

7th. Judicial Circuit 707 Charging Affidavit - FLAGLER

Arrest # _____

Blk # _____

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ARREST <input type="checkbox"/> NOTICE TO APPEAR <input type="checkbox"/> AFFIDAVIT <input checked="" type="checkbox"/> C.C. <input type="checkbox"/>		ADULT <input checked="" type="checkbox"/> JUVENILE <input type="checkbox"/>		Court Case Number: 2023 CF 000096	
(OR) FL: 0 1 8 0 0 0 0		Agency Name: Flagler County Sheriff's Office		Agency Case Number: 2023-00010007	
FCIC/NCIC Check? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		OBTS#		UCR:	Date Arrested: 01/30/2023
ADDRESS OF ARREST: 24, LAKESIDE, PL, W, Palm Coast, Florida, 32137-				Arrested By: Crosbee James	ID Number: 679
DEFENDANT		Name (L.F.M.): SEVIN, JOSHUA, EUGENE		A.K.A.:	Sex: Male Race: WHITE
DOB: 05/17/1994	Age: 28	Driver's Lic. ID No.: S150425941770	State: Florida	Year Expires: 2030	S.S. #:
Height: 5 07	Weight: 185	Hair: BROWN	Eyes: UNKNOWN	POB (City, St, Country)	Statement: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Scars, Marks, Tattoos:	Business & Occupation:		Citizenship: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		
Probation: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Sexual Predator: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	English: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Deaf/Mute: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
Address-Mailing/Permanent (STREET, APT. NUMBER)		(CITY)	(STATE)	ZIPCODE	RESIDENCE PHONE
Address-Local (STREET, APT. NUMBER)		(CITY)	(STATE)	ZIPCODE	RESIDENCE PHONE
Address-Other(Employer/School) (STREET, APT. NUMBER)		(CITY)	(STATE)	ZIPCODE	BUS/SCHOOL PHONE
CHARGES		DOMESTIC VIOLENCE? YES <input checked="" type="checkbox"/>		Attachments: Affidavit(s) <input type="checkbox"/> Statement(s) <input type="checkbox"/> NTA Schedule <input type="checkbox"/> Report <input checked="" type="checkbox"/> Traffic Infraction(s) <input type="checkbox"/> DUI <input type="checkbox"/> Total Charges: 2	
#1	Charge: LEWD LASC MOLESTATION - VICTIM 12-16 OFFENDER 18 OVER	FEL <input checked="" type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD: 800.04.5.C.2	Citation No.:	Bond:
#2	Charge: LEWD LASC MOLESTATION - VICTIM 12-16 OFFENDER 18 OVER	FEL <input checked="" type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD: 800.04.5.C.2	Citation No.:	Bond:
#3	Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD:	Citation No.:	Bond:
CO-DEFENDANT		Co-Def #1. Arrested? Y <input type="checkbox"/> N <input type="checkbox"/> Fel <input type="checkbox"/> Misd. <input type="checkbox"/> Traf. <input type="checkbox"/> Ord. <input type="checkbox"/> NTA <input type="checkbox"/>		Co-Def #2. Arrested? Y <input type="checkbox"/> N <input type="checkbox"/> Fel <input type="checkbox"/> Misd. <input type="checkbox"/> Traf. <input type="checkbox"/> Ord. <input type="checkbox"/> NTA <input type="checkbox"/>	
#1 NAME(L.F.M.):		Race:	Sex:	DOB:	Age:
#2 NAME(L.F.M.):		Race:	Sex:	DOB:	Age:
NARRATIVE The undersigned certifies and swears that there is a probable cause to believe the above names defendant, on the 31th day of January, 2023, at approximately 01:30 X A.M. P.M. at 24 LAKESIDE PL W within Flagler County, violated the law and did then and there.					
Marsys Law Victim Information					
Joshua Eugene Sevin, 28 years of age at the time of the incidents, did intentionally touch the breasts, genitals, genital area, or buttocks, or the clothing covering them of [REDACTED], a person more than 12 years of age but less than 16 years of age, in a lewd and lascivious manner.					
J.C. reported [REDACTED] Joshua Eugene Sevin, during the early morning hours of January 30 th and January 31 st 2023 touched her bare breasts under her clothing as she was sleeping in the master bedroom					
Supervisor Approved: Hristakopoulos, George 02/01/2023					
NOTICE TO APPEAR		MANDATORY APPEARANCE <input type="checkbox"/>		YOU NEED NOT APPEAR IN COURT BUT MUST COMPLY WITH INSTRUCTIONS ON THE REVERSE SIDE OF YOUR COPY <input type="checkbox"/>	
I AGREE TO APPEAR IN COURT HEREIN TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE INDICATED. I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED, OR PAY THE LISTED FINE, I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST WILL BE ISSUED.		FINE, AND COSTS AMOUNT:			
SIGNATURE OF DEFENDANT		DATE		RELATIONSHIP TO JUVENILE	
Sworn to and subscribed before me, the undersigned This 1st day of Feb., 2023.		I swear/affirm the above statements are correct and true.		Rt Thumb	
Name: Det. J. Van #628		OFFICER'S/COMPLAINANT'S SIGNATURE		#679	
Notary Public <input type="checkbox"/> Law Enforcement or Corrections Officer <input checked="" type="checkbox"/> Personally Known <input checked="" type="checkbox"/> Produced Identification <input type="checkbox"/> Type of Identification:		NAME(PRINTED)		ID NUMBER	
		Det. Crosbee		679	
OFFICIAL USE ONLY		Inmate Number & facility:			

707 - COURT COPY

Witness/Victim/Evidence Form 707-A

Arrest
 Affidavit
 Notice to Appear
 Adult
 Juvenile

Court Case Number: 2023-00010007

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Defendant Name: SEVIN, JOSHUA, EUGENE		Agency Case Number: 2023-00010007	
Name (L,F,M):	Vic <input checked="" type="checkbox"/> Wit <input type="checkbox"/>	Race:	Sex: M <input type="checkbox"/> F <input type="checkbox"/>
Address (#, Street, City, State):	Age:	DOB:	SSN:
Bus/School Address:	Relative/Contact Name:	Relative/Contact Address:	Statement: Yes <input type="checkbox"/> No <input type="checkbox"/>

Name (L,F,M):	Vic <input type="checkbox"/> Wit <input type="checkbox"/>	Race:	Sex: M <input type="checkbox"/> F <input type="checkbox"/>	Age:	DOB:	SSN:
Address (#, Street, City, State):	Age:	DOB:	SSN:	Statement: Yes <input type="checkbox"/> No <input type="checkbox"/>		
Bus/School Address:	Relative/Contact Name:	Relative/Contact Address:	Phone:			

EVIDENCE COLLECTED

Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Owner(Name) (Address)	(Address)	(Phone)	Value
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Owner(Name) (Address)	(Address)	(Phone)	Value
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount

I certify that the foregoing is a complete list of witnesses/victims & evidence known to me.

Det. *[Signature]* #679
Investigating Officer

679
ID Number

FL50
Agency

707-A - COURT COPY

Narrative 707-B Supplement

Arrest
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 Adult
 Juvenile

Court Case Number:

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Defendant Name:	Agency Case Number:
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#	Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD:	Citation No:	Bond:

of the residence. J.C. advised Joshua also made several comments regarding how much he loved her and how she means the world to him during the course of the incidents, as well as kissed her on the forehead during both incidents.

Utilizing investigative techniques, several admissions were obtained from the suspect corroborating J.C.'s account of both incidents.

Based upon the above facts, there is probable cause to believe that Joshua Sevin committed the act of lewd or lascivious molestation during the course of two separate incidents.

Sworn to and subscribed before me, the undersigned this <u>16th</u> day of <u>Feb.</u> , <u>2023</u> Name: <u>Det. J. Verne #628</u> Notary Public <input type="checkbox"/> Law Enforcement Officer <input checked="" type="checkbox"/> Personally Known <input checked="" type="checkbox"/> Produced Identification <input type="checkbox"/> Type of Identification:	I swear/affirm the above statements are correct and true. <div style="text-align: center;"> Det.  #679 OFFICER'S/COMPLAINANT'S SIGNATURE </div> NAME(PRINTED) <u>Det. Crosbee</u> ID NUMBER <u>679</u>	Right thumb
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707-B - COURT COPY