

0504463

19MM5632427

ARREST / NOTICE TO APPEAR

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

1

JUVENILE

AD M I N I S T R A T I O N	OBT Number		Agency ORI Number 0500400		Agency Name Delray Beach Police Department		Agency Report Number (N.T.A.'s only) 4 0 19-000531		1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias		1	JUVENILE
D E F E N D A N T	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 Hands/fist/feet/teeth		Multiple Clearance Indicator		1			
	Location of Arrest (Including Name of Business) 16 E ATLANTIC AVE, DB, 33444						Location of Offense (Business Name, Address) 16 E ATLANTIC AVE, DELRAY BEACH, FL 33444					
	Date of Arrest 01/11/2019		Time of Arrest 01:09		Booking Date 01/11/2019		Booking Time 01:19		Jail Date		Jail Time	
	Name (Last, First, Middle) VITARELLI, FRANK ANTHONY 3		Alias		Alias (Name, DOB, Soc. Sec. #, Etc.)							
C O D E F	Race W - White B - Black O - Oriental/Asian W		Sex M		Date of Birth 06/07/1999		Height 5'11		Weight 140		Eye Color GREEN	
	Hair Color BROWN		Complexion LIGHT		Build THIN		Marital Status		Religion		Indication of: Alcohol Influence Yes ☐ No ☒ Unk. ☐ Drug Influence Yes ☐ No ☒ Unk. ☐	
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)						Residence Type: 1. City 2. County 3. Florida 4. Out of State 1		Address Source FL/DL			
	Local Address (Street, Apt. Number) 15533 REDINGTON DR, REDINGTON BEACH, FL 33708						Phone (727) 748-6664		Business Address (Name, Street) 15533 REDINGTON DR, REDINGTON BEACH, FL 33708		Phone (727) 748-6664	
J U V E N I L E	Business Address (Name, Street) 15533 REDINGTON DR, REDINGTON BEACH, FL 33708		Phone (727) 748-6664		Occupation Student		D/L Number, State V364261992070 / FL		INS Number		Place of Birth (City, State) CLEARWATER, FL	
	Citizenship US		C-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			
	☐ Parent ☐ Other: _____ Name (Last, First, Middle)		Residence Phone		☐ Legal Custodian Address (Street, Apt. Number) (City) (State) (Zip)		Business Phone					
C O D E F	Notified by: (Name)		Date		Time		JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT IAC 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.		School Attended		Grade		Property Crime? ☐ Yes ☒ No		Description of Property		Value of Property	
	☐ Yes, by: _____ ☐ No		Drug Activity N. N/A P. Possess		S. Sell B. Buy T. Traffic		R. Smuggle D. Deliver E. Use		A. Dispose/ Distribute		M. Manufacture/ Produce/ Cultivate	
C H A R G E	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 Description SIMPLE BATTERY(TOUCH OR STRIKE)		Statute Violation Number 784.03(1A1)		Violation of ORD #							
	Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence ☐ Y ☒ N	
	Charge Description		Statute Violation Number		Violation of ORD #							
C H A R G E	Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence ☐ Y ☒ N	
	Charge Description		Statute Violation Number		Violation of ORD #							
	Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence ☐ Y ☒ N	
	Charge Description		Statute Violation Number		Violation of ORD #							
I N T A K E	Health / Apparent Physical Condition of Defendant		Any knowledge of the following: ☐ Mental ☐ Escape Risk ☒ Medical ☐ Deformities ☒ Injuries		Explain: RIGHT HAND CUTS		PROPERTY - Received By		Released By		Released To	
	Check which apply: ☐ Released O.R. ☐ Released to Parent/Guardian ☒ T.O.T. County Jail ☐ Posted Bond ☐ South County Mental Health		Transported By		Date Transported // : : :		Time Transported		Other			
	☒ 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 01/31/2019 08:30:00							
	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.											
N O T I C E T O A P P E A R	Signature of Defendant (or Juvenile and Parent/Custodian)		Date Signed									
	HOLD for Other Agency ☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other		Signature of Arresting Officer SITZ, IAN		Name Verification (Printed by Verifier) 01/11 AM 8:10		(PRINT)				PAGE 1 OF 1	
	Intake Deputy DB THOMPSON		Transporting Officer Meredith, Jordan		ID # 1159		Agency DBPD					
	Witness here if subject signed with an "X".											

Meredith 1159

OBTS Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	JUVENILE
ADMINISTRATIVE	Agency ORI Number FL 0500400		Agency Name DELRAY BEACH POLICE DEPARTMENT		Agency Report Number 4 0 19-000531				
	Charge Type Check as many as apply ☐ 1. Felony ☒ 3. Misdemeanor ☐ 5. Ordinance ☐ 2. Traffic Felony ☐ 4. Traffic Misdemeanor ☐ 6. Other				Special Notes				
CHARGES	Name (Last, First, Middle) VITARELLI, FRANK ANTHONY 3		Alias		Race W	Sex M	Date of Birth 06/07/1999		
	Charge Description 784.03(1A1) SIMPLE BATTERY(TOUCH OR STRIKE)		Charge Description						
VICTIM	Victim's Name (Last, First, Middle) MINSKY, DARREN JUSTIN				Race W	Sex M	Date of Birth 10/22/1995		
	Local Address (Street, Apt. Number) (City) (State) (Zip) 1460 SW CELLINI AVE, PORT ST LUCIE, FL 34953		Phone (917) 656-3158		Address Source				
	Business Address (Name, Street) (City) (State) (Zip)		Phone		Occupation				
<p>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.</p> <p>The Person taken into custody . . .</p> <p>☒ committed the below acts in my presence. ☒ was observed by DANNIELLE MASCHERNIC who told OFC SITZ that he/she saw the arrested person commit the below acts.</p> <p>☐ confessed to _____</p> <p>☒ was found to have committed the below acts, resulting from my (described) investigation.</p> <p>admitting to the below facts.</p> <p>On the 11 day of January, 2019 at 01:21 (Specifically include facts constituting cause for arrest.)</p>									
<p>The following event occurred in the City of Delray Beach, Palm Beach County, Florida.</p> <p>On 1/11/19 Ofc Batista and I were standing in front of 16 E Atlantic Ave (Honey) when we observed a white male fall from the front door of the bar. The white male identified by FL/DL as Darren Minsky was bleeding from the mouth, and stated an unknown white male punched him. Several unknown bystanders pointed to a white male who was walking west bound from the bar with no shirt on. I made contact with the white male identified by FL/DL as Frank Anthony Vitarelli III who appeared extremely intoxicated, and had lacerations on his right hand. Vitarelli stated that he got into a verbal altercation with someone in the bar, but does not remember anything after that.</p> <p>I made contact with Danielle Maschenic (witness) on scene who provided the following sworn statement: She was dancing nearby Minsky when Vitarelli started eyeing the girl Minsky was dancing with. Vitarelli made eye contact with Minsky, and walked away for a moment. Vitarelli returned and punched Minsky in the face with his right fist.</p> <p>I made contact with Minsky outside of Honey who provided the following sworn statement: He was dancing with his girlfriend, and her friends when Vitarelli started staring at his girlfriend. Vitarelli and Minsky made eye contact, and Vitarelli approached Minsky getting directly in front of his face. Minsky and Vitarelli yelled at each other briefly until Vitarelli punched him in the mouth. Minsky advised he did not retaliate but was quickly grabbed by security who escorted him outside. Minsky sustained a small cut on his lip which was bleeding and had a small amount of swelling to the bottom of his lip.</p> <p>Based on the above facts the defendant Frank Anthony Vitarelli III is charged with one count of Simple Battery pursuant to F.S.S. 784.03(1A1).</p>									
<p>SWORN AND SUBSCRIBED BEFORE ME</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>FERRERI, GARY</p> <p>NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)</p> <p>01/11/2019</p> <p>DATE</p> </div> <div style="width: 45%;"> <p>SITZ, IAN (1107)</p> <p>SIGNATURE OF ARRESTING / INVESTIGATING OFFICER</p> <p>NAME OF OFFICER (PLEASE PRINT)</p> <p>01/11/2019</p> <p>DATE</p> </div> </div>									
<div style="display: flex; justify-content: space-between; align-items: center;"> <div>PAGE</div> <div>1 OF 2</div> </div>									

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P.I.O.

A D M I N I S T R A T I V E	OBS Number		PROBABLE CAUSE AFFIDAVIT SUPPLEMENT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	JUVENILE
	Agency ORI Number FL 0500400		Agency Name DELRAY BEACH POLICE DEPARTMENT		Agency Report Number 4 0 19-000531					
	Charge Type: Check as many as apply.		☐ 1. Felony ☒ 3. Misdemeanor ☐ 5. Ordinance ☐ 2. Traffic Felony ☐ 4. Traffic Misdemeanor ☐ 6. Other		Special Notes:					
	Name (Last, First, Middle) VITARELLI, FRANK ANTHONY 3		Alias		Race W	Sex M	Date of Birth 06/07/1999			

The following incident was captured on my department issued body worn camera.

NOT A CERTIFIED COPY

A D M I N I S T R A T I V E	SWORN AND SUBSCRIBED BEFORE ME		 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER	
	FERRERI, GARY		SITZ, IAN (1107)	
	NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S. 112.40)		NAME OF OFFICER (PLEASE PRINT)	
	01/11/2019 DATE		01/11/2019 DATE	

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COURT

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P.I.O.



**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.	
	☐	(xli) 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:	

REVIEW COMPLETED BY

Booking Number: 2019001253	Date: 1/11/2019
	Specialist Name/ID: LR/ #6673