

20mm9341MB

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 0500800		Agency Name West Palm Beach Police Department		Agency Report Number (N.T.A.'s only) 9 4 2020-0018079				
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 NOT APPLICABLE		Multiple Clearance Indicator			
Location of Arrest (Including Name of Business) 104 N CLEMATIS ST, WPB, FL 33401			Location of Offense (Business Name, Address) 123 DATURA ST, WEST PALM BEACH, FL 33401						
Date of Arrest 12/02/2020	Time of Arrest 00:47	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle			
Name (Last, First, Middle) MCANENEY, DAVID J			Alias:		Alias (Name, DOB, Soc. Sec. #, Etc.)				
Race W - White B - Black	I - American Indian O - Asian	Sex M	Date of Birth 10/19/1966	Height 6'00	Weight 185	Eye Color HAZE	Hair Color GRAY OR	Complexion LIGHT	Build Thin
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)			Marital Status S	Religion	Indication of Alcohol Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk. <input type="checkbox"/>		Indication of Drug Influence 1. City 2. County 3. Out of State 1		
Local Address (Street, Apt. Number) 1815 S OLIVE AVE 4, WEST PALM BEACH, FL 33401			(City)	(State)	(Zip)	Home Phone (917) 209-5023		Residence Type	
Permanent Address (Street, Apt. Number) 1815 S OLIVE AVE 4, WEST PALM BEACH, FL 33401			(City)	(State)	(Zip)	Mobile Phone		Address Source SELF	
Business Address (Name, Street)			(City)	(State)	(Zip)	Work Phone		Occupation	
D/L Number, State M255170663790 / FL		Soc. Sec. Number	INS Number	Place of Birth (City, State) NY, United States		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	
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	
<input type="checkbox"/> Parent <input type="checkbox"/> Other: _____ Name (Last, First, Middle)			Residence Phone						
<input type="checkbox"/> Legal Custodian			Business Phone						
Address (Street, Apt. Number)			(City)	(State)	(Zip)				
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			
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. Snuggle D. Deliver E. Use	K. Disperse/ Distribute	M. Manufacture/ Produce/ Cultivate	Z. Other	Drug Type A. Amphetamine	
B. Barbiturase C. Cocaine E. Heroin			H. Hallucinogen M. Marijuana O. Opium/deriv.		P. Paraphernalia/ Equipment S. Synthetic		U. Unknown Z. Other		
Charge Description DISORDERLY INTOXICATION					Statute Violation Number 856.011		Violation of ORD #		
Drug Activity	Drug Type N	Amount / Unit	Offense #	Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant / Capias Number		Bond	
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		Bond	
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		Bond	
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				
Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> T.O.T. County Jail					PROPERTY - Received By		Released By		Released To
<input type="checkbox"/> Posted Bond <input type="checkbox"/> South County Mental Health					Date Transported		Time Transported		Other
Transported By					Date Transported		Time Transported		Other
<input checked="" type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court					Location (Court, Room) Criminal Justice CRIMINAL JUSTICE COMPLEX		No Photo Available		
<input type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.					Court Date and Time 12/22/2020 00:00:00		3228 GUN CLUB ROAD		
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 COMTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.					Signature of Defendant (or Juvenile and Parent/Custodian)		Date Signed		INITIAL
I CONSENT TO RECEIVE REMINDERS OF COURT DATE(S) AND TIMES FOR THIS CASE BY TEXT MESSAGE TO THE NUMBER IDENTIFIED HERE. I UNDERSTAND THAT STANDARD TEXT MESSAGE RATES MAY APPLY AND THAT I MAY REVOKE THIS CONSENT VIA THE TEXT MESSAGE SYSTEM IF I CHOOSE.					(917) 209-5023				
HOLD for Other Agency			Signature of Arresting Officer		Name Verification (Printed by Arrestee)				
<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other			Name of Arresting Officer (Print) GARCIA, KIMBERLY		I.D. # 02035		(PRINT)		
Intake Deputy Shawn B101		I.D. #	Pouch #	Transporting Officer Francis		Agency		PAGE 1 OF 1	
Witness here if subject signed with an "X".									

J# 0519960

PH 1014

PROBABLE CAUSE AFFIDAVIT

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

1 JUVENILE

Agency ORI Number: **FL 0500800** Agency Name: **WEST PALM BEACH POLICE DEPARTMENT** Agency Report Number: **9 | 4 | 2020-0018079**

Charge Type: 1. Felony 3. Misdemeanor 5. Ordinance
 2. Traffic Felony 4. Traffic Misdemeanor 6. Other

Name (Last, First, Middle): **MCANENEY, DAVID J** Race: **W** Sex: **M** Date of Birth: **10/19/1966**

Charge Description: **856.011 DISORDERLY INTOXICATION**

Victim's Name (Last, First, Middle): **SOCIETY,** Race: Sex: Date of Birth:

Local Address (Street, Apt. Number) (City) (State) (Zip): **600 BANYAN BLVD, WEST PALM BEACH, FL 33401** Phone: **(561) 822-1900** Address Source:

Business Address (Name, Street) (City) (State) (Zip): Phone: Occupation:

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 _____ who told _____ that he/she saw the arrested person commit the below acts.
 confessed to _____ admitting to the below facts. was found to have committed the below acts, resulting from my (described) investigation.
 On the 2 day of December, 2020 at 02:15 (Specifically include facts constituting cause for arrest.)

On Wednesday, 12/2/2020, at 00:09 hours Officers were dispatched to 123 Datura in reference to a Disturbance.

Dispatch described a white male wearing Khaki pants and a blue sweater that is very intoxicated and yelling at customers. As I arrived on scene, I was flagged down by an employee from ER Bradley who pointed at a white male slumped over the rope outside the restaurant on the grass. As Officers approached, the male was yelling at staff and appeared to have disrupted the patrons at the bar and individuals walking near Flagler as they gathered to watch the disturbance. As contacted the man in question, he attempted to get up multiple times and fell to the ground, unable to walk. The male, later identified as David Mcaneney, appeared to be heavily intoxicated, slurring his speech, repeating himself multiple times, and smelled heavily of an unknown alcoholic substance which was emanating from his breath.

Mcaneeny was refusing to leave the property at ER Bradleys where he was contacted and each time he attempted to leave, he would fall or have to be escorted back to the ground by Officers due to his intoxication level. Mcaneeny was given several options to leave the property including Uber, Taxi or calling for a ride but continued causing a disturbance instead of leaving. Based on Mcaneeny's intoxication level and a fear for his safety, at this point he was not permitted to leave on his bicycle after he demonstrated repeatedly, he was unable to stand and urinated on himself.

Mcaneeny continued being verbally aggressive and attempted to stand, having to be physically assisted back to the floor for his safety and the Officers on scene. When Mcaneeny was escorted back to the sitting position, he advised Officers dislocated his shoulder and injured him, prompting Sgt. Clark and Lieutenant Bessette's notification via radio and a request for fire rescue to respond. Fire Rescue arrived on scene at which time Mcaneeny stated on BWC he was not injured and refused to be treated or

SWORN AND SUBSCRIBED BEFORE ME
FISHER, CHRISTOPHER
 NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)
12/02/2020
 DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER
GARCIA, KIMBERLY (02035)
 NAME OF OFFICER (PLEASE PRINT)
12/02/2020
 DATE

PROBABLE CAUSE AFFIDAVIT
SUPPLEMENT

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

1 JUVENILE

OBTS Number		
Agency ORI Number FL 0500800	Agency Name WEST PALM BEACH POLICE DEPARTMENT	Agency Report Number 9 4 2020-0018079
Charge Type: Check as many as apply.	<input type="checkbox"/> 1. Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other	Special Notes:

Name (Last, First, Middle) MCANENEY, DAVID J	Alias	Race W	Sex M	Date of Birth 10/19/1966
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checked by Fire Rescue.

Officer Fisher then contacted security for 123 Datura St, Francky Hilaire who advised Mcaneney was causing a disturbance inside the bar at which time he was asked to leave the property but refused. Hilaire advised he had to physically escort Mcaneney outside at which time he returned back inside, picked up a chair and attempted to strike Hilaire who was able to overpower Mcaneney and escort him off the property. While outside, Mcaneney continued attempting to fight and caused a disturbance interrupting patrons of 123 Datura and ER Bradley's establishments. Hilaire advised he was not struck and did not wish to pursue charges against Mcaneney.

Officer Fisher then made contact with ER Bradley's manager, Gerardo Luna, who advised in his sworn statement Mcaneney attempted to enter ER Bradley's multiple times and was told to leave by staff and security. Mcaneney refused to leave and caused a disturbance interrupting his patrons and causing a scene outside prior to Police arrival. A portion of the disturbance prior to Police arriving was captured on CCTV which shows Mcaneney causing a disturbance outside the establishment.

Based on Mcaneney endangering the safety of the patrons and property at both 123 Datura St and ER Bradley's, probable cause exist to arrest and charge Mcaneney with disorderly intoxication in violation of FSS 856.011(1). Mcaneney was placed under arrest and later interviewed by Lt. Bessette for his in injured persons report. Mcaneney was later transported to St. Mary's to be medically cleared based on his stated injuries, with no injuries noted in his discharge papers. Mcaneney was later transported to the county jail without further incident.

NOT A CERTIFIED COPY

SWORN AND SUBSCRIBED BEFORE ME  FISHER, CHRISTOPHER NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) 12/02/2020 DATE	SIGNATURE OF ARRESTING / INVESTIGATING OFFICER  GARCIA, KIMBERLY (02035) NAME OF OFFICER (PLEASE PRINT) 12/02/2020 DATE	PAGE 2 OF 2
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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: 2020028142	Date: 12/02/2020
	Specialist Name/ID: C. Anastasi/#21908