

OBTS Number			ARREST / NOTICE TO APPEAR						1974						
Agency ORI Number			Agency Name			Agency Report Number (N.T.A.'s only)			1 JUVENILE						
0500200			Boca Raton Police Department			3 2 2017-010785									
Charge Type: <input type="checkbox"/> 1. Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance Check as many as apply. <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other						If Weapon Seized Enter Type Hands, Feet, Fist, Teeth			Multiple Clearance Indicator						
Location of Arrest (Including Name of Business)			Location of Offense (Business Name, Address)												
1751 N MILITARY TRAIL BOCA RATON FL			1751 N MILITARY TRL, BOCA RATON, FL 33486												
Date of Arrest		Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle								
08/01/2017		03:43													
Name (Last, First, Middle) MELLO DA COSTA, PHILIP JOHNSON															
Alias: 															
Race W - White B - Black		Sex I - American Indian O - Oriental/Asian	Date of Birth 01/11/1985	Height 5'11	Weight 185	Eye Color brown	Hair Color brown	Complexion Med		Build Med					
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)						Marital Status		Religion			Indication of Alcohol Influence Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk <input type="checkbox"/> Drug Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk <input type="checkbox"/>				
Local Address (Street, Apt. Number) 1148 SW 11TH ST, BOCA RATON, FL 33486						(City)		(State)	(Zip)	Phone (561) 702-6669		Residence Type: 1. City <input type="checkbox"/> 3. Florida <input type="checkbox"/> 2. County <input type="checkbox"/> 4. Out of State <input type="checkbox"/>			
Permanent Address (Street, Apt. Number) 1148 SW 11TH ST, BOCA RATON, FL 33486						(City)		(State)	(Zip)	Phone (561) 702-6669		Address Source			
Business Address (Name, Street)						(City)		(State)	(Zip)	Phone		Occupation			
D/L Number, State M432670850110 / FL			Soc. Sec. Number		INS Number			Place of Birth (City, State) ESPIRITO SANTO, Brazil		Citizenship					
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 checked="" 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			
<input type="checkbox"/> Parent <input type="checkbox"/> Other: _____						Name (Last, First, Middle)						Residence Phone			
<input type="checkbox"/> Legal Custodian															
Address (Street, Apt. Number) Or						(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 <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 355-2526) informed of any change of address.						School Attended						Grade			
<input type="checkbox"/> Yes, by: <input type="checkbox"/> No:						Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						Description of Property		Value of Property	
C O D E Drug Activity S. Sell R. Smuggle K. Disperses/ M. Manufacture/ Z. Other						Drug Type N. N/A B. Buy D. Deliver E. Use		B. Barbiturate C. Cocaine A. Amphetamine		H. Hallucinogen M. Marijuana E. Heroin		P. Paraphernalia/ Equipment O. Opium/Deriv. S. Synthetic		U. Unknown Z. Other	
C H A R G E Charge Description BATTERY						Statute Violation Number 784.03(1A1)						Violation of ORD #			
Drug Activity		Drug Type		Amount / Unit		Offense # 2017-010785		Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Warrant / Capias Number		Bond	
C H A R G E Charge Description						Statute Violation Number						Violation of ORD #			
Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Warrant / Capias Number		Bond	
C H A R G E Charge Description						Statute Violation Number						Violation of ORD #			
Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Warrant / Capias Number		Bond	
I N T A K E Health / Apparent Physical Condition of Defendant						Any knowledge of the following: <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries Explain:									
Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> T.O.T. County Jail <input type="checkbox"/> Posted Bond <input type="checkbox"/> South County Mental Health						PROPERTY - Received By						Released By		Released To	
A P P E A R Transported By						Date Transported						Time Transported		Other	
N O T I C E <input checked="" 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 instructions on Page 2.						Location (Court, Room) South County 200 W Atlantic Ave Delray Beach, FL 33444						Court Date and Time 09/07/2017 08:30:00		C	
T O A P P E A R 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.														No Photo Available	
Signature of Defendant (or Juvenile and Parent/Custodian)												Date Signed			
A D M I N I HOLD for Other Agency						Signature of Arresting Officer						Name Verification (Printed by Arrestee)			
												(PRINT)			
<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other						Name of Arresting Officer (Print) GREEN, KENNETH J.						I.D. # 735			
Intake Deputy						ID. #		Pouch #		Transporting Officer Ernie		I.D. # 797		Agency CRPD	
												Witness here if subject signed with an "X".			

SCANNED
AUG - 3 2017

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OBTS Number		PROBABLE CAUSE AFFIDAVIT			1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	JUVENILE
Agency ORI Number FL 0500200		Agency Name BOCA RATON POLICE DEPARTMENT			Agency Report Number 3 2 2017-010785			
Charge Type: Check as many as apply: 1. Felony 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) MELLO DA COSTA, PHILIPE JOHNSON		Alias			Race W	Sex M	Date of Birth 01/11/1985	
Charge Description 784.03(1A1) BATTERY		Charge Description						
Charge Description		Charge Description						
Victim's Name (Last, First, Middle) ROSENBERG, OREN DANI		Race W	Sex M	Date of Birth 04/23/1971				
Local Address (Street, Apt. Number) 21954 TIDEWATER TER 201, BOCA RATON, FL 33433		(City)	(State)	(Zip)	Phone (561) 212-7712	Address Source		
Business Address (Name, Street) NIPPERS		(City)	(State)	(Zip)	Phone (561) 338-4111	Occupation MANAGER		
<p>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.</p> <p>The Person taken into custody . . .</p> <p><input type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> was observed by _____ who told _____</p> <p><input type="checkbox"/> confessed to _____ that he/she saw the arrested person committ the below acts.</p> <p><input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the <u>1</u> day of <u>August</u>, <u>2017</u> at <u>03:43</u> (Specifically include facts constituting cause for arrest.)</p>								
<p>At approximately 0316hrs on 08/01/17 I responded to 1751 N Military Trail, Nippers, regarding a W/M causing a disturbance at the bar. Upon arrival I made contact with the manager, Oren Rosenberg, who stated that W/M Philip Mello Da Costa was trying to fight people inside the bar, and that he tried to choke Rosenberg.</p> <p>According to both Rosenberg and the witness, Natalie Boyer, Mello Da Costa was drinking at the bar and being loud and obnoxious. He threw an ashtray and other items, and continued to cause a disturbance. Mello Da Costa then turned his attention to unknown patrons to his right and he began yelling at them. Mello Da Costa then stood up and appeared to try to fight another patron. At this point Rosenberg approached Mello Da Costa to tell him that he needed to leave the bar. Rosenberg attempted to guide him away from the bar area and toward the door. Mello Da Costa lunged at Rosenberg and placed him in a head lock for a brief time before Rosenberg was able to slip out of it. At this time numerous people intervened in the incident, and were able to separate the parties as they fell to the ground.</p> <p>Once the parties are separated Mello Da Costa went outside to the front of the bar along with staff from Nippers, where I made initial contact with them. Mello Da Costa stated he did not do anything wrong and was defending himself. He seemed intoxicated and was difficult to communicate with. When I attempt to ask him any questions pertaining to the investigation, he remained belligerent and continued to only repeat his actions were taken in self defense.</p> <p>Security footage from inside the bar supports what Rosenberg and Boyer told me and wrote in their witness statements. Based on the information provided to me and my investigation I placed Mello Da Costa under arrest for Florida State Statute 784.03(1A1) Simple Battery. He was taken to Boca Raton Police Department for processing and later transported to Palm Beach County Jail. All statements and video were submitted into</p>								
<p>SWORN AND SUBSCRIBED BEFORE ME</p> <p>HARDING, BRANDON BLAZE NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)</p> <p>08/01/2017 DATE</p> <p>SCANNED AUG - 3</p>								
<p>SIGNATURE OF ARRESTING / INVESTIGATING OFFICER</p> <p>GREEN, KENNETH JOHN (735) NAME OF OFFICER (PLEASE PRINT)</p> <p>08/01/2017 DATE</p>								

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.

OBTS Number		PROBABLE CAUSE AFFIDAVIT SUPPLEMENT			1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	JUVENILE
A D M I N	Agency ORI Number FL 0500200	Agency Name BOCA RATON POLICE DEPARTMENT	Agency Report Number 3 2 2017-010785					
Charge Type: Check as many as apply. <input type="checkbox"/> 1. Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other						Special Notes:		
D E F P R O B A B L E C A U S E S T A T E M E N T	Name (Last, First, Middle) MELLO DA COSTA, PHILIPE JOHNSON			Alias	Race W		Sex M	Date of Birth 01/11/1985
evidence.								

NOT A CERTIFIED COPY

ADMINISTRATIVE	SWORN AND SUBSCRIBED BEFORE ME HARDING, BRANDON BLAZE NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) 08/01/2017 DATE	SCANNED SIGNATURE OF ARRESTING / INVESTIGATING OFFICER GREEN, KENNETH JOHN (735) NAME OF OFFICER (PLEASE PRINT) 08/01/2017 DATE	PAGE 2 OF 2
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COURT

STATE ATTORNEY

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CRIME ANALYSIS

P. I. O.