

0528798

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AD M I N I S T R A T I O N		OBTS Number		ARREST / NOTICE TO APPEAR				1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1		JUVENILE													
Agency ORI Number 0502300		Agency Name North Palm Beach Police Department				Agency Report Number (N.T.A.'s only) 7, 0 22-000038																					
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 UNARMED				Multiple Clearance Indicator																	
Location of Arrest (Including Name of Business) 108 PARADISE HARBOUR BLVD, APT 509, NPB, 108 PARADISE										Location of Offense (Business Name, Address) 108 PARADISE HARBOUR BLVD 509, NORTH PALM BEACH,																	
Date of Arrest 01/16/2022		Time of Arrest 02:28		Booking Date		Booking Time		Jail Date		Jail Time		Location of Vehicle															
Name (Last, First, Middle) CASTALDO, JULIA MICHELLE										Alias (Name, DOB, Soc. Sec. #, Etc.)																	
Race W - White I - American Indian B - Black O - Oriental/Asian W F										Date of Birth 07/09/1979		Height 5'06		Weight 140		Eye Color BLUE		Hair Color BROWN		Complexion FAIR		Build Medium					
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)										Marital Status M		Religion JEWISH		Indication of Alcohol Influence Drug Influence Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk <input type="checkbox"/>													
Local Address (Street, Apt. Number) 105 PARADISE HARBOUR BLVD 211, NORTH PALM BEACH, FL 33408										(City)		(State)		(Zip)		Phone (631) 387-3086		Residence Type: 1. City 3. Florida 2. County 4. Out of State 1									
Permanent Address (Street, Apt. Number) 105 PARADISE HARBOUR BLVD 211, NORTH PALM BEACH, FL 33408										(City)		(State)		(Zip)		Phone (631) 387-3086		Address Source FL DL									
Business Address (Name, Street) 105 PARADISE HARBOUR BLVD 211, NORTH PALM BEACH, FL 33408										(City)		(State)		(Zip)		Phone		Occupation Disabled									
D/L Number, State C234433797490 / FL				Soc. Sec. Number		INS Number		Place of Birth (City, State) PATCHAGUE, NY,				Citizenship US															
C O D E P		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													
J U V E N I L E		Parent <input type="checkbox"/> Other <input type="checkbox"/> Name (Last, First, Middle)										Residence Phone															
		Legal Custodian <input type="checkbox"/> Name (Last, First, Middle)										Residence Phone															
		Address (Street, Apt. Number) 105 PARADISE HARBOUR BLVD 211, NORTH PALM BEACH, FL 33408										(City)		(State)		(Zip)		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		VICTIM NOTIFICATION REQUIRED											
		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		Value of Property											
		<input type="checkbox"/> Yes, by: <input type="checkbox"/> No										Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Description of Property													
C O D E		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		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					
C H A R G E		Charge Description BATTERY-SIMPLE (TOUCH OR STRIKE)										Statute Violation Number 784.03(1)(A)(I)		Violation of ORD #													
		Drug Activity		Drug Type N		Amount / Unit		Offense #		Counts 1		Domestic Violence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N		Warrant / Capias Number		Bond											
C H A R G E		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											
C H A R G E		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											
I N T A K E		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 checked="" 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							
N O T I C E		<input type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court <input checked="" type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.										Location (Court, Room)				Court Date and Time				No Photo Available							
T O A P P E A R		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.										Signature of Defendant (or Juvenile and Parent/Custodian)												Date Signed			
A D M I N		HOLD for Other Agency				Signature of Arresting Officer RIGGOTT, K.				Name Verification (Printed by Arrestee)				ID # 9901				PAGE 1 OF 1									
		<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal				<input type="checkbox"/> Related Arrest <input type="checkbox"/> Other				Name of Arresting Officer (Print) RIGGOTT, K.				ID # 9901				Agency NPB									
		Pouch #				Transporting Officer Riggott, K.				ID # 9901				Agency NPB				Witness here if subject signed with an "X"									

☐ COURT ☐ STATE ATTORNEY ☐ AGENCY ☐ CENTRAL RECORDS ☐ JAIL ☐ CRIME ANALYSIS ☐ P.T.O. ☐ DEFENDANT

DOMESTIC VIOLENCE PROBABLE CAUSE

AFFIDAVIT

Palm Beach County

A D M I N	Date / Time 01/16/2022 00:17	Agency ORI Number FL FL0502300		Agency Name NORTH PALM BEACH POLICE	Agency Report Number 7 0 22-000038																																																																																																										
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D E F E N D A N T	DEFENDANT'S STATEMENTS: Written <input type="checkbox"/> Taped <input type="checkbox"/> Oral <input checked="" type="checkbox"/>			OBSERVATIONS OF VICTIM (PHYSICAL & EMOTIONAL):																																																																																																											
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R E L A T I O N S H I P	RELATIONSHIP BETWEEN VICTIM & SUSPECT SPOUSE																																																																																																														
	<table border="0"><tr><td>PHOTOGRAPHS:</td><td>Scene:</td><td><input checked="" type="checkbox"/></td><td>YES</td><td><input type="checkbox"/></td><td>NO</td><td></td></tr><tr><td></td><td>Victim:</td><td><input checked="" type="checkbox"/></td><td></td><td><input type="checkbox"/></td><td></td><td></td></tr><tr><td></td><td>911 CALL:</td><td><input type="checkbox"/></td><td></td><td><input checked="" type="checkbox"/></td><td>CALLER:</td><td></td></tr><tr><td></td><td>WEAPON USED:</td><td><input type="checkbox"/></td><td></td><td><input checked="" type="checkbox"/></td><td>TYPE:</td><td></td></tr><tr><td></td><td>WITNESSES:</td><td><input type="checkbox"/></td><td></td><td><input checked="" type="checkbox"/></td><td>(If YES, attach witness list)</td><td></td></tr><tr><td></td><td>INJURIES:</td><td><input checked="" type="checkbox"/></td><td></td><td><input type="checkbox"/></td><td></td><td></td></tr><tr><td></td><td>MEDICAL TREATMENT:</td><td><input type="checkbox"/></td><td></td><td><input checked="" type="checkbox"/></td><td></td><td></td></tr><tr><td></td><td>AT: Scene:</td><td><input type="checkbox"/></td><td></td><td><input checked="" type="checkbox"/></td><td>PARAMEDICS:</td><td></td></tr><tr><td></td><td>Hospital:</td><td><input type="checkbox"/></td><td></td><td><input checked="" type="checkbox"/></td><td>PHYSICIAN(S) / HOSPITAL:</td><td></td></tr><tr><td></td><td>ACT COMMITTED IN PRESENCE OF MINOR(S):</td><td><input type="checkbox"/></td><td></td><td><input checked="" type="checkbox"/></td><td>NAMES/AGES:</td><td></td></tr><tr><td></td><td>H. R. S. NOTIFIED:</td><td><input type="checkbox"/></td><td></td><td><input checked="" type="checkbox"/></td><td></td><td></td></tr><tr><td></td><td>VICTIM PREGNANT:</td><td><input type="checkbox"/></td><td></td><td><input checked="" type="checkbox"/></td><td></td><td></td></tr><tr><td></td><td>VIOLATION OF RESTRAINING ORDER:</td><td><input type="checkbox"/></td><td></td><td><input checked="" type="checkbox"/></td><td>CASE #:</td><td></td></tr><tr><td></td><td>PRIOR HISTORY OF DOMESTIC VIOLENCE:</td><td><input type="checkbox"/></td><td></td><td><input checked="" type="checkbox"/></td><td></td><td></td></tr><tr><td></td><td>ALCOHOL OR DRUGS INVOLVED:</td><td><input checked="" type="checkbox"/></td><td></td><td><input type="checkbox"/></td><td></td><td></td></tr></table>							PHOTOGRAPHS:	Scene:	<input checked="" type="checkbox"/>	YES	<input type="checkbox"/>	NO			Victim:	<input checked="" type="checkbox"/>		<input type="checkbox"/>				911 CALL:	<input type="checkbox"/>		<input checked="" type="checkbox"/>	CALLER:			WEAPON USED:	<input type="checkbox"/>		<input checked="" type="checkbox"/>	TYPE:			WITNESSES:	<input type="checkbox"/>		<input checked="" type="checkbox"/>	(If YES, attach witness list)			INJURIES:	<input checked="" type="checkbox"/>		<input type="checkbox"/>				MEDICAL TREATMENT:	<input type="checkbox"/>		<input checked="" type="checkbox"/>				AT: Scene:	<input type="checkbox"/>		<input checked="" type="checkbox"/>	PARAMEDICS:			Hospital:	<input type="checkbox"/>		<input checked="" type="checkbox"/>	PHYSICIAN(S) / HOSPITAL:			ACT COMMITTED IN PRESENCE OF MINOR(S):	<input type="checkbox"/>		<input checked="" type="checkbox"/>	NAMES/AGES:			H. R. S. NOTIFIED:	<input type="checkbox"/>		<input checked="" type="checkbox"/>				VICTIM PREGNANT:	<input type="checkbox"/>		<input checked="" type="checkbox"/>				VIOLATION OF RESTRAINING ORDER:	<input type="checkbox"/>		<input checked="" type="checkbox"/>	CASE #:			PRIOR HISTORY OF DOMESTIC VIOLENCE:	<input type="checkbox"/>		<input checked="" type="checkbox"/>				ALCOHOL OR DRUGS INVOLVED:	<input checked="" type="checkbox"/>		<input type="checkbox"/>	
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N A R R	On Saturday, January 15, 2022 at approximately 1935 hours North Palm Beach Police Officers were dispatched to a domestic disturbance at 105 Paradise Harbor Boulevard, Apt 211, North Palm Beach, FL, 33408.																																																																																																														
	Upon arriving Officers made contact with VICTIM Joseph P. Castaldo (W/M DOB 01/09/1963) who stated that he was																																																																																																														
STATE OF FLORIDA COUNTY OF PALM BEACH Appeared before me, _____ personally known to me, who, being first duly sworn, says that the facts above, based upon my investigation, are true.  _____ SIGNATURE OF ARRESTING OFFICER Sworn to and subscribed to before me this _____ day of _____, _____. _____ NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)																																																																																																															

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.

DOMESTIC VIOLENCE PROBABLE CAUSE

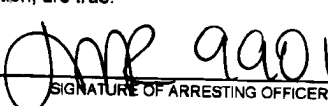
AFFIDAVIT

Palm Beach County
Narrative Continuation

A D M I N I S T R A T I V E	Date / Time 01/16/2022 00:17		
	Agency ORI Number FL FL0502300	Agency Name NORTH PALM BEACH POLICE	Agency Report Number 7 0 22-000038
	<p>attacked by his wife, Julia M. Castaldo (W/F DOB 07/09/1979). Joseph stated that he last saw his wife walking westbound in the parking lot of Paradise Harbor; North Palm Officers were not able to locate Julia at the time, but continued to survey the area. When entering the residence, I noticed the furniture was thrown all over the apartment, blood droplets in the kitchen, bathroom and hallway leading into the apartment. There was also broken glass on the floor as well as an iPad on the couch that had the screen broken.</p> <p>Joseph stated that he and Julia were sitting on the couch watching a football game, when he received a phone call from his ex-wife. Joseph stated that after a few moments of him being on the phone with his ex-wife, Julia began to "lose it" and began throwing things around in the apartment. Joseph said that he tried to stop Julia, and in the process of doing so, Julia smacked him in the face, causing him to have a small laceration on the left side of his face, near his eye. Joseph was asked if he needed Fire Rescue to come out and look at his injury, but he declined.</p> <p>Joseph was given a Victim's Rights Brochure, Affidavit of Prosecution form as well as a Domestic Violence Risk Assessment Screening. Joseph signed stating that he did receive a copy of the Domestic Violence Notice of Legal Rights and Remedies. Joseph did choose to prosecute against his wife Julia. Police Officers were unable to locate Julia, but explained to Joseph that if Julia did come back to the residence, to call us immediately.</p> <p>At approximately 2213 hours, dispatch notified me that Joseph needed me to contact him regarding Julia reaching out to him via phone call. When speaking with Joseph, he informed me that Julia contacted him asking if she "wanted to come back home" and asked if she was "allowed to come back". Julia also stated to Joseph that she witnessed a car accident that occurred in Palm Beach Gardens earlier this evening. Joseph requested that I contact Julia to try and "find her". Joseph demanded that after I get ahold of Julia, I needed to call him back to let him know where she was. I informed Joseph that I would try and contact Julia, and that maybe he should just go to sleep for the evening and relax.</p> <p>Shortly after getting off the phone with Joseph, I was able to get ahold of Julia. Originally, Julia thought I was contacting her because of the crash that occurred in Palm Beach Gardens. I explained to Julia again who I was, and that I was the Police Officer handling the investigation between her and her husband. I told Julia that I needed to speak with her regarding what happened earlier in the evening, and she stated that she was "at her home". Julia then asked if I wanted to speak to her husband, and I said yes. A man then came on the phone who stated that he was her husband, Joseph. I asked Joseph to put Julia back on the phone. Once Julia was back on the phone, I heard her and Joseph arguing back and forth; Julia was screaming "You threw a beer bottle at my head". I immediately told Julia to remain on the phone with me, and to step outside the residence, and stay out in the hallway, outside the front door. Before I could get a response back from Julia, she hung up the phone.</p> <p>I immediately drove over to the residence, while still trying to get in contact with Julia. Police Officers arrived at the residence, and made contact with Joseph who stated that Julia had "just left". I asked Joseph why he did not contact us right away when Julia knocked on the door, in which Joseph responded back with "I don't know". I asked Joseph if he saw which direction Julia walked off to, and he did not know but thought that she could have been on his boat. Officers walked around to the back of the apartment building where Joseph's boat is docked. During the search of the boat, Officers were unable to locate Julia. While I was standing with Joseph, he admitted that he did hit Julia over the head with a beer bottle because "she emptied it into the sink before he was able to drink it".</p>		

STATE OF FLORIDA
COUNTY OF PALM BEACH

Appeared before me, _____ personally known to me, who, being first duly sworn, says that the facts above, based upon my investigation, are true.


SIGNATURE OF ARRESTING OFFICER

Sworn to and subscribed to before me this _____ day of _____, _____.

NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL


CRIME ANALYSIS

P.I.O.

DOMESTIC VIOLENCE PROBABLE CAUSE

AFFIDAVIT

Palm Beach County
Narrative Continuation

A D M I N N A R R A T I V E	Date / Time 01/16/2022 00:17		
	Agency ORI Number FL FL0502300	Agency Name NORTH PALM BEACH POLICE	Agency Report Number 7 0 22-000038
	<p>Both Joseph and Julia rent out an apartment in Paradise Harbor (108 Paradise Harbor, Apt 509). The resident who is renting out the apartment reached out to Police Officers and notified us that Julia was at the above address. Officers made contact with Julia and placed her under arrest for Simple Battery against Joseph. Julia was placed in handcuffs which were double locked and checked for tightness, and then placed in the back of my marked patrol car. Joseph was also arrested for Aggravated Battery with a weapon towards Julia. Joseph was placed in handcuffs which were double locked and checked for tightness, and then placed in the back of a marked patrol car.</p> <p>Julia was given a Victim's Rights Brochure, Domestic Violence Risk Assessment Screening, as well as an Affidavit of Prosecution Form, which she declined to fill out. Julia signed stating that she did receive a copy of the Domestic Violence Notice of Legal Rights and Remedies.</p> <p>Both parties were given a Victim Notification Form, which was placed in their property for the jail.</p> <p>After completing the necessary paperwork, both parties were transported to the county jail for booking.</p> <p>No further information at this time.</p>		
<p>STATE OF FLORIDA COUNTY OF PALM BEACH</p> <p>Appeared before me, _____ personally known to me, who, being first duly sworn, says that the facts above, based upon my investigation, are true.</p> <p> _____ SIGNATURE OF ARRESTING OFFICER</p> <p>Sworn to and subscribed to before me this _____ day of _____, _____.</p> <p>_____ NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)</p>			

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P.I.O.

NORTH PALM BEACH POLICE DEPARTMENT
VICTIM NOTIFICATION FORM

This form must be filled out in a case involving one of the following crimes:

- Homicide (Ch. 782)
- Sexual Offense (Ch. 794)
- Attempted Murder
- Attempted Sexual Offense
- Stalking (S. 784.048)
- Domestic Violence - (This includes any assault, agg. assault, battery, agg. battery, sexual assault, sexual battery, stalking, agg. stalking or any criminal offense resulting in physical injury or death of one family member or household member by another, who is or was residing in the same single dwelling.)

Upon completion, this form must accompany the booking paperwork. If applying for a warrant, attach this form to the filing packet.

1. Incident Report#: 22 000038 Agency: NPBPD
Offense: Domestic Battery
Suspect/Offender: Julia Castaldo
D.O.B. 7/09/1979 Race: White Sex: Female
2. Warrant #(s): _____
3. Complete one (1) of the following:
 - a. Victim's name: Joseph Castaldo
Address: 105 Paradise Harbour Blvd Apt 211, NPB FL 33408
City: North Palm Beach State: FL Zip: 33408
Home #: 631-905-6533 Work#: _____ Other: _____
 - b. Victim's next of kin: _____
Address: _____
City: _____ State: _____ Zip: _____
Home #: _____ Work#: _____ Other: _____
 - c. Victim's designated contact other than next of kin (for example: a friend or neighbor):
Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Home #: _____ Work#: _____ Other: _____
4. Relevant identification or case numbers assigned to the case (please specify):

WAIVER: I CHOOSE NOT TO COMPLETE THIS VICTIM NOTIFICATION FORM, AND UNDERSTAND THAT I AM WAIVING MY RIGHT TO BE NOTIFIED OF THE RELEASE OF THE SUSPECT/OFFENDER.

Signature of person waiving notification: _____

Printed name of person waiving notification: _____

Officer's Name: Biggott I.D.: 9901 Date: 1/15/22

SUSPECT/OFFENDER: _____

COURT CASE/WARRANT #: _____
(FOR WARRANTS USE ONLY)



**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"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2022001397

Date: 1/16/2022

Specialist Name/ID: M. Took #8557