

0470207

21MM-900  
ARREST / NOTICE TO APPEAR

3385

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

OBTS Number	Agency ORI Number <b>0500200</b>		Agency Name <b>Boca Raton Police Department</b>		Agency Report Number (N.T.A.'s only) <b>3   2   2021-001382</b>	
Charge Type: Check as many as apply	<input type="checkbox"/> 1. Felony	<input checked="" 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
Location of Arrest (Including Name of Business) <b>5881 TOWN BAY DR, 5881 TOWN BAY DR 915, BOCA RATON, FL</b>				Location of Offense (Business Name, Address) <b>5881 TOWN BAY DR 915, BOCA RATON, FL 33486</b>		
Date of Arrest <b>02/03/2021</b>	Time of Arrest <b>01:46</b>	Booking Date <b>02/03/2021</b>	Booking Time <b>01:46</b>	Jail Date	Jail Time	Location of Vehicle <b>N/A</b>

Name (Last, First, Middle) <b>UWANAWICH, SANDY</b>		Alias:					Alias (Name, DOB, Soc. Sec. #, Etc.)	
Race W - White B - Black	Sex <b>W</b>	Date of Birth <b>08/11/1983</b>	Height <b>5'04</b>	Weight <b>290</b>	Eye Color <b>BROWN</b>	Hair Color <b>BLACK</b>	Complexion <b>LIGHT</b>	Build <b>Large</b>
Local Address (Street, Apt. Number) <b>5881 TOWN BAY DR 915, BOCA RATON, FL 33486</b>				(City)	(State)	(Zip)	Phone <b>(954) 200-4133</b>	Residence Type: 1 City 3 Florida 2 County 4 Out of State
Permanent Address (Street, Apt. Number) <b>5881 TOWN BAY DR 915, BOCA RATON, FL 33486</b>				(City)	(State)	(Zip)	Phone <b>(954) 200-4133</b>	Address Source <b>SUBJECT</b>
Business Address (Name, Street) <b>SELF,</b>				(City)	(State)	(Zip)	Phone <b>(954) 200-4133</b>	Occupation <b>Seamstress</b>
D/L Number, State <b>US20780837910 / FL</b>	Soc. Sec. Number	INS Number	Place of Birth (City, State) <b>FL United States Of America</b>		Citizenship <b>US</b>			

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"/> Legal Custodian	Name (Last, First, Middle)	Residence Phone
Address (Street, Apt. Number)	(City) (State)	Business Phone
Notified by: (Name)	Date	Time
Released To: (Name)	Relationship	Date
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.		
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 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
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Charge Description <b>DOMESTIC SIMPLE BATTERY</b>	Statute Violation Number <b>784.03(1A1)</b>	Violation of ORD #
Drug Activity <b>N</b>	Drug Type	Amount / Unit
Offense #	Counts	Domestic Violence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Warrant / Capias Number	Bond	

Health / Apparent Physical Condition of Defendant <b>GOOD</b>	Any knowledge of the following: <input type="checkbox"/> Mental <input type="checkbox"/> Escapes <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input checked="" type="checkbox"/> Injuries
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
Transported By <b>SORIA</b>	Date Transported <b>02/03/2021</b>
Time Transported <b>03:17</b>	Other

<input type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court	Location (Court, Room) <b>South County 200 W Atlantic Ave Delray Beach, FL 33444</b>
<input checked="" type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.	Court Date and Time
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

HOLD for Other Agency	Signature of Arresting Officer <i>[Signature]</i>	Name Verification (Printed by Arrestee) <b>FEB 3 AM 4:20</b>
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal	<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other	(PRINT)
Transporting Officer <b>SORIA</b>	I.D. # <b>850</b>	Agency <b>BRPD</b>
Pouch #	Witness here if subject signed with an "X".	

PROBABLE CAUSE AFFIDAVIT

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

1 JUVENILE

OBTS Number	Agency ORI Number <b>FL 0500200</b>		Agency Name <b>BOCA RATON POLICE DEPARTMENT</b>	Agency Report Number <b>3   2   2021-001382</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>UWANAWICH, SANDY</b>	Alias	Race <b>W</b>	Sex <b>F</b>	Date of Birth <b>08/11/1983</b>
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Charge Description <b>784.03(1A1) DOMESTIC SIMPLE BATTERY</b>	Charge Description
Charge Description	Charge Description

Victim's Name (Last, First, Middle) <b>ADAMS, BOBBY L</b>	Race <b>W</b>	Sex <b>M</b>	Date of Birth <b>04/10/1979</b>
Local Address (Street, Apt. Number) <b>5881 TOWN BAY DR 915, BOCA RATON, FL 33486</b>	(City)	(State)	(Zip)
Business Address (Name, Street) <b>UNEMPLOYED</b>	(City)	(State)	(Zip)
Phone <b>(954) 246-2510</b>	Address Source	Phone <b>(561) 335-4184</b>	Occupation <b>MECHANIC</b>

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 **3** day of **February**, **2021** at **02:41** (Specifically include facts constituting cause for arrest.)

On 02/03/2021 at approximately 0105 hours I responded to 5881 Town Bay Dr. in reference to a physical domestic disturbance in progress.



Upon arrival I observed a white male, later identified as Bobby Adams sitting in the driver seat of a red Ford Expedition (FL Tag GVEE06). Standing beside him was a white female, who Bobby identified as his wife, Sandy Uwanawich. It should be noted that she was standing between Bobby and the open driver car door. Also present was Adam's 17 year old son, David Adams.

I made contact with Sandy who stated that she and her and her ex-husband had gotten into a verbal argument. She then relayed that he had taken her phone and went to his vehicle to leave the area. She followed him out to the car and climbed over him to get her phone back. Sandy stated it never got physical and that she only touched Bobby in an attempt to retrieve her phone. It should be noted that Sandy had slight bruising to her knuckles on her right hand and blood on the palm of both hands.

I then made contact with Bobby who also denied the altercation being physical. It should be noted that Bobby had fresh bruising, lacerations, and a swollen eye to the left side of his face. Bobby refused medical attention and stated the wounds were self-inflicted due to him being a horrible person to Sandy. It should be noted that Bobby did not have any bruising, or blood to his hands. Photos of Bobby's injuries were taken via my BRPD issued BWD which was tagged and submitted into BRPD evidence.

Ofc. Rochetti spoke to David who stated that at no point the altercation was physical and was uncooperative. David was on his cellphone with an unknown subject during our time on scene.

I then made contact with a witness, Zoe Rypl whose bedroom window overlooked where the

SWORN AND SUBSCRIBED BEFORE ME  <b>HARDING, BRANDON BLAZE</b> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) <b>02/03/2021</b> DATE	 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER <b>SORIA, KEITH CESAR (850)</b> NAME OF OFFICER (PLEASE PRINT) <b>02/03/2021</b> DATE
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SCANNED  
FEB 03 2021

PROBABLE CAUSE AFFIDAVIT  
SUPPLEMENT

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

**1** JUVENILE

Agency ORI Number <b>FL 0500200</b>	Agency Name <b>BOCA RATON POLICE DEPARTMENT</b>	Agency Report Number <b>3   2   2021-001382</b>
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Charge Type: Check as many as apply	<input type="checkbox"/> 1. Felony	<input checked="" type="checkbox"/> 3. Misdemeanor	<input type="checkbox"/> 5. Ordinance	Special Notes:
	<input type="checkbox"/> 2. Traffic Felony	<input type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 6. Other	

Name (Last, First, Middle) <b>UWANAWICH, SANDY</b>	Alias	Race <b>W</b>	Sex <b>F</b>	Date of Birth <b>08/11/1983</b>
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altercation took place. Zoe stated she heard a banging and observed Sandy slamming the car door open yelling "give me back my phone". She then observed Sandy punching and slapping Bobby numerous times. Zoe stated she did not see Bobby strike Sandy. She did observe Sandy's body halfway in the vehicle at one point climbing over him looking for the phone. Zoe provided a sworn statement that was recorded on my BRPD issued BWD which was tagged and submitted into BRPD evidence.

Based on my investigation, witness statement, and totality of circumstances, I determined Sandy Uwanawich was the primary aggressor and developed probable cause to arrest Uwanawich per F.S.S. 784.03 (1A1) Domestic Simple Battery after she struck Bobby Adams numerous times in the face. Sandy was transported to BRPD for processing and transported to the Palm Beach County Jail.

NOT A CERTIFIED COPY

SWORN AND SUBSCRIBED BEFORE ME  <b>HARDING, BRANDON BLAZE</b> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) <b>02/03/2021</b> DATE	 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER <b>SORIA, KEITH CESAR (850)</b> NAME OF OFFICER (PLEASE PRINT) <b>02/03/2021</b> DATE	PAGE <b>2 OF 2</b>
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# 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#: 2021-001382 Agency: BRPD  
Offense: Battery Domestic  
Suspect/Offender: Sandy UWANGWICH  
D.O.B. 8-11-83 Race: White Sex: Female

2. Warrant#(s): \_\_\_\_\_

3.a. Victim's name: Bobby Adams D.O.B. 4/10/79 Race: White Sex: male  
Address: 3881 Town Bay Dr APT 915  
City: Boca Raton State: FL Zip: 33486  
Home#: 754-246-2510 Work#: \_\_\_\_\_ Other: \_\_\_\_\_

b. Victim's next of kin, friend or neighbor: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home#: \_\_\_\_\_ Work#: \_\_\_\_\_ Other: \_\_\_\_\_

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

Signature of person waiving notification: \_\_\_\_\_

Printed name of person waiving notification: \_\_\_\_\_

Officer's Name: Soriga I.D.# 850 Date: SCANNED  
White/Corrections or State Attorney (Warrant Application) Yellow/Warrants Section Pink/Central Records FEB 03 2021

SUSPECT/OFFENDER: \_\_\_\_\_

(FOR WARRANTS USE ONLY)

COURT CASE/WARRANT#:



**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"/>		** (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"/>	119.071 (3)(A), 119.071 (3)(B)(1-3C)	Other: Security at the Jail..(Security of locations Housed at the jail)..	
	<input type="checkbox"/>	119.071(2)(J)	Other: MARSY'S LAW PROTECTED INFORMATION REGARDING VICTIM(S).	

**REVIEW COMPLETED BY**

Booking Number: 2021002791	Date: 2/3/2021
	Specialist Name/ID: M. Tooks #8557

**SCANNED**  
**FEB 03 2021**