23MM73MB

ARREST / NOTICE TO APPEAR

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

1 JUVENILE

ADMINISTRATION

OBTS Number

Agency ORI Number: 0500200
Agency Name: Boca Raton Police Department
Agency Report Number (N.T.A.'s only): 3 2 2023-000096

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: UNARMED
Multiple Clearance Indicator:

Location of Arrest (Including Name of Business): ~~5130 NW 8TH AVE~~, 5130 NW 8TH AVE 425, BOCA RATON, FL
Location of Offense (Business Name, Address): 5130 NW 8TH AVE 425, BOCA RATON, FL

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
01/03/2023	~~03:41~~ 2344	01/03/2023	03:51	01/03/2023	03:45	N/A

DEFENDANT

Name (Last, First, Middle): CAREY, MELANIE
Alias (Name, DOB, Soc. Sec. #, Etc.): Alias:

Race (W - White, B - Black, I - American Indian, O - Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	F	07/11/1977	5'05	130	BROWN	BROWN	LIGHT	SMALL

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description): TATT R HIP / BUTTERFLY
Marital Status: U
Religion: CHRISTIAN
Indication of: Alcohol Influence Yes ☐ No ☒ Unk. ☐ Drug Influence
Local Address (Street, Apt. Number) (City) (State) (Zip): 789 W YAMATO RD 524, BOCA RATON, FL 33431
Phone: (561) 788-2122
Residence Type: 1. City 2. County 3. Florida 4. Out of State: 1
Permanent Address (Street, Apt. Number) (City) (State) (Zip): 789 W YAMATO RD 524, BOCA RATON, FL 33431
Phone: (561) 788-2122
Address Source: FL DL
Business Address (Name, Street) (City) (State) (Zip): SELF EMPLOYED,
Phone:
Occupation:
D/L Number, State: C600540777510 / FL
SID Number: [redacted]
INS Number:
Place of Birth (City, State): PATTERSON, NJ,
Citizenship: U.S.

CO-DEF

Co-Defendant Name (Last, First, Middle) | Race | Sex | Date of Birth | ☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile

Co-Defendant Name (Last, First, Middle) | Race | Sex | Date of Birth | ☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile

JUVENILE

☐ Parent ☐ Other: ☐ Legal Custodian
Name (Last, First, Middle):
Residence Phone:
Address (Street, Apt. Number) (City) (State) (Zip): CINU BOND
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 Time

DOMESTIC

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.
☐ Yes, by: ☐ No:

School Attended: VICTIM NOTIFICATION REQUIRED
Grade:
Property Crime? ☐ Yes ☒ No
Description of Property:

CODE

Drug Activity: N. N/A F. 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 H. Hallucinogen M. Marijuana O. Opium/Deriv. S. Synthetic U. Unknown Equipment Z. Other

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #
BATTERY- BATTERY (SIMPLE)	784.03(1A1)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
	N	/		1	☒ Y ☐ N		

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
		/			☐ Y ☐ N		

MARSY'S LAW INVOKED
Confidential Info Contained

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
		/			☐ Y ☐ N		

INTAKE

Health / Apparent Physical Condition of Defendant: GOOD
Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries
Explain:

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

PROPERTY - Received By: OWIRKA
Released By: OWIRKA
Released To: PBCJ

Transported By: OWIRKA
Date Transported: 01/03/2023
Time Transported: 03:46
Other:

NOTICE TO APPEAR

☐ 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:

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

No Photo Available

ADMIN

HOLD for Other Agency
☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other
Property Receipt # I.D. # Pouch #
Signature of Arresting Officer
Name of Arresting Officer (Print): OWIRKA, J. M. I.D. # 866
Transporting Officer: OWIRKA I.D. # 866 Agency: BOCA
Name Verification (Printed by Arrestee) (PRINT)
Witness here if subject signed with an "X".

PAGE 1 OF 1

[redacted]

0537143 JAN 04 2022 3527

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PROBABLE CAUSE AFFIDAVIT

ADMIN

OBTS Number:

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

JUVENILE:

Agency ORI Number	Agency Name	Agency Report Number
FL FL0500200	BOCA RATON POLICE DEPARTMENT	3 2 2023-000096

Charge Type. Check as many as apply: ☐ 1. Felony ☒ 3. Misdemeanor ☐ 5. Ordinance ☐ 2. Traffic Felony ☐ 4. Traffic Misdemeanor ☐ 6. Other

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
CAREY, MELANIE		A	F	07/11/1977

CHARGE

Charge Description	Charge Description
784.03(1A1) BATTERY- BATTERY (SIMPLE)	
Charge Description	Charge Description

[redacted]

PROBABLE CAUSE STATEMENT

The Person taken into custody . . .

☐ committed the below acts in my presence.

☐ confessed to _____ admitting to the below facts.

☐ was observed by _____ who told _____ that he/she saw the arrested person committ the below acts.

☒ was found to have committed the below acts, resulting from my (described) investigation.

On the 3 day of January, 2023 at 02:44 (Specifically include facts constituting cause for arrest.)

On 01/03/2023 at approximately 0206 hours, I responded to 5130 NW 8th Ave #425 in reference to a domestic disturbance.

On arrival, I met with the victim, [redacted] stated he went out for drinks with friends and when he returned to his hotel room, his [redacted] of a year and a half, Melanie Carey, was angry with him for drinking. [redacted] stated Carey then took a closed fist and punched him in the left side of his chest. There was no observable marking on [redacted] chest.

Then I spoke to Carey. Carey stated [redacted] returned to the hotel room drunk and falling over. [redacted] was so unsteady that he began to fall toward Carey which prompted her to push him away from her. It should be noted while speaking with [redacted], it appeared he was under the influence of alcohol, but was steady on his feet and while walking.

Finally, I spoke to Carey`s son, 6-year-old Kaiden Hakoura. Keiden demonstrated to me he knew the difference between a truth and a lie. Keiden then told me [redacted] arrived back to the hotel room where Carey was angry with [redacted] for being out so late. Keiden then stated [redacted] sat down on the bed and Carey pushed [redacted] in the chest.

Based on my investigation, I believe Melanie Carey is the primary aggressor of this incident by pushing [redacted] in the chest. I then placed Carey under arrest for Simple Domestic Battery (F.S.S 784.03(1A1)). Carey was placed into handcuffs which were checked for tightness then double locked. Carey was transported to BRPD for processing, then PBCJ for booking.

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

VAN CAMP, JEFFERY ALAN
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

01/03/2023
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

OWIRKA, JONATHAN MICHAEL (866)
NAME OF OFFICER (PLEASE PRINT)

01/03/2023
DATE

SCANNED

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

JAN 04 2022

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.

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

1. Incident Report#: 2023 000096 Agency: BOCA RATON PD
   Offense: SIMPLE BATTERY
   Suspect/Offender: Melanie Carey
   D.O.B. 7-11-77 Race: W Sex: F

2. Warrant#(s): _____

3.a. [redacted]

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

SCANNED
JAN 04 2023

Signature of person waiving notification: _____

Printed name of person waiving notification: _____

Officer's Name: OWIRKA I.D.# 866 Date: 1-3-23

White/Corrections or State Attorney (Warrant Application) Yellow/Warrants Section Pink/Central Records

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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	☐	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	☐	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	☐	119.071(4)(c)	Undercover personnel.	
	☐	119.071(2)(f)	Confidential informants (CIs).	
	☐	119.071(2)(e)	Confession.	
Public Info. Exemptions	☐	985.04(1)	Juvenile offender records.	
	☐	119.071(h)(i)	Assets of a crime victim.	
	☐	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	☐	394.4615(7)	Mental health information.	
	☐	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)	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	☐	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	☐	(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	☐		Other:	
	☐		Other:	

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REVIEW COMPLETED BY

Booking Number: 2023000173	**Date:** 1/4/23
	Specialist Name/ID: T.Howard/7185

SCANNED
JAN 04 2022