

#0332047

20 mm 7495 SB

ARREST / NOTICE TO APPEAR

- 1 Arrest (No Warrant)
- 2 Arrest (Warrant)
- 3 Request for Warrant
- 4 Request for Capias
- 5 Juvenile Referral

3 JUVENILE N

Agency ORI Number: 0500200 Agency Name: Boca Raton Police Department Agency Report Number (N.T.A.'s only): 3 2 2020-010674

Charge Type:  1 Felony  3 Misdemeanor  5 Ordinance  6 Other

Location of Arrest (Including Name of Business): 6000 W. Glades Rd (TCM) Location of Offense (Business Name, Address): [Redacted]

Date of Arrest: 09/24/20 Time of Arrest: 0930 Booking Date: [Redacted] Booking Time: [Redacted] Jail Date: 09/24/20 Jail Time: [Redacted] Location of Vehicle: 6000 W. Glades

Name (Last, First, Middle): COLAVECCHIO, NICHOLAS T Alias: [Redacted]

Race: W - White 1 - American Indian W M Sex: M Date of Birth: 07/04/1974 Height: 6'01 Weight: 170 Eye Color: BROWN Hair Color: BLACK Complexion: LIGHT Build: Medium

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description): TATTL HIP/DENI

Local Address (Street, Apt. Number): 19999 BACK NINE DR, BOCA RATON, FL 33498 Phone: (561) 856-2379

Peterson Address (Street, Apt. Number): 19999 BACK NINE DR, BOCA RATON, FL 33498 Phone: (561) 856-2379 Address Service: FL DL

Business Address (Name, Street): PURACAD PHARMACEUTICALS, HOME Phone: (561) 609-7667 Occupation: Sales

DL Number, State: C412638742440 / FL Soc. Sec Number: [Redacted] INS Number: [Redacted] Place of Birth (City, State): ALBANY, NY, United Citizenship: US

Co-Defendant Name (Last, First, Middle): [Redacted] Race: [Redacted] Sex: [Redacted] Date of Birth: [Redacted]

Co-Defendant Name (Last, First, Middle): [Redacted] Race: [Redacted] Sex: [Redacted] Date of Birth: [Redacted]

Parent  Other  Name (Last, First, Middle): [Redacted] Residence Phone: [Redacted]

Legal Custodian  Address (Street, Apt. Number): [Redacted] (City) [Redacted] (State) [Redacted] (Zip) [Redacted] Business Phone: [Redacted]

Notified by (Name): [Redacted] Date: [Redacted] Time: [Redacted] JUVENILE DISPOSITION: 1 Handled Processed within Department and Released 2 TDT JAC 3 Incarcerated

Released To (Name): [Redacted] Relationship: [Redacted] Date: [Redacted] Time: [Redacted]

The above address was provided by  defendant and/or  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.

Property Crime?  Yes  No Description of Property: [Redacted] Value of Property: [Redacted]

Drug Activity: N. N/A P. Possess S. Sell B. Buy T. Traffic R. Smuggle D. Deliver E. Use K. Disperse/Distribute M. Manufacture/Produce/Cultivate Z. Other

Drug Type: N. N/A A. Amphetamine B. Barbiturate C. Cocaine E. Heroin F. Hallucinogen M. Marijuana O. Opium/Deriv. P. Paraphernalia/Equipment S. Synthetic U. Unknown Z. Other

Charge Description: STALKING Statute Violation Number: 784.048(2) Violation of ORD #: [Redacted]

Drug Activity: N. N/A Drug Type: N. Amount / Unit: / Offense #: 20-10674 Counts: 1 Domestic Violence:  Y  N Warrant / Capias Number: [Redacted] Bond: [Redacted]

Charge Description: [Redacted] Statute Violation Number: [Redacted] Violation of ORD #: [Redacted]

Drug Activity: [Redacted] Drug Type: [Redacted] Amount / Unit: [Redacted] Offense #: [Redacted] Counts: [Redacted] Domestic Violence:  Y  N Warrant / Capias Number: [Redacted] Bond: [Redacted]

Charge Description: [Redacted] Statute Violation Number: [Redacted] Violation of ORD #: [Redacted]

Drug Activity: [Redacted] Drug Type: [Redacted] Amount / Unit: [Redacted] Offense #: [Redacted] Counts: [Redacted] Domestic Violence:  Y  N Warrant / Capias Number: [Redacted] Bond: [Redacted]

Health / Apparent Physical Condition of Defendant: [Redacted] Any knowledge of the following:  Mental  Escape Risk  Self-Harm  Delinquency  Injuries Explain: [Redacted]

Check which applies:  Released O.R.  Released to Parent/Guardian  T.O.T. County Jail  Posted Bond  South County Mental Health

Transported By: [Redacted] Date Transported: [Redacted] Time Transported: [Redacted] Other: [Redacted]

INSTRUCTION NO. 1 - Mandatory appearance in court  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 Court Date and Time: [Redacted]

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): [Redacted] Date Signed: [Redacted]



HOLD for Other Agency:  Dangerous  Resisted Arrest  Suicidal  Other

Signature of Arresting Officer: [Redacted] Name of Arresting Officer (Print): MCGARRY, M. T. I.D.#: 649

Transporting Officer: [Redacted] I.D.#: 649

Name Verification (Printed by Arrestee): [Redacted] (PRINT)

Witness here if subject signed with an "X": [Redacted]

COURT  STATE ATTORNEY  AGENCY  CENTRAL RECORDS  JAIL  CRIME ANALYSIS  DEFENDANT

SCANNED SEP 25 2020

PROBABLE CAUSE AFFIDAVIT

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

3 JUVENILE N

Agency ORI Number <b>FL 0500200</b>	Agency Name <b>BOCA RATON POLICE DEPARTMENT</b>	Agency Report Number <b>3   2   2020-010674</b>
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) <b>COLAVECCHIO, NICHOLAS T</b>	Alias	Race <b>W</b>	Sex <b>M</b>	Date of Birth <b>07/04/1974</b>
Charge Description <b>784.048(2) STALKING</b>	Charge Description			

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
Local Address (Street, Apt. Number) (City) (State) (Zip)	Phone	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 23 day of September, 2020 at 19:12 (Specifically include facts constituting cause for arrest.)

On September 23, 2020, I was in full police uniform, driving a marked police vehicle for the City of Boca Raton Police Services Department assigned as Y43. At 1700 hours I responded to [REDACTED] in reference to a stalking case.

Upon my arrival, I contacted [REDACTED] who has been in contact with the BRPD in the past about issues with her ex-boyfriend Nicholas Colavecchio.

Under case 2016-15010, Nicholas was arrested for a violation of a restraining order against [REDACTED] in which he had also violated his probation that was set from this arrest. Under case 2019-11628 [REDACTED] reported that Nicholas was attempting to contact her through her daughter's social media account. No restraining order was in place at that time, and after I spoke with Nicholas, he advised he will not contact [REDACTED].

Today, according to [REDACTED] she has received numerous voicemail messages from her ex-boyfriend Nicholas Colavecchio, which had been deleted. Unknown to [REDACTED] her phone still had messages from the following dates 7/12, 7/15, 09/02 and 09/17. I listened to the messages and Nicholas was rambling about how he missed [REDACTED]. How he thought about her every day. How his current marriage is a joke and he should have married her.

[REDACTED] then showed me 30-50 missed calls from an "No Caller ID." [REDACTED] stated, "I get 10-20 calls a day and sometimes more from the No Caller ID. I know its him, but there is no way to prove it." [REDACTED] then showed me 42 emails that were sent to her work email from Nicholas as of August 29th to today. Each email was Nicholas pleading to get [REDACTED] back.

[REDACTED] was very upset and crying while I spoke to her about these incidents. [REDACTED] stated "I'm in fear of what he may do. I'm in fear every day of my safety as well as my

SWORN AND SUBSCRIBED BEFORE ME	SIGNATURE OF ARRESTING / INVESTIGATING OFFICER
<u>BM73V</u> <b>MCINNIS, BRYAN MICHAEL</b> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)	<u>[Signature]</u> <b>MCGARRY, MATTHEW THOMAS (649)</b> NAME OF OFFICER (PLEASE PRINT)
<u>09/23/2020</u> DATE	<u>09/23/2020</u> DATE





**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: 2020022564	Date: 09/24/20
	Specialist Name/ID: J. Beck/9007