

17CF10123

		ARREST / NOTICE TO APPEAR Juvenile Referral Report				1. Arrest 3. Request for Warrant 2. N.T.A. 4. Request for Capias		1	Juvenile	N	
ADMINISTRATION	OBTS Number	Agency ORI Number FL 0500300				Agency Name BOYNTON BEACH POLICE DEPT.		Agency Report Number 34-17-059966			
	Charge Type: Check as many as Apply.	<input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony		<input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor		<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		If Weapon Seized Enter Type		Multiple Clearance Indicator	
	Location of Arrest (Including Name of Business) 1700 NORTH FEDERAL HIGHWAY, BOYNTON BCH, FL 33435					Location of Offense (Business Name, Address) 200 EAST GATEWAY BLVD, BOYNTON BCH, FL 33435					
DEFENDANT	Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle				
	10/18/2017	0352									
	Name (Last, First, Middle) WILLIAMS, COLBY, STOCKTON					Alias (Name, DOB, Soc. Sec. #, Etc)					
	W - White B - Black	I - American Indian O - Oriental / Asian	Race W	Sex M	Date of Birth 05/18/1981	Height 5'9	Weight 200	Eye Color BLUE	Hair Color BROWN	Complexion LIGHT	Build MED
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)						Marital Status SINGLE	Religion NONE	Indication of: Alcohol Influence <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Unk Drug Influence <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Unk		
	Local Address (Street, Apt. Number)				(City)	(State)	(Zip)	Phone () - () - ()	Residence Type 1. City 3. Florida 2. County 4. Out of State		
	Permanent Address (Street, Apt. Number)				(City)	(State)	(Zip)	Phone () - () - ()	Address Source FL DL		
	Business Address (Street, Apt. Number)				(City)	(State)	(Zip)	Phone () - () - ()	Occupation		
	D/I Number, State W452117811780, FL			Soc. Sec. Number		INS Number		Place of Birth FT LAUDERDALE, F US		Citizenship	
	CO-DEF	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 <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor	
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 <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor			
JUVENILE	<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> 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 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 561-355-2526) informed of any change of address: <input type="checkbox"/> Yes, By (Name) <input type="checkbox"/> No: (Reason)						School Attended		Grade		
CODE	Property Crime? <input type="checkbox"/> Yes <input 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. Dispense/ Distribute	M. Manufacture Produce/ Cultivate	Z. Other	Drug Type N. N/A A. Amphetamine	B. Barbituate C. Cocaine E. Heroin	H. Hallucinogen M. Marijuana O. Opium/Deriv.	P. Paraphernalia/ Equipment S. Synthetic
CHARGE	Charge Description FLEEING AND ELUDING				Counts 1	Domestic Violence <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Statute Violation Number 316.1935(2)		Violation of ORD#		
	Drug Activity N	Drug Type N	Amount/Unit N/A		Offense # 17-059966	Warrant/Capias Number		Bond 207 OCT 18 AM 8:36			
CHARGE	Charge Description RESIST ARREST WITHOUT VIOLENCE				Counts 1	Domestic Violence <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Statute Violation Number 843.02		Violation of ORD#		
	Drug Activity N	Drug Type N	Amount/Unit N/A		Offense # 17-059966	Warrant/Capias Number		Bond			
CHARGE	Charge Description DRIVING WHILE LICENSE SUSPENDED				Counts 1	Domestic Violence <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Statute Violation Number 322.34(2A)		Violation of ORD#		
	Drug Activity N	Drug Type N	Amount/Unit N/A		Offense # 17-059966	Warrant/Capias Number		Bond			
CHARGE	Charge Description				Counts	Domestic Violence	Statute Violation Number		Violation of ORD#		
	Drug Activity	Drug Type	Amount/Unit		Offense #	Warrant/Capias Number		Bond			
NOTICE TO APPEAR	<input type="checkbox"/> Instruction No. 1 Mandatory Appearance in Court <input type="checkbox"/> Instruction No. 2 You need not appear in Court but must Comply with instruction on reverse side.		Location (Court, Room Number, Address) South County Courthouse, 200 West Atlantic Ave, Delray Beach, FL 33444								
			Court Date and Time		Month	Day	Year	Time	SCARED OCT 18 2017 M. <input type="checkbox"/> P.M.		
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 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						
ADMIN.	HOLD for other Agency Name:		Signature of Arresting Officer			Name Verification (Printed by Arrestee) (PRINT)					
	<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal		<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:		Name of Arresting Officer (Print) A. GRIGORIAN			I.D. # 921		BU#109863	
	Intake Deputy	I.D. #	Pouch #	Transporting Officer	I.D. #	Agency	Witness here is subject Signed with an "X".		Page 1 OF 1		

OBTS Number	PROBABLE CAUSE AFFIDAVIT		1 Arrest 2 NTA	3 Request for Warrant 4 Request for Capias	1	Juvenile	N
Agency ORI Number FL0500300	Agency Name BOYNTON BEACH POLICE DEPT.	Agency Report Number 34-17-059966					
Charge Type Check all that Apply	<input checked="" type="checkbox"/> 1 Felony <input 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	Special Notes			
Name (Last, First, Middle) WILLIAMS, COLBY, STOCKTON	Alias	Race W	Sex M	Date of Birth 05/18/1981			
Charge Description FLEEING AND ELUDING	Charge Description RESIST ARREST WITHOUT VIOLENCE						
Charge Description DRIVING WHILE LICENSE SUSPENDED	Charge Description						
Victim's Name (Last, First, Middle) STATE OF FLORIDA	Race	Sex	Date of Birth				
Local Address (Street, Apt Number)	(City)	(State)	(Zip)	Phone	Address Source		
Business Address (Name, Street)	(City)	(State)	(Zip)	Phone 561-742-6100	Occupation		
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..							
<input checked="" type="checkbox"/> Committed the below acts in my presence. <input type="checkbox"/> Was observed by Who told That he/she saw the arrested person commit the below acts. <input type="checkbox"/> Confessed to Admitting the below facts <input checked="" type="checkbox"/> Was found to have committed the below acts, resulting from my (described) investigation.							
On The 18 Day Of OCTOBER 20 17 At 03:41 <input checked="" type="checkbox"/> A.M. <input type="checkbox"/> P.M.							

On Wednesday, October 18, 2017 at approximately 0341 hours I was in the area of 200 West Gateway Blvd in my BBPD marked vehicle #4670. While on patrol I observed a white Volkswagen GLI bearing FL Tag #GHGR99 traveling eastbound on West Gateway Blvd. A records check of the FL tag revealed that the vehicle registered owner (W/M Colby Williams) driver's license was suspended as of 08/15/2016. I then pulled next to the vehicle and confirmed that the Williams was the driver of the vehicle.

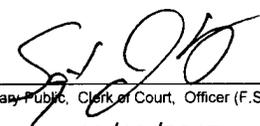
At the 200 block of East Gateway Blvd I activated my emergency red/blue lights and sirens in an attempt to conduct a traffic stop on the above listed vehicle for the above listed traffic offense. Williams then disregarded my attempts and began accelerating while failing to pull over. Williams continued eastbound on East Gateway Blvd towards North Federal Highway. Williams then traveled southbound on North Federal Highway while continuing to travel at a high rate of speed and failing to pull over. Williams then attempted to make a left turn into the Manatee Bay apartment complex but was traveling too fast and crashed into a telephone pole just south of the apartment complex entrance.

Williams then fled from the vehicle on foot southbound from the crash. A short foot pursuit ensued and Williams was taken into custody without incident.

Based on the aforementioned I find probable cause to charge Williams with 1 count of Fleeing and Eluding pursuant to F.S.S. 316.1935(2), 1 count of Resist Arrest without Violence pursuant to F.S.S. 843.02 and 1 count of Driving while license suspended pursuant to F.S.S. 322.34(2a). Williams was transported to BBPD for processing and later transferred to PBCJ. The above listed vehicle was towed from the scene by Blakes Towing.

SCANNED
OCT 18 2017

The foregoing instrument was sworn to or affirmed and subscribed before me

 _____ Notary Public, Clerk of Court, Officer (F.S.S. 117.10) 10/18/2017 Date	 _____ (Signature of Arresting / Investigative Officer) A. GRIGORIAN _____ (Print name of Arresting/Investigative Officer) 10/18/2017 Date
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