

0481429

758

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

Juvenile ☒ N

ADMINISTRATIVE	OBTS Number		Agency OR Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06- 16132047				
	Charge Type: Check as many as apply: ☐ 1. Felony ☐ 2. Traffic Felony ☒ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other		Weapon Seized / Type 1. Yes 2. No		Multiple Clearance Indicator 01						
	Location of Arrest (Including Name of Business) 17880 KEY VISTA WAY, BOCA RATON, FL 33496				Location of Offense (Business Name, Address) SAME AS ARREST						
	Date of Arrest 9/27/16	Time of Arrest 1006	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle				
DEFENDANT	Name (Last, First, Middle) ARNETT, ANDREW										
	Alias (Name, DOB, Soc. Sec. #, Etc.)										
	Race W - White I - American Indian B - Black O - Oriental/Asian W	Sex M	Date of Birth 5/12/1974	Height 5'10"	Weight 168	Eye Color BRN	Hair Color BRN	Complexion MED			
	Build MED										
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) SCARS ON BOTH LEGS				Marital Status MARRIED	Religion NONE	Indication of: Alcohol Influence Drug Influence ☐ Y ☒ N ☐ Unk.				
	Local Address (Street, Apt. Number) 17880 KEY VISTA WAY		(City) BOCA RATON, FL.	(State) FL.	(Zip) 33496	Phone (561) 212-3045	Residence Type: 1. City 2. County 3. Florida 4. Out of State 2				
	Permanent Address (Street, Apt. Number) SAME AS LOCAL		(City)	(State)	(Zip)	Phone ()	Address Source LICENSE				
	Business Address (Name, Street)		(City)	(State)	(Zip)	Phone ()	Occupation BUSINESS OWNER				
	D/L Number, State FL		Soc. Sec. Number [REDACTED]		INS Number		Place of Birth (City, State) SUMTER, SOUTH CAROLINA	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 ☐ 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						
	Released To: (Name)		Relationship		Date	Time					
	The above address provided by ☐ defendant and / or ☐ defendant's parents, the child and / or parent was told to keep the Juvenile Court Clerk (Phone 355-2526) 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. Synthetics	U. Unknown Z. Other
	Charge Description SIMPLE BATTERY(DOMESTIC)		Counts 1	Domestic Violence ☐ Y ☒ N	Statute Violation Number 784.031A1		Violation of ORD #				
	Drug Activity N	Drug Type N	Amount / Unit 0	Offense # 16132047	Warrant / Capias Number		Bond NONE				
	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					
Charge Description		Counts	Domestic Violence ☐ Y ☒ N	Statute Violation Number		Violation of ORD #					
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond					
Location (Court, Room Number, Address)											
Court Date and Time Month 9 Day 27 Year 2016 Time 5:30 AM ☒ 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 9/27/16											
Signature of Defendant (or Juvenile and Parent /Custodian) [Signature]											
Date Signed											
HOLD for other Agency Name:			Signature of Arresting Officer [Signature]			Name Verification (Printed by Arrestee)					
☐ Dangerous ☒ Suicidal ☐ Resisted Arrest ☐ Other:			Name of Arresting Officer (Print) TODD BAKER			(PRINT)					
I.D. #			ID # 6202			PAGE					
Pouch #			Transporting Officer TODD BAKER			OF					
I.D. #			ID # 6202			Agency PBSO					
Witness here if subject signed with an -X"											

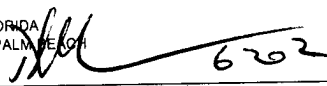
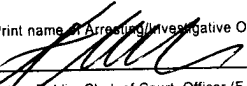
DISTRIBUTION: WHITE - COURT COPY

GREEN - STATE ATTORNEY

YELLOW - AGENCY

PINK - AGENCY

GOLD - DEFENDANT (N.T.A.'s ONLY)

		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1		Juvenile N	
ADMIN	OBTS Number		Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 06- 16132047				
	Charge Type: Check as many as apply.		☐ 1. Felony ☐ 2. Traffic Felony		☒ 3. Misdemeanor ☐ 4. Traffic Misdemeanor		☐ 5. Ordinance ☐ 6. Other		Special Notes:		
DEF	Name (Last, First, Middle) ARNETT, ANDREW					Alias		Race W	Sex M	Date of Birth 5/12/1974	
CHARGES	Charge Description SIMPLE BATTERY(DOMESTIC)					784.031A1		Charge Description			
	Charge Description							Charge Description			
VICTIM								Race	Sex	Date of Birth	
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 <u>27</u> day of <u>SEPTEMBER</u> 20<u>16</u> at <u>08:10</u> ☒ A.M. ☐ P.M. (Specifically include facts constituting cause for arrest.) I WAS DISPATCHED TO THE DISTRICT 7 SUBSTATION, LOCATED AT 17901 STATE ROAD 7, IN UNINCORPORATED BOCA RATON, PALM BEACH COUNTY, IN REFERENCE TO A DELAYED DOMESTIC BATTERY REPORT. UPON MY ARRIVAL, I MADE CONTACT WITH [REDACTED] WHO REPORTED THAT SHE HAD AN ARGUMENT WITH HER HUSBAND ANDREW ARNETT LAST NIGHT ON 9/26/16 AT ABOUT 1900 HOURS. DURING THE ARGUMENT, ANDREW GRABBED [REDACTED] BY BOTH ARMS AND SHE TOLD HIM TO LET GO OF HER. WHEN ANDREW WOULD NOT RELEASE HER, [REDACTED] YELLED FOR HER SON [REDACTED] [REDACTED] STATED, "MY MOM CALLED ME, AND WHEN I WENT INTO THE ROOM MY DAD HAD HIS HANDS AROUND MY MOM AND WAS SQUEEZING." [REDACTED] STATED, THAT THE REOCCURRING ARGUMENTS ARE CONCERNING A FAMILY TRUST AND THAT ANDREW IS NOT MAKING GOOD DECISIONS REGARDING THEIR FAMILY. THEY HAVE BEEN MARRIED FOR FIFTEEN YEARS AND HAVE RESIDED IN THEIR CURRENT RESIDENCE FOR THE LAST TWO YEARS. [REDACTED] ADDED, THAT SEVERAL ARGUMENTS OCCURRED DURING THAT EVENING, AND ANDREW PARKED THE LAND ROVER BEHIND HER CADILAC SO THAT SHE COULD NOT DRIVER THE CAR, TOOK HER HOUSE AND CAR KEYS, AND TOOK HER CELLULAR PHONE AWAY FROM HER. THIS MORNING ON 9/27/16, [REDACTED] HAD TO ASK THE COMMUNITY SECURITY COMPANY TO DRIVE HER AND THEIR THREE CHILDREN TO THE DISTRICT 7 SUBSTATION TO MAKE THE REPORT. BASED ON MY INVESTIGATION, PROBABLE CAUSE EXISTS FOR THE ARREST OF ANDREW ARNETT FOR INTENTIONALLY GRABBING [REDACTED] AGAINST HER WILL, WITNESSED BY [REDACTED] WHICH RESULTED IN NO INJURY TO [REDACTED]											
ADMINISTRATIVE	STATE OF FLORIDA COUNTY OF PALM BEACH  TODD BAKER (Signature of Arresting/Investigative Officer)										
	The foregoing instrument was sworn to or affirmed and subscribed before me this <u>27</u> day of <u>SEPTEMBER</u> 20 <u>16</u> by <u>TODD BAKER</u> (Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced <u>PERSONALLY KNOWN</u>										
Notary Public, Clerk of Court, Officer (F.S.S. 117.10) 											
PAGE 1 OF 1											

**PALM BEACH COUNTY SHERIFF'S OFFICE
DOMESTIC VIOLENCE PROBABLE CAUSE SUPPLEMENTAL FORM
(SUBMIT WITH STATE ATTORNEY'S COPY OF PROBABLE CAUSE AFFIDAVIT)**

CASE NUMBER# 16132047

DEFENDANT'S NAME: ARNETT, ANDREW

DEFENDANTS STATEMENT ☒ YES ☐ NO (IF YES: ☐ WRITTEN ☐ TAPED ☒ ORAL)

SYNOPSIS: THAT HIS WIFE PUSHED HIS CHEST AND SHE WAS IN HIS FACING YELLING AT HIM, THAT HE WAS TRYING TO PULL HIS WIFE OFF OF HIM WHEN HIS SON WALKED IN.

VICTIM'S NAME: [REDACTED]

VICTIM'S STATEMENTS: ☒ YES ☐ NO (IF YES) ☒ WRITTEN ☐ TAPED ☐ ORAL

OBSERVATIONS OF VICTIM: (PHYSICAL & EMOTIONAL) SHE WAS CRYING AND WAS CONCERNED ABOUT WHERE THE CHILDREN WOULD STAY.

RELATIONSHIP BETWEEN VICTIM AND SUSPECT: HUSBAND AND WIFE

PHOTOGRAPHS: SCENE: ☐ YES ☒ NO VICTIM (S): ☐ YES ☒ NO

911 CALL: ☐ YES ☒ NO WHO CALLED: _____

WEAPON USED: ☐ YES ☒ NO TYPE: _____

MEDICAL TREATMENT: ☐ YES ☒ NO

AT SCENE: ☐ YES ☒ NO PARAMEDICS: _____

AT HOSPITAL: ☐ YES ☒ NO HOSPITAL: _____ PHYSICIAN: _____

ARE CHILDREN LIVING IN HOME: ☒ YES ☐ NO

NAME: _____

NAME: _____

NAME: _____

WAS ACT(S) COMMITTED IN PRESENCE OF MINOR(S): ☒ YES ☐ NO (IF YES ☐ SAME AS ABOVE OR SPECIFY)

NAME: [REDACTED] DOB: [REDACTED]

NAME: _____ DOB: _____

NAME: _____ DOB: _____

DCF NOTIFIED: (IF CHILD ABUSE) ☒ YES ☐ NO

VICTIM PREGNANT- ☐ YES ☒ NO

PRIOR HISTORY OF DOMESTIC VIOLENCE: ☐ YES ☒ NO

ALCOHOL OR DRUGS INVOLVED: ☐ YES ☒ NO

VIOLATION OF RESTRAINING ORDER: ☐ YES ☒ NO CASE #: _____

ALTERNATE VICTIM CONTACT INFORMATION: (IF VICTIM DECIDES TO LEAVE RESIDENCE)

RELATIVE/FRIEND NAME: NONE

PHONE: _____

RELATIVE/FRIEND ADDRESS: _____

VICTIM NOTIFICATION FORM

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

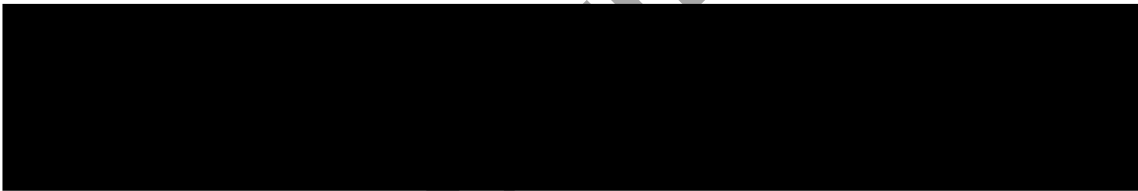
- **Homicide** (Ch. 782)
- **Attempted Murder**
- **Stalking** (F.S. 784.048)
- **Sexual Offense** (Ch. 794)
- **Attempted Sexual Offense**

- **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 #: 16132047 Agency: PBSO
Offense: SIMPLE BATTERY(DOMESTIC)
Suspect/Offender: ARNETT, ANDREW
D.O.B. 5/12/1974 Race: W Sex: M

2. Warrant # (s): _____

3.a. 

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:** 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: _____

Deputy's Name: TODD BAKER

I.D.# 6202

Date: 9/27/16

SUSPECT/OFFENDER: _____

(FOR WARRANTS USE ONLY)

COURT CASE/WARRANT# _____