

0485365

902

OBTS Number		ARREST / NOTICE TO APPEAR Juvenile Referral Report		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1		Juvenile		N	
Agency ORI Number FL 0500300		Agency Name BOYNTON BEACH POLICE DEPT.				Agency Report Number 34-17-008508							
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			
Location of Arrest (Including Name of Business) 1500 W. GATEWAY BLVD, BOYNTON BEACH						Location of Offense (Business Name, Address) 1500 W. GATEWAY BLVD, BOYNTON BEACH							
Date of Arrest 02/15/2017		Time of Arrest 1146		Booking Date		Booking Time		Jail Date		Jail Time		Location of Vehicle	
Name (Last, First, Middle) URIZA, YANETH						Alias (Name, DOB, Soc. Sec. #, Etc)							
W - White B - Black		I - American Indian O - Oriental / Asian		Race W		Sex F		Date of Birth 04/13/1968		Height 5'0"		Weight 120	
Eye Color HZL		Hair Color BLD		Complexion MED		Build SMALL		Marital Status SINGLE		Religion CATHOLIC		Indication of: Alcohol Influence <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Drug Influence <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) TATTOO LOWER BACK						Residence Type 1. City 3. Florida 2. County 4. Out of State 2		Address Source VERBAL					
Local Address (Street, Apt. Number) (City) (State) (Zip) 480 HIBISCUS ST, WEST PALM BEACH, FL 33401						Phone (561) 313-4294		Occupation NONE					
Permanent Address (Street, Apt. Number) (City) (State) (Zip) 480 HIBISCUS ST, WEST PALM BEACH, FL 33401						Phone (561) 313-4294		Occupation NONE					
Business Address (Street, Apt. Number) (City) (State) (Zip)						Phone () -		Occupation NONE					
D/L Number, State U620960686330				Soc. Sec. Number [REDACTED]		INS Number		Place of Birth BOGOTA, COLOMBIA		Citizenship US			
Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large		<input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile	
Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large		<input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile	
<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other				Name (Last) (First) (Middle)		Residence Phone							
Address (Street, Apt. Number) (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 change of address: <input type="checkbox"/> Yes, By: (Name) <input type="checkbox"/> No: (Reason)								School Attended		Grade			
Property Crime? Yes <input type="checkbox"/> No <input type="checkbox"/>				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. Barbituate C. Cocaine E. Heroin		H. Hallucinogen M. Marijuana O. Opium/Deriv		P. Paraphernalia/ Equipment		S. Synthetic		U. Unknown Z. Other	
Charge Description SIMPLE BATTERY (DOMESTIC)				Counts 1		Domestic Violence <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Statute Violation Number 784.03(1)(a)(1)		Violation of ORD#			
Drug Activity N				Drug Type N		Amount/Unit		Offense # 17-008508		Warrant/Capias Number		Bond	
Charge Description				Counts		Domestic Violence <input type="checkbox"/> Yes <input type="checkbox"/> No		Statute Violation Number		Violation of ORD#			
Drug Activity				Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond	
Charge Description				Counts		Domestic Violence <input type="checkbox"/> Yes <input type="checkbox"/> No		Statute Violation Number		Violation of ORD#			
Drug Activity				Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond	
Charge Description				Counts		Domestic Violence <input type="checkbox"/> Yes <input type="checkbox"/> No		Statute Violation Number		Violation of ORD#			
Drug Activity				Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond	
Instruction No. 1 Mandatory Appearance in Court				Location (Court, Room Number, Address) South County Courthouse, 200 West Atlantic Ave, Delray Beach, FL 33444		Court Date and Time Month MARCH Day 22 Year 2017 Time 9:30 <input type="checkbox"/> A.M. <input type="checkbox"/> P.M.		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 FULLY 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 [Signature]		Name Verification (Printed by Arrestee) (PRINT)							
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal				<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:		Name of Arresting Officer (Print) F. LLOPIS #854		I.D. # 854		BU# 108333			
Intake Deputy I.D. #				Pouch #		Transporting Officer A. EICHORST		I.D. # 971		Agency BRAD		Witness here is subject Signed with an "X". FEB 16 2017 OF 1	



DOMESTIC VIOLENCE PROBABLE CAUSE AFFIDAVIT
PALM BEACH COUNTY



On the 15 day of FEBRUARY 2017 at 1112 HRS
Subject: URIZA, YANETH DOB: 04/13/1968 Case #: 17-008508
Charge Description: SIMPLE BATTERY (DOMESTIC) Statute #: 784.03(1)(a)(1)
Victim: MILLER, DEAN ALAN DOB: 02/20/1966 Race: W Sex: M
Local Address: 480 HIBISCUS ST, WEST PALM BEACH, FL, 33401
Personal Contact: _____

Narrative:

On 02/15/2017 at approx 1112 hrs, I responded to the parking lot of 1500 W. Gateway Blvd, Boynton Beach, Palm Beach County, Florida in reference to a disturbance. The caller/witness advised a female struck a male near a red pickup truck bearing FL tag Y39KSV.

Upon arrival I made contact with a WITNESS who advised he observed a white female, later identified by FL DL as URIZA, YANETH (dob 04/13/1968) punch a white male in the left side of his face with a closed fist. I spoke with the VICTIM who advised he was in a verbal dispute with his live-in fiancée, URIZA. The VICTIM advised he and URIZA are scheduled to get married tomorrow, 02/16/2017 and were meeting with an attorney at this location to amend their prenuptial agreement. The VICTIM advised URIZA became upset with the attorney and left the business. Once in the parking lot URIZA slapped the VICTIM in the left side of his face with an open hand. URIZA and the VICTIM proceeded to the passenger's side of his pickup truck where URIZA punched the VICTIM in the left side of his face twice with a closed fist.

When the VICTIM found out URIZA was going to be arrested he became uncooperative and refused to provide any additional statements. I observed a red mark to the left side of the VICTIM's face which was photographed.

Based on the above facts I find probable cause to charge WF URIZA, YANETH (dob 04/13/1968) with Simple Battery (Domestic) pursuant to FSS 784.03(1)(a)(1). URIZA was taken into custody and TOT BBPD for processing. She was later TOT PBCJ.

Defendant's Statement: None Victim's Statement: Oral

Observation Of Victim (Physical and Emotional):

Calm, red mark to left cheek bone.

Relationship Between Victim and Suspect:

Engaged, reside together

SCANNED
FEB 16 2017

Photographs: Scene: ☐ Yes ☒ No
Victim: ☒ Yes ☐ No
911 Call: ☒ Yes ☐ No Caller: BILL KEISER
Tape Requested: ☒ Yes ☐ No
Weapon Used: ☐ Yes ☒ No Type:
Witnesses: ☒ Yes ☐ No
Injuries: ☒ Yes ☐ No
Medical Treatment: ☐ Yes ☒ No
At Scene ☐ Yes ☒ No Paramedics:
At Hospital ☐ Yes ☒ No Physician(s):
Hospital:

Act Committed In Presence Of Minor(s): ☐ Yes ☒ No

Name: Age:

Name: Age:

F.D.C.F. Notified: ☐ Yes ☒ No Victim Pregnant: ☐ Yes ☒ No

Violation Of Restraining Order: ☐ Yes ☒ No Case #:

Prior History Of Domestic Violence: ☐ Yes ☒ No

Alcohol Or Drugs Involved: ☐ Yes ☒ No ☐ Unknown

Victim Contact Information:

Phone Home: 5613017083 Work:

Employer: Self

Relative Name: Phone:

Address:

City/State:

State Of Florida

County Of Palm Beach

Appeared before me, F. LLOPIS #854, (print name) personally known to me, who, being first duly sworn, says that the facts above, based upon my investigation, are true.

Signature Of Arresting Officer

Sworn to and subscribed to me before this 15 day of February 2017

Notary/Clerk Of Court/Officer (F.S.S. 117 10)

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FEB 16 2017