

ARREST / NOTICE TO APPEAR

19/09/2019 18:13

1

JUVENILE

Agency ORI Number <b>0500200</b>	Agency Name <b>Boca Raton Police Department</b>	Agency Report Number (N.T.A.'s only) <b>3, 2   2019-012800</b>
Charge Type: <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
Location of Arrest (Including Name of Business) <b>2285 NW 53RD ST, BOCA RATON, FL, 33496</b>		Location of Offense (Business Name, Address) <b>133 SE MIZNER BLVD, BOCA RATON, FL 33432</b>
Date of Arrest <b>09/23/2019</b>	Time of Arrest <b>20:18</b>	Booking Date <b>09/23/2019</b>
Name (Last, First, Middle) <b>CARADONNA, TIMOTHY JAMES</b>		Alias (Name, DOR, Soc. Sec. #, Etc.)
Race <input checked="" type="checkbox"/> W - White <input type="checkbox"/> B - Black <input type="checkbox"/> O - Oriental/Asian	Sex <input checked="" type="checkbox"/> M <input type="checkbox"/> F	Date of Birth <b>03/03/1963</b>
Height <b>6'00</b>	Weight <b>220</b>	Eye Color <b>BLUE</b>
Hair Color <b>GRAY</b>	Complexion <b>LIGHT</b>	Build <b>Large</b>
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) <b>TATT R ARM/HEART WITH "TAYLOR"</b>		Marital Status <b>M</b>
Local Address (Street, Apt. Number) <b>2285 NW 53RD ST, BOCA RATON, FL 33496</b>		Religion <b>CATHOLIC</b>
Permanent Address (Street, Apt. Number) <b>2285 NW 53RD ST, BOCA RATON, FL 33496</b>		Indication of Alcohol Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unit <input type="checkbox"/>
Business Address (Name, Street) <b>MAJOR LEAGUE LANDSCAPING</b>		Residence Type: 1. City 3. Florida 2. County 4. Out of State
DL Number, State <b>C635810630830 / FL</b>	INS Number	Place of Birth (City, State) <b>RIDGEWOOD, NJ</b>
Citizenship <b>US</b>		Occupation <b>President</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"/> Name (Last, First, Middle)		Residence Phone
Legal Custodian <input type="checkbox"/> Address (Street, Apt. Number)		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
Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Description of Property
Drug Activity	S. Sell	R. Smuggle
N. N/A	B. Buy	D. Deliver
F. Possess	T. Traffic	E. Use
K. Dispense/Distribute	M. Manufacture/Produce/Cultivate	Z. Other
Drug Type	B. Barbiturate	H. Hallucinogen
N. N/A	C. Cocaine	M. Marijuana
A. Amphetamines	E. Heroin	O. Opioids/Dev.
P. Paraphernalia/Equipment	S. Synthetic	U. Unknown
Z. Other		
Charge Description <b>DOMESTIC BATTERY</b>	State Violation Number <b>784.03(1A1)</b>	Violation of ORD #
Drug Activity	Drug Type	Amount / Unit
	N	
Offense #	Counts	Domestic Violence
	1	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Warrant / Capias Number	Bond	
	2019 SEP 21 AM 5:25	
Health / Apparent Physical Condition of Defendant <b>GOOD</b>	Any knowledge of the following: <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Violation <input type="checkbox"/> Deformation <input type="checkbox"/> Injuries	
Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input checked="" type="checkbox"/> T.O.T. County Jail	Explains: <b>NONE</b>	
Transported By <b>CALHOUN</b>	PROPERTY - Received By <b>COON</b>	Released By <b>CALHOUN</b>
Date Transported <b>09/23/2019</b>	Time Transported <b>2100</b>	Released To <b>ICE</b>
<input type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court... <input checked="" type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court... but must comply with instructions on Page 2.		Location (Court, Room) <b>South County 200 W Atlantic Ave Delray Beach, FL 33444</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.		No Photo Available
Signature of Defendant (or Juvenile and Parent/Custodian)		Date Signed
HOLD for Other Agency		Name Verification (Printed by Arrestee)
<input type="checkbox"/> Dangerous <input type="checkbox"/> Restricted Arrest	Signature of Arresting Officer <b>794</b>	(PRINT)
<input type="checkbox"/> Suicidal <input type="checkbox"/> Other	Number of Arresting Officer (Print) <b>COON, R</b>	LD. # <b>794</b>
Intake Deputy	Transporting Officer <b>CALHOUN</b>	Agency <b>BRPD</b>
LD. #	LD. # <b>783</b>	Agency <b>BRPD</b>
POUCH #	Witness here if subject signed with an "X".	

0511211

NR

1873

AM 5:25

No Photo Available

PROBABLE CAUSE AFFIDAVIT

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

1

JUVENILE

OBTIS Number  Agency ORI Number <b>FL 0500200</b> Agency Name <b>BOCA RATON POLICE DEPARTMENT</b> Agency Report Number <b>3   2   2019-012800</b>	Charge Type: <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:
Name (Last, First, Middle) <b>CARADONNA, TIMOTHY JAMES</b>	
Race: <b>W</b> Sex: <b>M</b> Date of Birth: <b>03/03/1963</b>	
Charge Description <b>784.03(1A1) SIMPLE BATTERY DOMESTIC</b>	
Victim's Name (Last, First, Middle) <b>CARADONNA, MARIE ELENA</b>	
Race: <b>W</b> Sex: <b>F</b> Date of Birth: <b>07/28/1964</b>	
Local Address (Street, Apt. Number) (City) (State) (Zip) <b>3663 NE 6TH DR, BOCA RATON, FL 33431</b>	
Phone: <b>(561) 248-2862</b> Address Source:	
Business Address (Name, Street) (City) (State) (Zip) <b>NESTLER POLETTO</b>	
Phone: <b>(561) -</b> Occupation:	
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. The Person taken into custody ... <input 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 checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation. On the <u>22</u> day of <u>September</u> , <u>2019</u> at <u>17:55</u> (Specifically include facts constituting cause for arrest)	
The following was captured on MVR. On 09/22/19, at approximately 1755 hours, I responded to 133 SE Mizner Blvd (Hijinks), in reference to a domestic disturbance. I met with the victim, W/F Marie Caradonna who advised she was drinking at the bar when her ex husband, W/M Timothy Caradonna approached her. Marie said that she and Timothy have been divorced for six years and she has not seen him since then. Marie said that Timothy was very intoxicated and was yelling at her, calling her a "whore". Marie said that Timothy told the bartenders to close her tab so she would leave the bar. Marie said that she was talking to the manager, W/M Conor Walters, when Timothy walked up to her again. Marie said that Timothy told her to leave and threw his drink on her. While he was throwing the drink, he pushed her in the shoulder. It should be noted that when I made contact with Marie, a portion of her hair was wet. I attempted to make contact with Timothy inside the bar, but he had left prior to my arrival. Timothy was last seen wearing a Giants t-shirt and was intoxicated. I met with Walters who advised Marie approached him and told him that Timothy was being rude to her. While Walters was talking to Marie, Timothy approached them and told Marie to leave. Walters said that is when Timothy threw the remnants of his drink onto Marie. Marie then exited the bar quickly and Timothy walked away. Walters didn't see where Timothy went. There is video surveillance, but I was not able to obtain it on scene. Based on my investigation, I determined there is probable cause to arrest Timothy Caradonna in violation of F.S.S. 784.03(1A1) Simple Battery Domestic.	
SWORN AND SUBSCRIBED BEFORE ME _____ <b>BROWN, KEISHA L</b> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) _____ <b>09/23/2019</b> DATE	SIGNATURE OF ARRESTING / INVESTIGATING OFFICER _____ <b>COON, REBECCA (794)</b> NAME OF OFFICER (PLEASE PRINT) _____ <b>09/23/2019</b> DATE

# VICTIM NOTIFICATION FORM

This form must be completed when one of the following crime(s) has been committed:

- Homicide (Ch. 782)
- Sexual Offense (Ch. 794)
- Attempted Murder
- Attempted Sexual Offense
- Stalking (F.S. 784.048)
- Domestic Violence - (This includes any assault, aggravated assault, battery, aggravated battery, sexual assault, sexual battery, stalking, aggravated stalking or any criminal offense resulting in physical injury or death of one family member or household member by another, who is or was residing in the same single dwelling.)

Upon completion, this form must accompany the booking paperwork.  
If applying for a warrant, attach this form to the filing packet.

1. Incident Report#: 19-12800 Agency: BYRPD  
Offense: DOMESTIC BATTERY  
Suspect/Offender: CARADONNA, TIMOTHY  
D.O.B. 3/3/63 Race: W Sex: M

2. Warrant#(s): \_\_\_\_\_

3.a. Victim's name: MARIE CARADONNA D.O.B. 07/28/64 Race: W Sex: F  
Address: 3663 NE 6TH DR.  
City: BOLARATON State: FL Zip: 33401  
Home#: (561) 248 2862 Work#: \_\_\_\_\_ Other: \_\_\_\_\_

b. Victim's next of kin, friend or neighbor: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home#: \_\_\_\_\_ Work#: \_\_\_\_\_ Other: \_\_\_\_\_

NOTE: PURSUANT TO F.S. 119.07, THE CONTENTS OF THIS FORM MAY BE SUBJECT TO CONFIDENTIALITY.

**Victim/Relation Notification Waiver and Confidential Information Request.**

(check applicable boxes)

- Waiver: I choose not to be notified when the arrestee is released from custody.
- Confidential: Pursuant to F.S. 119.07 (3)(S)1, I request that the address and telephone number on this form be kept confidential (applicable only to sexual battery, aggravated child abuse, aggravated stalking, harassment, aggravated battery, or domestic violence cases).  
Other confidentiality provisions of Florida State Statutes may also be applicable

Signature of person waiving notification: \_\_\_\_\_

Printed name of person waiving notification: \_\_\_\_\_

Officer's Name: OFF. R. COUN I.D.# 794 Date: 9/23/17  
White/Corrections or State Attorney (Warrant Application) Yellow/Warrants Section Pink/Central Records

SUSPECT/OFFENDER: \_\_\_\_\_

(FOR WARRANTS USE ONLY)

COURT CASE/WARRANT#:



**Palm Beach County Sheriff's Office – Arrests Only**

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	<input type="checkbox"/>	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	<input type="checkbox"/>	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	<input type="checkbox"/>	119.071(4)(c)	Undercover personnel.	
	<input type="checkbox"/>	119.071(2)(f)	Confidential informants (CIs).	
	<input type="checkbox"/>	119.071(2)(e)	Confession.	
Public Info. Exemptions	<input type="checkbox"/>	985.04(1)	Juvenile offender records.	
	<input type="checkbox"/>	119.071(h)(i)	Assets of a crime victim.	
	<input type="checkbox"/>	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	<input type="checkbox"/>	394.4615(7)	Mental health information.	
	<input type="checkbox"/>	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)	<input checked="" type="checkbox"/>	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	<input type="checkbox"/>	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	<input type="checkbox"/>	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	<input type="checkbox"/>	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

**REVIEW COMPLETED BY**

Booking Number: 2019031100	Date: 09/24/2019
	Specialist Name/ID: AM/31562