

ARREST / NOTICE TO APPEAR

20MM1002 MB

1 Arrest (No Warrant) 3 Request for Warrant
2 Arrest (Warrant) 4 Request for Capias
3 N T A 5 Juvenile Referral

1 JUVENILE

| | | | | | |
|--|--|---|--|---|---|
| AD M I N I S T R A T I O N | ORBS Number | Agency ORI Number 0500200 | Agency Name Boca Raton Police Department | Agency Report Number (N T A 's only) 3, 2 2020-014674 | |
| | 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: Hands, Feet, Fist, Teeth | |
| | Location of Arrest (Including Name of Business) 200 E PLAMETTO PARK RD BOCA RATON, FL, 200 E PALMETTO | | Location of Offense (Business Name Address) 200 E PALMETTO PARK RD, BOCA RATON, FL 33432 | | |
| | Date of Arrest 12/30/2020 | Time of Arrest 00:24 | Booking Date 12/30/2020 | Booking Time 00:34 | |
| | Name (Last, First, Middle) MONTOYA, MALY VANNESSA | | | | |
| | Alias (Name, DOB, Soc Sec # Etc.) Alias: | | | | |
| | Race W - White B - Black O - Original/Asian | Sex W F | Date of Birth 04/19/1995 | Height 5'03 | |
| | Weight 150 | Eye Color HAZEL | Hair Color BLACK | Complexion LIGHT | |
| | Build Med | Marital Status S | Religion CHRISTIAN | Indication of Alcohol Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> | |
| | Local Address (Street, Apt. Number) 148 SUNCREST RD, NORWALK, CT 06854 | | Phone (305) 901-9602 | Residence Type 1 City 2 County 3 Florida 4 Out of State 4 | |
| | Permanent Address (Street, Apt. Number) 148 SUNCREST RD, NORWALK, CT 06854 | | Phone (305) 901-9602 | Address Source DL | |
| | Business Address (Name, Street) 048809938 / | | Soc. Sec. Number [REDACTED] | JNS Number NORWALK, CT, United | |
| | Place of Birth (City, State) NORWALK, CT, United | | Citizenship US | | |
| | Co-Defendant Name (Last, First, Middle) | | Race | Sex | |
| | Co-Defendant Name (Last, First, Middle) | | Race | Sex | |
| | Name (Last, First, Middle) | | Residence Phone | | |
| | Address (Street, Apt. Number) | | Business Phone | | |
| | Notified by (Name) | Date | Time | JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT JAC 3. Institutionalized | |
| | 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, by <input 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 Dispenses/ 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 DOMESTIC BATTERY | Statute Violation Number 784.03(1A1) | Violation of ORD # | | |
| | Drug Activity | Drug Type | Amount / Unit | Offense # | |
| | | | | Counts | |
| | | | | Domestic Violence <input checked="" 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 | |
| | 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"/> Posted Bond | | <input checked="" type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> South County Mental Health | | PROPERTY - Received By |
| | Transported By | | Date Transported | Time Transported | Other |
| | <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) South County 200 W Atlantic Ave Delray Beach, FL 33444 | | |
| | 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. | | No Photo Available | | |
| | Signature of Defendant (or Juvenile and Parent/Custodian) | | Date Signed | | |
| | HOLD for Other Agency | | Signature of Arresting Officer | | Name Verification (Printed by Arrestee) |
| | <input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal | | Name of Arresting Officer (Print) GLENNON, R. W. | | DEC 30 AM 8:58 |
| | Intake Department Duma (98) | | Transporting Officer Martinez | | WITNESS here if signed with an "X" |

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

0520505

Martinez 831

2646

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 0500200 | | Agency Name BOCA RATON POLICE DEPARTMENT | | Agency Report Number 3 2 2020-014674 | |
| 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 |
| Name (Last, First, Middle) MONTOYA, MALY VANNESA | | | | | Race W | Sex F |
| Date of Birth 04/19/1995 | | | | | Special Notes | |
| Charge Description 784.03(1A1) DOMESTIC BATTERY | | | Charge Description | | | |
| Victim's Name (Last, First, Middle) CARABETTA, JOSEPH MICHAEL | | | Race W | Sex M | Date of Birth 08/27/2001 | |
| Local Address (Street, Apt. Number) 148 SUNCREST RD, NORWALK, CT 06854 | | | City (State) | Zip (Zip) | Phone (703) 379-8326 | 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 30 day of December, 2020 at 00:24 (Specifically include facts constituting cause for arrest.)

On December 29, 2020 at approximately 2340 hours, I responded to 200 E Palmetto Park Rd Boca Raton, FL in reference to a domestic disturbance.

I met with Maly Montoya who advised me she was in a fight with her boyfriend, Joseph Carabetta. Maly stated she called police to help get her belongings from apt 802. While explaining to me what the fight was about, Maly stated to me that she hit Joseph. Maly's sworn statement was captured on my MVR.

I then spoke with a friend, Emma Thomas, who advised me she witnessed the incident. Emma stated that the altercation took place in the parking garage. Maly and Joe were arguing about the rental car. Maly then charged at Joe and started swinging her fist and purse at him, hitting him in the face. Emma provided me a sworn taped statement.

Investigation revealed that Maly Montoya (Defendant) was in a verbal argument with her boyfriend, Joseph Carabetta (victim), over a rental car. Maly and Joseph have been dating for the past 2 years and have resided together as a family unit for the past 9 months. The argument turned physical when Maly charged at Joseph and struck him multiple times with her purse and fist. Joseph sustained an abrasion that was red underneath his left eye. Joseph declined any medical attention.

Joseph provided me a sworn taped statement which was captured on my MVR. Joseph confirmed that he was hit multiple times by Maly in the parking garage. Joseph described him getting hit using the term, "wacked".

The parking garage has video surveillance inside the garage. The cameras captured the incident of Maly hitting Joseph. A copy of the video was taken by Officer Baron utilizing his MVR.

| | |
|--|--|
| SWORN AND SUBSCRIBED BEFORE ME | SIGNATURE OF ARRESTING / INVESTIGATING OFFICER |
| HARDING, BRANDON BLAZE | GLENNON, RYAN WILLIAM (838) |
| NOTARY PUBLIC / CLERK OF COURT / OFFICER (F S S: 117.10) | NAME OF OFFICER (PLEASE PRINT) |
| <u>12/30/2020</u> | <u>12/30/2020</u> |
| DATE | DATE |
| | PAGE 1 |
| | 1 OF 2 |

PROBABLE CAUSE AFFIDAVIT
SUPPLEMENT

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

1

JUVENILE

| | | | | | | |
|---|------------|--|------------------------------|--|-----------------------------|----------|
| A D M I N I S T R A T I V E | OBS Number | | Agency Name | | Agency Report Number | |
| | FL 0500200 | | BOCA RATON POLICE DEPARTMENT | | 3 2 2020-014674 | |
| Charge Type Check as many as apply: | | | | | Special Notes: | |
| <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 | | | | | | |
| Name (Last, First, Middle) MONTROYA | | | | | Race W | Sex F |
| | | | | | Date of Birth 04/19/1995 | |

Maly was placed under arrest and charged with Domestic Battery (F.S.S 784.03-1a1). Maly was transported to Palm Beach County Jail.

NOT A CERTIFIED COPY

| | | | | |
|--|---|--|--|----------------|
| A D M I N I S T R A T I V E | SWORN AND SUBSCRIBED BEFORE ME | | SIGNATURE OF ARRESTING / INVESTIGATING OFFICER | |
| | <u>HARDING, BRANDON BLAZE</u> | | <u>Glennon, Ryan William</u> | |
| | NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S 117.10) | | NAME OF OFFICER (PLEASE PRINT) | |
| | 12/30/2020 DATE | | 12/30/2020 DATE | |
| | | | | PAGE 2 OF 2 |

VICTIM NOTIFICATION FORM

This form must be completed when one of the following crime(s) has been committed:

- Homicide (Ch. 782)
- Sexual Offense (Ch. 794)
- Attempted Murder
- Attempted Sexual Offense
- Stalking (F.S. 784.048)
- Domestic Violence - (This includes any assault, aggravated assault, battery, aggravated battery, sexual assault, sexual battery, stalking, aggravated 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#: 2020-14674 Agency: Boca Raton PD
Offense: Simple Battery
Suspect/Offender: Maly Montoya
D.O.B. 4/19/95 Race: White Sex: Female
2. Warrant#(s): N/A
- 3.a. Victim's name: Joseph Carabetta D.O.B. 8/27/01 Race: White Sex: Male
Address: 2209 N. Broad St.
City: Meriden State: CT Zip: 06450
Home#: N/A Work#: N/A Other: _____
- b. Victim's next of kin, friend or neighbor: Emma Thomas
Address: 200 E. Palmetto Park Rd, unit 802
City: Boca Raton State: FL Zip: _____
Home#: 860-707-6464 Work#: _____ Other: _____

SUSPECT/OFFENDER: Maly Montoya
COURT CASE/WARRANT#: 2020-14674
(FOR WARRANTS USE ONLY)

NOTE: PURSUANT TO F.S. 119.07, THE CONTENTS OF THIS FORM MAY BE SUBJECT TO CONFIDENTIALITY.

Victim/Relation Notification Waiver and Confidential Information Request.

(check applicable boxes)

- Waiver:** I choose not to be notified when the arrestee is released from custody.
- Confidential:** Pursuant to F.S. 119.07 (3)(S)1, I request that the address and telephone number on this form be kept confidential (applicable only to sexual battery, aggravated child abuse, aggravated stalking, harassment, aggravated battery, or domestic violence cases).
Other confidentiality provisions of Florida State Statutes may also be applicable

RECORDED
DEC 30 2020

Signature of person waiving notification: _____
Printed name of person waiving notification: _____

Officer's Name: Off. Glenn I.D.# 838 Date: 12/30/20
White/Corrections or State Attorney (Warrant Application) Yellow/Warrants Section Pink/Central Records



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"/> | | ** (viii) Clinical records under the Baker Act. §394.4615(7), Fla. Stat. | |
| | <input type="checkbox"/> | | | |
| | <input type="checkbox"/> | | | |
| | <input type="checkbox"/> | | | |
| Other | <input type="checkbox"/> | 119.0712(2) | Other: Personal information contained in a motor vehicle record | |
| | <input type="checkbox"/> | 119.071(2)(j) | Other: MARSY'S LAW PROTECTED INFORMATION REGARDING VICTIM(S). | |

REVIEW COMPLETED BY

| | |
|----------------------------|------------------------------------|
| Booking Number: 2020030446 | Date: 12/30/2020 |
| | Specialist Name/ID: M. Tooks #8557 |