(1) BATTERY-SIMPLE (TOUCH OR STRIKE)	Charge Description			
Charge Description	Charge Description			

Victim's Name (Last, First, Middle) NELCY, MERCILIO	Race B	Sex M	Date of Birth 03/23/1961
Local Address (Street, Apt. Number) 4878 MESSANA TER, LAKE WORTH, FL 33463	(City)	(State)	(Zip)
Phone (561) 577-0368		Address Source	
Business Address (Name, Street)	(City)	(State)	(Zip)
Phone		Occupation TAXI DRIVER	

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.
 The Person taken into custody . . .
 committed the below acts in my presence. was observed by **INDEP WIT** who told
 confessed to _____ that he/she saw the arrested person commit the below acts.
 was found to have committed the below acts, resulting from my (described) investigation.
 admitting to the below facts.
 On the **3** day of **January**, **2021** at **03:59** (Specifically include facts constituting cause for arrest.)

On 01/03/2020 at approximately 0328hrs, I responded to the report of a battery near the Wyndham Grand Hotel [122 Soundings Avenue].

Upon my arrival I met with the victim [Mercilio Nelycy; B/M; 03/23/61] who was standing outside of this White Toyota van bearing [FL#: CAEA75] which he utilizes as an Uber transport vehicle.

According to Nelycy, there were numerous people he was transporting to the hotel who were refusing to wear masks inside of the vehicle. After arriving at the hotel, and exiting the vehicle, the suspect [Colin M Shea; W/M; 04/07/97] struck Nelycy on the back of the neck and head and then fled the scene. He was later located walking near Calavaras Cantina inside of Harbourside.

Nelycy also stated that there was another individual who also battered him but gave numerous different descriptions of this person and later stated that all he knew was that the other person besides Shea was a white male. However, he remained sure that Shea was one of the two individuals who battered him and described him clear.

Let it be noted that the other unknown individuals also fled the scene and ultimately were unable to be located but per hotel staff, may be staying in room #330.

Nelycy then stated that a hotel valet staff member witnessed the battery. I then spoke with [Lincoln D Walker; W/M; 10/04/76] who stated that he witnessed the two male subjects strike Nelycy and leave. A show up was then conducted and confirmed that Shea was on of the males who hit Nelycy. Walker provided a different description for the other unknown male who was unable to be located.

SWORN AND SUBSCRIBED BEFORE ME	SIGNATURE OF ARRESTING / INVESTIGATING OFFICER
ANDERSON, KELLY (Signature) 3/3/2020 NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)	KOLENICH, RYAN (1175) NAME OF OFFICER (PLEASE PRINT)
01/03/2021 DATE	01/03/2021 DATE

PROBABLE CAUSE AFFIDAVIT
SUPPLEMENT

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

1

JUVENILE

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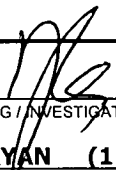
Name (Last, First, Middle) SHEA, COLIN MICHAEL	Alias	Race	Sex M	Date of Birth 04/07/1997
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Nelcy, continued to rub his neck and refused medical assistance and there were no visible marks, bruising, redness or swelling in the area that he was struck. Ofc. R. Schneider then spoke with Shea and read him his Miranda Warnings at which time Shea refused to speak with Officers regarding the incident or provide his account.

At this time, due to the victims claim and identification and the confirmation via an independent witness, Shea was placed into handcuffs [Double Locked & Safety Gapped] and placed under arrest for Simple Battery. He was then placed into the rear of my marked Jupiter Police patrol vehicle and transported from the scene to the Jupiter Police Department. Upon his arrival he was booked and processed in accordance with departmental policy. Upon completion he was transported and turned over to the Palm Beach County Sheriffs Office without incident.

There was no video security footage provided on scene and there is nothing further to add or investigate at this time. BWC utilized.

NOT A CERTIFIED COPY

ADMINISTRATIVE	SWORN AND SUBSCRIBED BEFORE ME	
	ANDERSON, KELLY NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)	 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER
	01/03/2021 DATE	KOLENICH, RYAN (1175) NAME OF OFFICER (PLEASE PRINT)
		01/03/2021 DATE

21-000026

RECEIPT FOR PRISONER'S PERSONAL PROPERTY PALM BEACH COUNTY

JAIL Jacket # 0520572 Cell # _____ Pouch # 1027

Arrest Agency Jupiter Arrest Date 01/03/26 Arrest Time 0348 Tamper-Proof Bag # 646353

Print Prisoner's Shes LAST NAME Colin FIRST NAME M MI

Prisoner's 4/17/97 DATE OF BIRTH 098-86-6036 SOCIAL SECURITY NUMBER MALE FEMALE WHITE BLACK HISPANIC OTHER

1's	5's	10's	20's	50's	100's	Other	U.S. Bills Total	U.S. Coins Total	Check/M.O. Total
5	X	X	2	X	X	X	\$ 45.00	\$ 0.00	\$ 0.00
Total Amount of Money in Writing <u>Forty five Dollars and 00/100</u>							Total Amount of Money Numerical \$ <u>45.00</u>		

ARRESTING AGENCY

DESCRIPTION OF PERSONAL PROPERTY	BAG 1 OF () - BULK PROPERTY - BAG 2 OF ()	
1. <u>Blue cell phone</u> <u>Micro card</u> ✓	1. <u>Tan/Brown Belt</u> 1.	
2. <u>Tan case</u> <u>Costco card</u> ✓	2. <u>Bro wallet</u> 2.	
3. <u>Medal Bracelet</u> <u>Starbucks G.C.</u> ✓	3. <u>Flisc guards</u> 3.	
4. <u>Pink Bands (2)</u> <u>(2) Ins cards</u> ✓	4. _____ 4.	
5. <u>NY DL</u> <u>(4) Police Id cards</u> ✓	5. _____ 5.	
6. <u>University of Va ID</u>	6. _____ 6.	
7. <u>Priority Pass C.C.</u>	7. _____ 7.	
8. <u>Pink Charge Visa P.C.</u>	PRISONER IS WEARING	
9. <u>Police Explorer Visa</u>	1. <u>Blue/white shirt</u>	
10. <u>Grey American Exp. C.C.</u>	2. <u>Blue jeans</u>	
11. <u>Verizon Visa card</u> ✓	3. <u>White shoes</u>	

By my signature, I acknowledge that the above described property is all the property, other than that held as evidence, in my possession at the time of my arrest.

(Signature) SIGNATURE OF PRISONER P. K... PRINT NAME OF OFFICIAL TAKING PROPERTY 314 ID # (Signature) SIGNATURE

TRANSPORT

CHAIN OF CUSTODY

I certify the above inventory is correct and I have received all items listed above.

Name	ID Number	Agency	Date
1. <u>K. Anderson</u>	<u>313</u>	<u>Jupiter PD</u>	<u>01/03/26</u>
2. <u>(Signature)</u>	<u>35376</u>	<u>PBSO</u>	<u>1-3-21</u>
3. _____	_____	_____	_____

INTAKE

Shower/Uniform Issuance. D/S Print Name and ID #:

Items retained by inmate	Additional property/clothing placed into Property

RELEASE

By my signature, I acknowledge receipt of all my listed property and money in the amount of:

Check Total \$ _____ Cash Total \$ _____

(Signature) SIGNATURE OF PRISONER _____ SIGNATURE/ID # OF WITNESS _____ DATE

INCIDENT/INVESTIGATION REPORT

I N C I D E N T D A T A	Agency Name Jupiter Police Department		Case# 21-000026			
	ORJ FL 0501700		Date / Time Reported 01/03/2021 03:25 Sun			
	Location of Incident 122 Soundings Ave, Jupiter FL 33477-		Premise Type Hotel / Motel	Zone/Sub Beat 1005	Last Known Secure 01/03/2021 03:25 Sun	
			At Found 01/03/2021 03:25 Sun		Activity	
M O	#1	Crime Incident(s) Battery - Simple SBAT	(Com) M	Weapon / Tools HANDS, FEET, FIST, TEETH	Activity	
	#2	Crime Incident	()	Weapon / Tools	Activity	
	#3	Crime Incident	()	Weapon / Tools	Activity	
MO BWC/BWC USED						
V I C T I M	# of Victims 1		Type: INDIVIDUAL	Injury: Not Applicable	Domestic: N	
	V1	Victim/Business Name (Last, First, Middle) NELCY, MERCILIO		Victim of Crime # 1,	DOB 03/23/1961	
	Home Address 4878 MESSANA TER, Lake Worth, FL 33463-		Employer Name/Address (TAXI DRIVER)		Race B	Sex M
	Employer Name/Address (TAXI DRIVER)		Business Phone		Relationship To Offender	Resident Status Resident
	VYR	Make	Model	Style	Color	Lic/Lis
Military Branch/Status						
Home Phone 561-577-0368						
Mobile Phone						
VIN						
O T H E R S	CODES: V- Victim (Denote V2, V3) O = Owner (if other than victim) R = Reporting Person (if other than victim)					
	Type:			Injury:		
	Code	Name (Last, First, Middle)		Victim of Crime #	DOB	Race
	Home Address		Employer Name/Address		Age	Sex
	Employer Name/Address		Business Phone		Relationship To Offender	Resident Status
Military Branch/Status						
Home Phone						
Mobile Phone						
I N V O L V E D	Type:			Injury:		
	Code	Name (Last, First, Middle)		Victim of Crime #	DOB	Race
	Home Address		Employer Name/Address		Age	Sex
	Employer Name/Address		Business Phone		Relationship To Offender	Resident Status
	Military Branch/Status					
Home Phone						
Mobile Phone						
P R O P E R T Y	L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found ("OJ" = Recovered for Other Jurisdiction)					
	VI #	Code	Status Frm/To	Value	OJ	QTY
		02	O	\$0.00		1
	Property Description		Make/Model		Serial Number	
	2014 WHI. CAEA75 FL		TOYT		5TDZK3DC9ES507037	
	Officer/ID# Kolenich, Ryan (RPTL, PATL) (1175)					
	Invest ID# (0)			Supervisor Kimbark, Scott (SOPS, K-9) (1021)		
	Complainant Signature		Case Status Closed/cleared		Case Disposition: Cleared By Arrest	
			01/05/2021		01/05/2021	
	Page 1					

Accident Report Additional Name List

Jupiter Police Department

OCA: 21-000026

Additional Name List

Name Code/#	Name (Last, First, Middle)	Victim of Crime #	DOB	Age	Race	Sex
1) WI 1	WALKER, LINCOLN DWAYNE MARCELL I		10/04/1976	44	O	M
	Address 18552 Se Heritage Oaks Ln , Tequesta, FL 33469-		H: 315-766-3911			
	Empl/Addr		B: - -			
			Mobile #: - -			

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ACCIDENT/INVESTIGATION REPORT

Jupiter Police Department

Case # 21-000026

Status Codes L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found

D R U G S	UCR	Status	Quantity	Type Measure	Suspected Type	Up to 3 types of activity	

Assisting Officers
 TYSON, T. (1084), ANDERSON, K. (1200), FARINACCI, J. (1088), SCHNEIDER, R. (1196), BANEGAS, J. (0931), COUNTS, R.L. (1150), KOLENICH, R. (1175)

Suspect Hate / Bias Motivated: *Unknown (Offender`s motivation not known)*

NARRATIVE

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REPORTING OFFICER NARRATIVE

Jupiter Police Department

OCA
21-000026
Date / Time Reported
Sun 01/03/2021 03:25

Victim	Offense
NELCY, MERCILIO	BATTERY - SIMPLE

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According to Nelcy, there were numerous people he was transporting to the hotel who were refusing to wear masks inside of the vehicle. After arriving at the hotel, and exiting the vehicle, the suspect [Colin M Shea;W/M;04/07/97] struck Nelcy on the back of the neck and head and then fled the scene. He was later located walking near Calavaras Cantina inside of Harbourside.

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Let it be noted that the other unknown individuals also fled the scene and ultimately were unable to be located but per hotel staff, may be staying in room #330.

Nelcy then stated that a hotel valet staff member witnessed the battery. I then spoke with [Lincoln D Walker;W/M;10/04/76] who stated that he witnessed the two male subjects strike Nelcy and leave. A show up was then conducted and confirmed that Shea was on of the males who hit Nelcy. Walker provided a different description for the other unknown male who was unable to be located.

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Incident Report Suspect List

Jupiter Police Department

OCA: 21-000026

1	Name (Last, First, Middle) <i>SHEA, COLIN MICHAEL</i>					Also Known As					Home Address <i>951 ESPLANADE</i>				
	Business Address										<i>917-623-2112</i>				
DOB	Age	Race	Sex	Eth	Hgt	Wgt	Hair	Eye	Skin	Driver's License / State.					
<i>04/07/1997</i>	<i>23</i>		<i>M</i>		<i>510</i>	<i>160</i>	<i>BRO</i>	<i>BLU</i>	<i>FAR</i>	<i>S081627779485266397000</i>					
Scars, Marks, Tattoos, or other distinguishing features															
Reported Suspect Detail															
Suspect Age		Race	Sex	Eth	Height		Weight			SSN					
Weapon, Type		Feature		Make		Model			Color		Caliber		Dir of Travel		Mode of Travel
Veh Yr/Make/Model			Drs	Style		Color		Lic/St			VIN				
Notes										Physical Char					

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Incident Report Related Vehicle List

Jupiter Police Department

OCA: 21-000026

1	VehYr/Make/Model <i>2014 TOYT</i>	Style <i>VN</i>	Color <i>WHI/</i>	Lic/Lis /Decal <i>CAEA75 FL 2022</i>	VIN <i>5TDZK3DC9ES07037</i>
IBR Status <i>Other</i>		Date <i>01/03/2021</i>	Location <i>122 SOUNDINGS AVE, JUPITER FL</i>		
Condition	Value <i>\$0.00</i>	Offense Code <i>0810</i>	Jurisdiction <i>Locally</i>	State #	NIC #
Name (Last, First, Middle) <i>* No name *</i>			Also Known As		Home Address
Business Address					
DOB	Age	Race	Sex	Hgt	Wgt
Scars, Marks, Tattoos, or other distinguishing features					

Notes

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