

0491309

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ARREST / NOTICE TO APPEAR
Juvenile Referral Report1. Arrest 3. Request for Warrant
2. N.T.A. 4. Request For Capias

1

Juvenile ☐

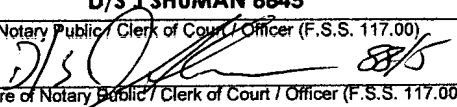
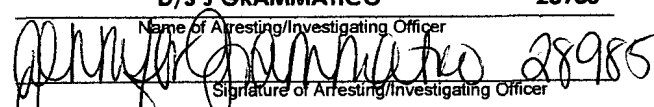
OBTS Number		Agency ORI Number FLO 5 0 0 0 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 06 17126228	
Charge Type: Check as many as apply <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		If Weapon Seized Enter Type		Multiple Clearance Indicator 0 1			
Location of Arrest (Including Name of Business) 8480 OKEECHOBEE BLVD WEST PALM BEACH FL 33411				Location of Offense (Including Name of Business) BIMINI TWIST 8480 OKEECHOBEE BLVD WEST PALM BEACH FL 33411			
Date of Arrest Sep 12, 2017	Time of Arrest 2147	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle	
Name (Last, First, Middle) ARIAS SARA				Alias (Name, DOB, Soc. Sec. #, Etc.)			
Race W - White 1 - American Indian B - Black 0 - Oriental/Asian W F	Sex F	Date of Birth 2/9/76	Height 5'6	Weight 115	Eye Color BRO	Hair Color BRO	Complexion FAIR
Build SLIM				Marital Status SINGLE		Religion UNK	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) NONE				Indication of: Alcohol Influence Drug Influence <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> Unk			
Local Address (Street, Apt. Number) 2119 SE 10TH AVE APT 912		City FT LAUDERDALE		State FL		Zip 33316	
Permanent Address (Street, Apt. Number) 2119 SE 10TH AVE APT 912		City FT LAUDERDALE		State FL		Zip 33316	
Business Address (Street, Apt. Number)		City		State		Zip	
D/L Number, State A620780765490		Social Security Number		INS Number		Place of Birth COLOMBIA	
Citizenship UNK		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					
<input type="checkbox"/> Parent <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Other		Name (Last, First, Middle)		Phone			
Address (Street, Apt. No.)		City		State		Zip	
Business Phone		Notified By (Name)		Date		Time	
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 address change. <input type="checkbox"/> Yes, by (Name) <input type="checkbox"/> No (Reason)		School Attended		Grade			
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. Barbiturate C. Cocaine E. Heroin	
H. Hallucinogen M. Marijuana		P. Paraphernalia/ Equipment		U. Unknown Z. Other			
Charge Description TRESPASSING		Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number 810.08 (29)	
Drug Activity N		Drug Type N		Amount/Unit		Offense # 17126228	
Warrant/Capias Number		Bond		Violation or ORD. #			
Charge Description		Counts		Domestic Violence		Statute Violation Number	
Drug Activity		Drug Type		Amount/Unit		Offense #	
Warrant/Capias Number		Bond		Violation or ORD. #			
Charge Description		Counts		Domestic Violence		Statute Violation Number	
Drug Activity		Drug Type		Amount/Unit		Offense #	
Warrant/Capias Number		Bond		Violation or ORD. #			
Charge Description		Counts		Domestic Violence		Statute Violation Number	
Drug Activity		Drug Type		Amount/Unit		Offense #	
Warrant/Capias Number		Bond		Violation or ORD. #			
Location (Court, Address, Room Number) EKK 3228 Gunc Club Rd WDB Fl 33406							
Court Date and Time Month 10 Day 17 Year 2017 Time AM <input type="checkbox"/> PM <input checked="" type="checkbox"/> SEP 12 PM 11:12							
I AGREE TO APPEAR AT THE ABOVE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT I SHOULD 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)				Date Signed			
HOLD for Other Agency Name <input type="checkbox"/> Dangerous <input type="checkbox"/> Suidal Intake Deputy				Name Verification (Printed by Arrestee) (PRINT) Page 1 of 1			
Resisted Arrest Other				Name of Arresting Officer D/S J GRAMMATICO 28985			
Transporting Officer D/S J GRAMMATICO 28985				Agency PBSO			

SCANNED
SEP 14 2017

OBTS Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 3. Request For Warrant 2. N.T.A. 4. Request For Capias 1 Juvenile <input type="checkbox"/>	
Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 06 17126228	
Charge Type: Check as many as apply <input type="checkbox"/> 1. Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other _____		Special Notes			
Defendant Name (Last, First, Middle) ARIAS SARA				Race W	Sex F Date of Birth 2/9/76
Charge TRESPASSING		Charge			
Charge		Charge			
Victim Name (Last, First, Middle) BIMINI TWIST				Race	Sex Date of Birth
Local Address (Street, Apt. Number) 8480 OKEECHOBEE BLVD		City WEST PALM BEACH	State FL Zip 33411	Phone 5617842660	Address Source
Business Address (Street, Apt. Number)		City	State	Zip	Phone Occupation
The undersign 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 to the below facts. <input type="checkbox"/> was found to have committed the below acts, resulting from (described) investigation. On the <u>12</u> day of <u>SEPTEMBER</u> 20 <u>17</u> at <u>9:47</u> <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM					

On September 12, 2017, at 2127 hours, I responded to Bimini Twist, 8480 Okeechobee Blvd, unincorporated West Palm Beach in reference to an unwanted guest. Upon arrival, I made contact with the restaurant manager, Ralph Benfante, who stated that there was a female inside the restaurant who was refusing to leave. Ralph advised that he asked the female to leave several times before calling the police.

I then made contact with the female, Sara Arias, who was sitting in a booth near the front of the restaurant. I asked Sara for her identification and she refused to produce it. I made several attempts to explain to Sara that she had to leave the restaurant, which she refused. Sara was placed under arrest for violation of FSS 810.08, Trespass after warning, placed in handcuffs which were double-locked and checked for tightness, and transported to the Palm Beach County Jail without incident.

The foregoing instrument was sworn to and affirmed before me this <u>12</u> day of <u>SEPTEMBER</u> 20 <u>17</u> , by:			
D/S J SHUMAN 8845		D/S J GRAMMATICO 28985	
Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)		Name of Arresting/Investigating Officer	
 Signature of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)		 Signature of Arresting/Investigating Officer	
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