ARREST / NOTICE TO APPEAR

ADMINISTRATION

OBTS Number:

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

JUVENILE:

Agency ORI Number: 0500400

Agency Name: Delray Beach Police Department

Agency Report Number (N.T.A.'s only): 40 21-010000

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: 1

Location of Arrest (Including Name of Business): WARRANT REQUEST

Location of Offense (Business Name, Address): 4771 W ATLANTIC AVE, DELRAY BEACH, FL 33445

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle

DEFENDANT

Name (Last, First, Middle): LOPEZ-MUNOZ, NICOLE LYNN

Alias (Name, DOB, Soc. Sec. #, Etc.): Alias: MUNOZ, NICOLE LYNN

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	01/20/1984	5'06	135	BROWN	BROWN	MEDIUM	THIN

Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description):

Marital Status: M

Religion:

Indication of: Alcohol Influence ☒ Yes ☐ No ☐ Unk. ☐ Drug Influence

Local Address (Street, Apt. Number) (City) (State) (Zip): 288 LAKE MONTEREY CIR, BOYNTON BEACH, FL 33426

Phone: (954) 747-4775

Residence Type: 1. City 2. County 3. Florida 4. Out of State

Permanent Address (Street, Apt. Number) (City) (State) (Zip): 288 LAKE MONTEREY CIR, BOYNTON BEACH, FL 33426

Phone: (954) 747-4775

Address Source:

Business Address (Name, Street) (City) (State) (Zip):

Phone: (561) 704-1688

Occupation:

D/L Number, State: L125632845200 / FL

Soc. Sec. Number: [redacted]

INS Number:

Place of Birth (City, State):

Citizenship: US

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):

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

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 | Grade

Property Crime? ☐ Yes ☒ No | Description of Property | Value of Property

CODE

Drug Activity: N. N/A P. Possess S. Sell B. Buy T. Traffic R. Smuggle D. Deliver E. Use K. Disperses/ 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

Charge Description	Statute Violation Number	Violation of ORD #
CHILD NEGLECT	827.03(1)(e) and (2)(d)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
	N	/	21-010000	1	☐ Y ☒ N		

CHARGE

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		/			☐ Y ☐ N		

CHARGE

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

INTAKE

Health / Apparent Physical Condition of Defendant:

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 | Released By | Released To

Transported By | Date Transported | Time Transported | Other

2021 SEP 28 PM 2:22

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 COMTEMPT 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

Intake Deputy | I.D. # | Pouch #

Signature of Arresting Officer: M. C. 1114

Name of Arresting Officer (Print): VICKERY, MEGAN N | I.D. #: 1114

Transporting Officer | I.D. # | Agency: Warrant Request

Name Verification (Printed by Arrestee) (PRINT)

Witness here if subject signed with an "X".

PAGE 1 OF 1

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

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PROBABLE CAUSE AFFIDAVIT

ADMIN

OBTS Number:

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

JUVENILE:

Agency ORI Number	Agency Name	Agency Report Number
FL 0500400	DELRAY BEACH POLICE DEPARTMENT	40 21-010000

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
LOPEZ-MUNOZ, NICOLE LYNN	MUNOZ, NICOLE LYNN	W	F	01/20/1984

CHARGES

Charge Description	Charge Description
827.03(1)(e) and (2)(d) CHILD NEGLECT	
Charge Description	Charge Description

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
[redacted]	W	F	01/20/1984

Address (Number, Street)	(Zip)	Phone	Address Source
		(954) 747-4775	
Business Address (Name, Street) (City) (State)	(Zip)	Phone	Occupation
		(561) 704-1688	

PROBABLE CAUSE STATEMENT

The undersigned certifies and swears that he/she has just and resonable 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.

☐ 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 8 day of September, 2021 at 08:54 (Specifically include facts constituting cause for arrest.)

The following incident occurred in the City of Delray Beach, Palm Beach County, Florida.

On August 21st, 2021, Delray Beach Police Officers responded to 4771 W Atlantic Ave (Publix) in reference to an intoxicated female. An anonymous caller called 911 after finding a female laying in the bushes and a young boy wandering and running around the parking lot. It was 7:30PM and Publix parking lot is a busy parking lot with numerous vehicles traveling through.

Upon arrival, officers made contact with Delray Beach Fire Rescue who were already on scene and had the female sitting in the passenger seat of her vehicle. DBFR advised that a white female was observed sitting in the bush area of the busy Publix parking lot while [redacted] roamed the parking lot alone. The intoxicated female was identified by her Florida driver's license as Nicole Lopez-Munoz and [redacted] was identified as [redacted]. Nicole was observed seemingly intoxicated and sitting in the passenger seat of a white Volkswagen sedan that she had driven to the plaza. Consensual encounter was made with Nicole who was not very forthcoming with information as she would stare off into space or forget questions that officers asked her. Nicole was not stable on her feet and had to sit in her vehicle as she was being treated. She stated that she had drank an unknown amount of wine prior to falling asleep in the bushes. Nicole told DBFR she "drove to Publix where she had "enough" amount of wine" and stated that she "made bad decisions". A family member had to respond to safely drive both Nicole and [redacted] home.

It is apparent that [redacted] Nicole Lopez-Munoz intentionally inflicted physical neglect against [redacted] by consuming an unknown alcoholic beverage or substance and failed to care for [redacted]. This behavior could have resulted in physical injury to the child. [redacted] is 6 years old, cannot provide food, water, or shelter for himself. He did not have a phone nor a way to contact anyone for help. [redacted] was hiding in the

ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

A. SALA #1027

NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

09/07/2021

DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

VICKERY, MEGAN N (1114)

NAME OF OFFICER (PLEASE PRINT)

09/07/2021

DATE

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

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ADMIN

OBTS Number	PROBABLE CAUSE AFFIDAVIT SUPPLEMENT	1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias	3	JUVENILE

Agency ORI Number	Agency Name	Agency Report Number
FL 0500400	DELRAY BEACH POLICE DEPARTMENT	4 | 0 | 21-010000

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Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
LOPEZ-MUNOZ, NICOLE LYNN	MUNOZ, NICOLE LYNN	W	F	01/20/1984

PROBABLE CAUSE STATEMENT

back seat upon police arrival and stated he was scared. Nicole drove her vehicle under the influence and admitted to drinking wine which led her to become incapacitated leaving [redacted] to fend for himself. Nicole was not in a physical or mental state to be able to care for [redacted]

Based on the above facts, probable cause exists to charge the defendant, Nicole Lopez-Munoz with Child Neglect in accordance with FSS 827.03(1)(e).

NOT A CERTIFIED COPY

ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

A. SALA # 1027
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

09/07/2021
DATE

1114
SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

VICKERY, MEGAN N (1114)
NAME OF OFFICER (PLEASE PRINT)

09/07/2021
DATE

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