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OBTS Number		Agency ORI Number <b>0501700</b>		Agency Name <b>Jupiter Police Department</b>		Arrest / NOTICE TO APPEAR <b>Arrest</b>		1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias		1		JUVENILE	
Charge Type: Check as many as apply		<input 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		Report Number (N.T.A.'s only) <b>17-004065</b>		If Weapon Seized		Enter Type <b>NONE</b>	
Location of Arrest (Including Name of Business) <b>1203 TOWN CENTER DR, JUPITER, FL 33458</b>						Location of Offense (Business Name, Address) <b>1203 TOWN CENTER DR, JUPITER, FL 33458</b>						Multiple Clearance Indicator	
Date of Arrest <b>08/20/2017</b>		Time of Arrest <b>02:20</b>		Booking Date <b>08/20/2017</b>		Booking Time <b>02:35</b>		Jail Date <b>//</b>		Jail Time		Location of Vehicle	
Name (Last, First, Middle) <b>JAMES, ROBERT DUNCAN</b>						Alias (Name, DOB, Soc. Sec. #, Etc.)						Alias:	
Race W - White B - Black O - Oriental/Asian		Sex <b>W</b>		Date of Birth <b>10/06/1974</b>		Height <b>6'04</b>		Weight <b>185</b>		Eye Color <b>HAZEL</b>		Hair Color <b>BROWN</b>	
Complexion <b>FAIR</b>		Build <b>Medium</b>		Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)		Marital Status <b>D</b>		Religion <b>OTHER</b>		Indication of: Alcohol Influence Yes <input type="checkbox"/> No <input type="checkbox"/> Unk. <input type="checkbox"/> Drug Influence Yes <input type="checkbox"/> No <input type="checkbox"/> Unk. <input type="checkbox"/>		Residence Type: 1. City 2. County 3. Florida 4. Out of State <b>3</b>	
Local Address (Street, Apt. Number) <b>6409 ORANGE BAY AVE, ORLANDO, FL 32819</b>						Phone <b>(716) 799-2487</b>						Address Source <b>DL</b>	
Permanent Address (Street, Apt. Number) <b>6409 ORANGE BAY AVE, ORLANDO, FL 32819</b>						Phone <b>(716) 799-2487</b>						Occupation <b>Self Employed</b>	
Business Address (Name, Street) <b>SELF EMPLOYED,</b>						Phone <b>(716) 799-2487</b>						DL Number, State <b>JS20764743660 / FL</b>	
Soc. Sec. Number <b>[REDACTED]</b>						INS Number						Place of Birth (City, State) <b>VANCOUVER, Canada</b>	
Co-Defendant Name (Last, First, Middle)						Race						Sex	
Co-Defendant Name (Last, First, Middle)						Race						Sex	
Parent <input type="checkbox"/> Other <input type="checkbox"/> Legal Custodian <input type="checkbox"/>						Name (Last, First, Middle)						Residence Phone	
Address (Street, Apt. Number)						(City) (State) (Zip)						Business Phone	
Notified by: (Name)						Date						Time	
Released To: (Name)						Relationship						Date	
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	
Property Crime? <input type="checkbox"/> Yes <input checked="" 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. Disperse/ 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 Description <b>DISORDERLY CONDUCT - DISORDERLY INTOXICATION</b>						Statute Violation Number <b>856.011</b>						Violation of ORD #	
Drug Activity <b>N</b>						Amount / Unit <b>/</b>						Offense # <b>17-004065</b>	
Counts <b>I</b>						Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N						Warrant / Capias Number	
Charge Description						Statute Violation Number						Violation of ORD #	
Drug Activity						Drug Type						Amount / Unit	
Offense #						Counts						Domestic Violence	
Warrant / Capias Number						Statute Violation Number						Violation of ORD #	
Charge Description						Statute Violation Number						Violation of ORD #	
Drug Activity						Drug Type						Amount / Unit	
Offense #						Counts						Domestic Violence	
Warrant / Capias Number						Statute Violation Number						Violation of ORD #	
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"/> Posted Bond						<input type="checkbox"/> Released to Parent/Guardian <input checked="" type="checkbox"/> T.O.T. County Jail						PROPERTY - Received By	
Transported By						Date Transported						Time Transported	
Other						Released By						Released To	
<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) <b>North County PALM BEACH GARD</b>						Court Date and Time <b>09/27/2017 08:30:00</b>	
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.						Signature of Defendant (or Juvenile and Parent/Custodian) <b>X TOT CT</b>						Date Signed	
HOLD for Other Agency						Signature of Arresting Officer <b>[Signature]</b>						Name Verification (Printed by Arrestee) <b>[Signature]</b>	
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal						<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other						Name of Arresting Officer (Print) <b>SALVEMINI, MICHAEL</b>	
Intake Deputy <b>CH HONDA 720</b>						I.D. # <b>1136</b>						Transferring Officer <b>SALVEMINI</b>	
I.D. # <b>335</b>						Agency <b>JUPITE</b>						PAGE <b>1</b>	
Witness here if subject signed with an						SCANNED						AUG 21 2017	

# PROBABLE CAUSE AFFIDAVIT

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

1

JUVENILE

OBTS Number		Agency ORI Number <b>FL 0501700</b>		Agency Name <b>JUPITER POLICE DEPARTMENT</b>		Agency Report Number <b>5   4   17-004065</b>	
Charge Type: Check as many as apply <input 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) <b>JAMES, ROBERT DUNCAN</b>		Alias		Race <b>W</b>		Sex <b>M</b>	
Date of Birth <b>10/06/1974</b>							
Charge Description <b>856.011 DISORDERLY CONDUCT - DISORDERLY INTOXICATION</b>							
Charge Description							
Victim's Name (Last, First, Middle) <b>State Of Florida</b>		Race		Sex		Date of Birth	
Local Address (Street, Apt. Number) (City) (State) (Zip)		Phone		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><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.</p> <p><input type="checkbox"/> confessed to _____ admitting to the below facts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the <b>20</b> day of <b>August</b>, <b>2017</b> at <b>02:20</b> (Specifically include facts constituting cause for arrest.)</p> <p>On 08/20/17, at approximately 0220 hours, I was working an off duty detail at Abacoa Town Center, Jupiter, FL 33458. The area has 4 bars within one block and has had several complaints of disorderly subjects and fights. The detail was generated to combat these issues and complaints. While working the detail I was dressed in full Jupiter Police patrol uniform and in a marked Jupiter Police patrol vehicle.</p> <p>W/M Robert D. James (10/06/74) stumbled over to my patrol vehicle and said his friend left him and needed to go to the Embassy Suites off of PGA Blvd. I asked him if he had sufficient funds for a cab fare and he stated he had both cash and credit. I asked him if he wanted a cab and he said he wanted me to drive him. I explained that the hotel was in a different city and I was working a detail. I asked him again if he wanted a cab and he replied that he did. Yellow Cab was contacted and advised they were enroute. I told James to sit on the bench at the intersection of Edna Hibbel Road and Town Center Drive so it is easier for the cab to find him. James got up and re approached me three more times asking me for help and for me to drive him to the hotel. I explained to him three more times that a cab was coming for him. The entire time, James was stumbling, slurring his speech, an odor of an unknown alcoholic beverage coming from his person which became stronger as spoke, and sweating. It was clear that he was extremely intoxicated.</p> <p>James began yelling that I was not helping him. He was standing in the middle of the roadway yelling and there are 3-4 story apartment buildings on either side of the roadway. I told him to stop yelling and calm down and that he was going wake people up. He refused and continued yelling. I told him to get on the sidewalk and stop yelling or he was going to be arrested for Disorderly Intoxication. I explained to him that he was causing a disturbance and needed to quiet down. He walked away from me, but continued walking in the roadway and screamed, "Fuuuuuuccckkkkkk!" At this point, a black Toyota sedan drove towards James and had to stop in the roadway because James was walking in</p>							
SWORN AND SUBSCRIBED BEFORE ME							
<b>ROCHA, LUIS</b> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) <b>08/20/2017</b> DATE		SIGNATURE OF ARRESTING / INVESTIGATING OFFICER <b>SALVEMINI, MICHAEL (1136)</b> NAME OF OFFICER (PLEASE PRINT) <b>08/20/2017</b> DATE					
PAGE		1 OF 2					

# PROBABLE CAUSE AFFIDAVIT SUPPLEMENT

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

1

JUVENILE

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Name (Last, First, Middle) <b>JAMES, ROBERT DUNCAN</b>	Alias	Race <b>W</b> Sex <b>M</b> Date of Birth <b>10/06/1974</b>
<p>the roadway, yelling. At this point, James was clearly intoxicated, walking in the roadway, and yelling obscenities. A vehicle was forced to stop because James was walking in the roadway, when there were sidewalks on either side of the roadway. At this point, I had probable cause to arrest James for Disorderly Intoxication. He was placed in handcuffs, double locked, and checked for spacing. He was transported to the Jupiter Police Department for paperwork and then to the county jail without incident.</p> <p>Based on James actions and statements, he was intoxicated and endangered other people by stumbling in the roadway yelling, and was in a public place causing a disturbance, contrary to FSS 856.011. DISORDERLY INTOXICATION</p>		
<p>SWORN AND SUBSCRIBED BEFORE ME</p> <p><b>ROCHA, LUIS</b> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) <b>08/20/2017</b> DATE</p> <p><b>SALVEMINI, MICHAEL (1136)</b> NAME OF OFFICER (PLEASE PRINT) <b>08/20/2017</b> DATE</p>		

NOT A CERTIFIED COPY

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.