

0544577
Mansys Law OR FL. Const. Art.1 § 16(b)

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

178
Check if Supplement is Attached

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

ADMINISTRATIVE	OBT Number		Agency ORI Number FLO: 5 0 0 0 0 0 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 0 6 - 23-128909				
	Charge Type: Check as many as apply: ☐ 1. Felony ☐ 2. Traffic Felony ☒ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other		If Weapon Seized Enter Type: N/A		Multiple Clearance Indicator 01						
	Location of Arrest (including Name of Business) 11858 LAKE SHORE PL				Location of Offense (Business Name, Address)						
	Date of Arrest 11/14/23	Time of Arrest 1611	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle NONE				
DEFENDANT	Name (Last, First, Middle) BYLCIW, DAVID		Alias (Name, DOB, Soc. Sec. #, Etc.)								
	Race W - White B - Black O - Oriental/Asian W	Sex M	Date of Birth 03/10/1970	Height 6'00"	Weight 215	Eye Color BROWN	Hair Color BROWN	Complexion MEDIUM	Build LARGE		
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)					Marital Status Single	Religion Catholic	Indication of: Alcohol Influence Drug Influence Y ☐ N ☐ Unk ☐			
	Local Address (Street, Apt. Number) 11858 LAKE SHORE PL		(City) NORTH PALM BEACH FL 33408	(State)	(Zip)	Mobile Phone 561-573-3752		Residence Type: 1. City 2. County 3. Florida 4. Out of State 2			
JUVENILE	Permanent Address (Street, Apt. Number)		(City)	(State)	(Zip)	Phone		Address Source FCIC/NCIC/DAVID			
	Business Address (Name, Street)		(City)	(State)	(Zip)	Phone		Occupation			
	D/L Number, State B420167700900		Soc. Sec. Number		INS Number		Place of Birth (City, State) Hartford, CT		Citizenship U.S.A.		
	Co-Defendant (Last, First, Middle)		Race	Sex	Date of Birth	☐ 1. Arrested ☐ 2. At Large		☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile			
CHARGE	Co-Defendant (Last, First, Middle)		Race	Sex	Date of Birth	☐ 1. Arrested ☐ 2. At Large		☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile			
	Parent Legal Custodian Other:		Name (Last) (First) (Middle)		Residence Phone						
	Address (Street, Apt. Number)		(City)	(State)	(Zip)	Business Phone					
	Notified by: (Name)		Date	Time	Juvenile Disposition 1. Handled/Processed within Dept. and Released. 2. TOT HRS/DYS 3. Incarcerated						
CHARGE	Released To: (Name)		Relationship		Date	Time					
	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 (561) 355-6511) informed of any change of address. ☐ Yes, by: (Name) ☐ No (Reason)					School Attended		Grade			
	Property Crime? ☐ Yes ☐ 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. 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
CHARGE	Charge Description Domestic Battery		Counts 1	Domestic Violence ☐ Y ☐ N	Statute Violation Number 784.03		Violation of ORD # NONE				
	Drug Activity N	Drug Type N	Amount / Unit N/A	Offense # 23-128909	Warrant / Capias Number		Bond				
	Charge Description		Counts	Domestic Violence ☐ Y ☐ N	Statute Violation Number		Violation of ORD #				
	Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond				
CHARGE	Charge Description		Counts	Domestic Violence ☐ Y ☐ N	Statute Violation Number		Violation of ORD #				
	Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond				
	Charge Description		Counts	Domestic Violence ☐ Y ☐ N	Statute Violation Number		Violation of ORD #				
	Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond				
NOTICE TO APPEAR	Location (Court, Room Number, Address)										
	Court Date and Time Month Day Year Time A.M. PM										
	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. 11/14/23										
	Signature of Defendant (or Juvenile and Parent/Custodian)					Date Signed					
ADMIN	I consent to receive text reminders of court date(s) and times for this case by automated technology to the mobile number identified above. I understand that standard text message rates may apply, and that I may revoke this consent via the text message system if I choose.										
	HOLD for other agency		Signature of Arresting Officer x Cpl. Roode #9707		Name Verification (Printed by Arrestee) SCANNED		PAGE				
	☐ Dangerous ☐ Suicidal	☐ Resisted Arrest ☐ Other	Name of Arresting Officer (Print) Cpl. Roode		I.D. # 9707	Agency PBSO		Witness here if subject signed with an "X"			
	Intake Deputy L. B. D. U. M.	I.D. #	Pouch #	Transporting Officer Cpl. Roode	I.D. # 9707	Agency PBSO		1 OF 1			

OBTS Number		PROBABLE CAUSE AFFIDAVIT		1 Arrest 2 N.T.A.		3. Request for Warrant 4. Request for Capias		1	Juvenile	N
ADMIN	Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 06- 23-128909					
	Charge Type: Check as many as apply ☐ 1 Felony ☐ 2 Traffic Felony ☒ 3 Misdemeanor ☐ 4 Traffic Misdemeanor ☐ 5 Ordinance ☐ 6 Other		Special Notes							
CHARGES	Name (Last, First, Middle) BYLCIW, DAVID		Alias		Race W		Sex M		Date of Birth 03/10/1970	
	Domestic Battery		784.03							
VICTIM	Victim's Name (Last, First, Middle)				Race W		Sex M		Date of Birth	
	Local Address (Street, Apt. Number)		(City) (State) (zip)		Phone		Address Source CT DL			
	Business Address (Name, Street)		(City) (State) (zip)		Phone		Occupation UNK			
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 _____ ☒ was found to have committed the below acts resulting from my (described) investigation admitting to the below facts On the <u>14th</u> day of <u>November</u> 20<u>23</u> at <u>1605</u> ☐ A.M. ☒ P.M. (Specifically include facts constituting cause for arrest)										
☒ Marsy's Law Cvi FL Const Art 1 § 16(b) On 11/14/2023 I responded to a domestic battery call at _____, unincorporated _____ unincorporated Palm Beach County, FL. Contact was made with victim/ _____ who had a minor bloody laceration to his lip. _____ explained he was visiting his _____ Walter Bylciw D.O.B. 8/29/1936 from out of town and was approached by his _____ David G. Bylciw D.O.B. 3/10/1970. _____, Walter (_____), and Steven R. Bylciw D.O.B. 7/30/1967 each explained to deputies David entered the residence in anger, approached _____ and hit _____. _____ told deputies, David started a verbal altercation with him in the living room then approached him within close distance then headbutted him in his face striking his face including chin/lip. _____ expressed he had a medical procedure one month prior and was too weak to defend himself. _____ told deputies David put him in a headlock during the altercation, and his _____ Walter attempted to stop David from putting him in the choke hold. _____ had a minor laceration on his lip. _____ David, and Steven's _____ Walter told deputies he tried to stop David from choking _____ by pulling his arm. Steven told deputies he witnesses the altercation of David attacking _____. Contact was made with David at his residence four homes away in the same neighborhood. David had red, discolored marks on his nose which was consistent to the headbutt. David explained he did not know his _____ were staying at his _____ residence and he went over there to check on his _____ and thing got crazy. David stated "He did that to me". He resides in the neighborhood and looks after his _____. Based on my investigation, David Bylciw D.O.B. 3/10/1970 was found to be the primary aggressor and in violation to F.S.S. 784.03 simple domestic battery. David was arrested, placed in handcuffs which were checked for proper fit and doubled locked then transported to the Palm Beach County Jail located at 3228 Gun Club Rd, West Palm Beach, FL without incident.										
ADMINISTRATIVE	STATE OF FLORIDA COUNTY OF PALM BEACH Cpl. Roode (ID #) <u>9707</u> (Signature of Arresting/Investigative Officer)									
	The foregoing instrument was sworn to or affirmed and subscribed before me this <u>14TH</u> day of <u>NOVEMBER</u> 20<u>23</u> by <u>Cpl. Roode</u> <u>9707</u> (Print name of Arresting/Investigative Officer, who is personally known to me and/or produced identification. Type of identification produced <u>KNOWN</u> <u>LEO</u>)									
	<u>[Signature]</u> Notary Public, Clerk of Court, Officer (F.S.S. 117.10)									
	SCANNED PAGE 1 OF 1 NOV 15 2023									

VICTIM NOTIFICATION FORM

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

- **Homicide** (Ch. 782)
- **Attempted Murder**
- **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.
- **Sexual Offense** (Ch. 794)
- **Attempted Sexual Offense**
- **Dating Violence**

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

1. Incident Report #: 23-128909 Agency: PBSO
Offense: Domestic Battery
Suspect/Offender: Name (Last) BYLCIW, (First) DAVID (Middle) _____
D.O.B. 03/10/1970 Race: W Sex: M

2. Warrant #(s): _____

3.a. Victim's name: [REDACTED] D.O.B. [REDACTED] Race: W Sex: M
Address: [REDACTED]
City: _____ State: _____ Zip: _____
Home #: [REDACTED] Work #: _____ Other: _____

b. Victim's next of kin, friend or neighbor: (Last) Bylciw (First) Steven
Address: [REDACTED]
City: _____ State: _____ Zip: _____
Home #: [REDACTED] 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:** I request the information on this form be kept confidential (applicable only to sexual battery, stalking, child abuse, harassment or domestic violence cases).

Signature of person waiving notification: _____

Printed name of person waiving notification: Name (Last First) BYLCIW KARL

Deputy's Name: Cpl. Roode I.D. # 9707 Date: 11/14/23

White = Corrections or State Attorney (Warrant Application)

Yellow = Warrants Section

Pink = Central Records

SUSPECT/OFFENDER BYLCIW.

DAVID

(FOR WARRANTS USE ONLY)

COURT CASE/WARRANT #:

SCANNED



Palm Beach County Sheriff's Office

Florida State Statute Exemption Sheet

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	☐	119.071(4)(c)	Undercover personnel	
	☐	119.071(2)(e)	Confession	
Public Info. Exemptions	☒	FL Const. Art. I, s. 16(b)(5)	Marsy's Law – victim information shall be redacted. The term "victim" also includes the victim's lawful representative, the parent or guardian of a minor, or the next of kin of a homicide victim. The term "victim" does not include the accused (ref. page 99 of the CRTM for additional information)	2-4
	☐	119.071(2)(j)	Home/employment telephone number, home/employment address, or personal assets of a person who has been the victim of sexual battery, aggravated child abuse, aggravated stalking, harassment, aggravated battery or domestic violence	
	☐	119.0712(2)	Personal information contained in a motor vehicle record	
	☐	316.650(11)	Driver information contained in a uniform traffic citation	
	☐	119.071(4)(d)2.a.	Home addresses, telephone numbers, dates of birth, and photographs of active/former LE personnel, spouses, and children	
Florida Rules of Judicial Administration 2.420	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers	2
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses	
	☐			
	☐			
Other	☐			
	☐			
	☐			
	☐			

REVIEW COMPLETED BY

Booking Number: 2023030168

Date: 11/15/2023

Specialist Name/ID#: ANGELA PINKNEY/7796

SCANNED

NOV 15 2023