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

Juvenile

1

OBTS Number			ARREST / NOTICE TO APPEAR Juvenile Referral Report							
Agency ORI Number FLO 5 0 0 0 0 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE				Agency Report Number 06		17126228		
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		Multiple Clearance Indicator 0 1		
Location of Arrest (Including Name of Business) 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 B-Black O-Asian/Other	Sex W	Date of Birth 2/9/76	Height 5'6	Weight 115	Eye Color BRO	Hair Color BRO	Complexion FAIR	Build SLIM		
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) NONE					Marital Status SINGLE	Religion UNK	Indication of: Alcohol Influence Drug Influence <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>	Y N Unk		
Local Address (Street, Apt. Number) 2119 SE 10TH AVE APT 912			City FT LAUDERDALE		State FL	Zip 33316	Phone	Residence Type: 1. City 2. County 3. Florida 4. Out of State		
Permanent Address (Street, Apt. Number) 2119 SE 10TH AVE APT 912			City FT LAUDERDALE		State FL	Zip 33316	Phone	Address Source FLDL		
Business Address (Street, Apt. Number)			City		State	Zip	Phone	Occupation UNK		
DL 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 <input type="checkbox"/> 2. At Large <input type="checkbox"/>		
Co-Defendant Name (Last, First, Middle)					Race	Sex	Date of Birth	3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile <input type="checkbox"/>		
<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	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 address change <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No (Reason)					School Attended					
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property								Value of Property
Drug Activity S. Sell N/A P. Possess		R. Smuggle D. Buy T. Traffic	K. Dispense/ Distribute E. Use	M. Manufacture/ Produce Cultivate	Z. Other	Drug Type N. N/A A. Amphetamine	B. Barbiturates 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 (2a)		Violation or ORD. #		
Drug Activity N	Drug Type N	Amount/Unit	Offense # 17126228	Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant/Capias Number		Bond		
Charge Description				Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation or ORD. #		
Drug Activity	Drug Type	Amount/Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant/Capias Number		Bond		
Charge Description				Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation or ORD. #		
Drug Activity	Drug Type	Amount/Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant/Capias Number		Bond		
Charge Description				Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation or ORD. #		
Drug Activity	Drug Type	Amount/Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant/Capias Number		Bond		
Location (Court Address, Room Number) EVK 3228 Cm Club Rd WDB Ft 33406				Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation or ORD. #		
Court Date and Time Month 10 Day 17 Year 2017 Time AM				Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant/Capias Number		Bond		
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		Signature of Arresting Officer <i>James Grammatico</i>		Name Verification (Printed by Arrestee) <i>James Grammatico</i>						
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal		Name of Arresting Officer D/S J GRAMMATICO		ID # 28985						
Intake Deputy 804		Transporting Officer D/S J GRAMMATICO		ID # 28985		Agency PBSO		Page		
Witness here if subject signed with "X" SCANNED										

SEP 14 2017

OBTS Number

PROBABLE CAUSE AFFIDAVIT

1. Arrest 3. Request For Warrant
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Juvenile

Agency ORI Number FLO 5 0 0 0 0 0	Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	Agency Report Number 06	17126228		
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		
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
Local Address (Street, Apt. Number) 8480 OKEECHOBEE BLVD		City WEST PALM BEACH	State FL	Zip 33411	Phone 5617842660
Business Address (Street, Apt. Number)		City	State	Zip	Phone
					Occupation
<p>The undersigned 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...</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 type="checkbox"/> was found to have committed the below acts, resulting from (described) investigation.</p>					
<p>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</p>					

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) <i>D/S J Shuman 8845</i>			Name of Arresting/Investigating Officer <i>D/S J Grammatico 28985</i>			
Signature of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)			Signature of Arresting/Investigating Officer			
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