

COMPLAINT/ARREST AFFIDAVIT - CIRCUIT/COUNTY COURT - PINELLAS COUNTY, FLORIDA

OBTS #	REPORT # SO21-44868		DOCKET # 1856662	
Person ID	2811250	SSN#	[REDACTED]	
Charge Description	<input type="checkbox"/> Felony <input checked="" type="checkbox"/> Misdemeanor <input type="checkbox"/> Warrant <input type="checkbox"/> Traffic <input type="checkbox"/> Ordinance	Traffic Citation # (if any)	Court Case #	
Charge	LEAVING THE SCENE OF A CRASH INVOLVING PROPERTY DAMAGE	AE3BVWE	AE3BVWE-1	
Defendant's Name (Last, First, Middle)	HOLZAEPFEL, ROBERT ALLEN	DOB	06/03/1987	Sex M Race W Ht 510 Wt 175 Hair BLK Eyes BRO Skin MED
Alias	DL # H-421-761-87-203-0	State	FL	Scars/Marks/Tattoos/Physical Features TATTOO - L NECK - BLUE SWALLOW
Local Address (Street, City, State, Zip Code)	2316 ROBINSON AVE SARASOTA FL 34232	Telephone	941-264-6323	Place of Birth CA Citizenship USA
Permanent Address (Street, City, State, Zip Code)	4604 SWORDFISH DR BRADENTON FL 34208	Telephone	941-264-6323	Employed by / School SELF
Weapon Seized Type	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Indication of Drug Influence	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> UNK	Indication of Mental Health Issues
Co-Defendant's Name (Last, First, Middle)		DOB	Sex	Race
				In Custody <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor
Co-Defendant's Name (Last, First, Middle)		DOB	Sex	Race
				In Custody <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor

The undersigned swears that he/she has reasonable grounds to believe that the above named defendant on the 17 day of FEBRUARY, 2021, at approximately 4:30 PM, at EAST LAKE RD / FORELOCK RD, PINELLAS COUNTY, in Pinellas County did:

THEN AND THERE DRIVE A VEHICLE, TO-WIT: A WHITE 2002 FORD TRUCK, FLORIDA TAG IV76LC, WHICH WAS INVOLVED IN A CRASH INVOLVING PROPERTY DAMAGE OF A SPEED LIMIT SIGN, AND THE SAID DEFENDANT DID WILLFULLY FAIL TO STOP SAID VEHICLE AT THE SCENE OF THE CRASH UNTIL HE HAD FULFILLED THE REQUIREMENTS OF FSS 316.062, TO-WIT: THE DEFENDANT DID NOT GIVE HIS NAME AND ADDRESS AND THE REGISTRATION NUMBER OF THE VEHICLE HE WAS DRIVING AND DID NOT EXHIBIT SUCH LICENSE OR PERMIT TO THE DEPUTIES AT THE SCENE OF THE CRASH OR WHO WERE INVESTIGATING THE CRASH.

CITATION #: AE3BVWE
CALL OF THE COURT
NORTH COUNTY TRAFFIC COURT

\$5000

Contrary to Florida Statute/Ordinance 316.061.1

ARREST DATE: 2/18/2021 Time 1:15 AM . Aggravating/Mitigating Factors NUMEROUS CHARGES - VOP PER SAO ZER

Booking Officer: PEREZ, A 59501 Amount of Bond ZERO Bond Out Date _____ Time _____ a.m. p.m.

Victim Notified of Advisory? Yes No Injuries to Victim? Yes No Medical Treatment to Victim? Yes No

The Court reviewed this complaint and finds there: is probable cause is not probable cause to detain defendant Bond Action, if any: _____

The probable cause determination is passed for: 24 Hrs 24 Hrs on showing of extraordinary circumstances Received by Booking: 2/18/2021 4:00:10 AM

Pursuant to F.S. 92.525 and under penalty of perjury, I declare that I have read the foregoing document and that the facts in it are true.

John F. Syers
PINELLAS COUNTY SHERIFF

Declarant Signature _____ Agency _____

DETECTIVE JOHN F. SYERS JR. 54876 02056142

Printed Name _____ Declarant ID# _____

REQUEST FOR INVESTIGATIVE COSTS, F.S. 938.27(1)				
DATE	OFFICER	HOURS X PAY RATE	OR	COST
02/18/2021	J. SYERS	12.0 25.00		

OTHER - Describe _____

Continuation sheet Yes No TOTAL \$ \$0.00

Defendant HOLZAEPFEL, ROBERT ALLEN

Court Case No: AE3BVWE-1

ADVISORY AND SOLVENCY HEARING

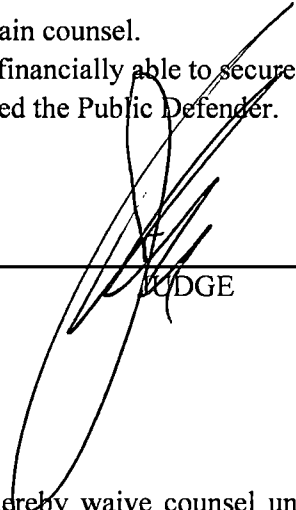
The above named Defendant came before me for Advisory and Solvency hearing and was advised by me of the charge(s) against him; his right to remain silent; that any statements by him may be used against him; his right to counsel, and, if he is financially unable to afford counsel, that counsel forthwith will be appointed; of his right to communicate with his counsel, family or friends, and that reasonable implementation will be afforded him to contact the foregoing.

I FURTHER CERTIFY THAT:

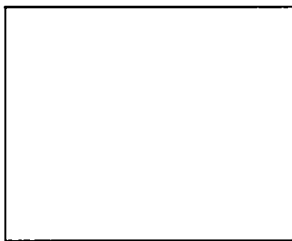
- A. Defendant has advised the Court that he has retained counsel or will retain counsel.
- B. The Court investigated Defendant's solvency and found the Defendant financially able to secure counsel.
- C. The Court investigated Defendant's solvency and provisionally appointed the Public Defender.
- D. The Defendant waived the right to counsel at the first appearance only.

DATE AND TIME

JUDGE



- I hereby waive the right to counsel at the first appearance only.
- I, having been found solvent and financially able to secure counsel, hereby waive counsel until my attorney files an appearance in this case or until I file a written request for a review of my solvency and ability to secure counsel.



Thumb Print

DEFENDANT'S SIGNATURE

I HEREBY acknowledge receipt of a copy of the foregoing Complaint and Advisory.

DEFENDANT'S SIGNATURE

DEFENDANT'S ATTORNEY'S SIGNATURE

DATE