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ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

Agency ORI Number FLO 500000	Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	Agency Report Number (N.T.A.'s only) 06-20-048367
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 checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other	Weapon Seized / Type 1. Yes 2. No N/A	Multiple Clearance Indicator 01
Location of Arrest (Including Name of Business) JOG RD AND HYPOLUXO RD		Location of Offense (Business Name, Address) Jog Road and Hypoluxo Road, Boynton Beach FL
Date of Arrest 03/11/2020	Time of Arrest 2209	Location of Vehicle PRIORITY TOWING

Name (Last, First, Middle) Holcomb, Brian, Christopher		Alias (Name, DOB, Soc. Sec. #, Etc.)	
Race W - White I - American Indian B - Black O - Oriental/Asian W	Sex M	Date of Birth 4/21/1978	Height 6'02
Weight 237	Eye Color BRN	Hair Color BLK	Complexion FAIR
Build LARGE	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)		
Local Address (Street, Apt. Number) 2817 28th Ln, Lake Worth, FL 33463	City Lake Worth	State FL	Zip 33463
Permanent Address (Street, Apt. Number)	City	State	Zip
Business Address (Name, Street)	City	State	Zip
DL Number, State H425063781410, FL	Soc. Sec. Number	INS Number	Place of Birth (City, State) WEST PALM BEACH FL
Citizenship USA		Marital Status Married	
Religion NONE		Indication of: Alcohol Influence Drug Influence Y <input type="checkbox"/> N <input type="checkbox"/> Unk. <input type="checkbox"/>	
Residence Type: 1. City 2. County 3. Florida 4. Out of State 1		Address Source FL DL	
Occupation COMPUTER PROGRAMMER			

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
Parent Name (Last) (First) (Middle)	Relationship	Residence Phone	Business Phone		
Address (Street, Apt. Number)	City	State	Zip		
Notified by: (Name)	Date	Time	Juvenile Disposition 1. Handed/processed within Dept. and Released. 2. TOT HRS / DYS 3. Incarcerated		
Released To: (Name)	Relationship	Date	Time		

The above address provided by defendant and / or defendant's parents (the child and / or parent was told to keep the Juvenile Court Clerk (Phone 365-2528) informed of any change of address.
 Yes, by: (Name) No: (Reason)

School Attended _____ Grade _____

Property Crime? Yes No
 Description of Property _____ Value of Property _____

Drug Activity N. N/A P. Possess	S. Sell B. Buy T. Traffic	R. Smuggle O. Deliver E. Use	K. Dispense/ Distribute	M. Manufacture/ Products/ Cultivate	Z. Other	Drug Type N. N/A A. Amphetamine	B. Barbiturate C. Cocaine E. Heroin	H. Hallucinogen M. Marijuana O. Opium/Deriv.	P. Paraphernalia/ Equipment S. Synthetics	U. Unknown Z. Other
Charge Description Driving Under the Influence w/ prop damage	Counts 2	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number 316.193 (3)(c)(1)	Violation of ORD #						
Drug Activity N	Drug Type N	Amount / Unit	Offense # 20-048367	Warrant / Capias Number	Bond					
Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #						
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond					
Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #						
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond					
Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #						
Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond					

Location (Court, Room Number, Address)
3228 GUN CLUB RD WEST PALM BEACH FL 33406

Court Date and Time
Month **4** Day **9** Year **2020** Time **0830** AM PM

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

Signature of Defendant (if Juvenile and Parent /Custodian) _____ Date Signed **03/11/2020**

HOLD for other Agency Name:	Signature of Arresting Officer	Name Verification (Printed by Arrestee)
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suidical	Name of Arresting Officer (Print) INV D. S. SCHNEIDER	(PRINT) Brian Holcomb
<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other	I.D. # 8723	
Transporting Officer I.D. # INV D. S. SCHNEIDER 8723	Agency PBSO	Witness here if subject signed with an "X" <input type="checkbox"/>

		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	Juvenile N
ADMIN	OBTS Number	Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 06-20048367	
	Charge Type: Check as many as apply	<input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony	<input type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other	Special Notes SUPP PC		
CHARGES	Name (Last, First, Middle) Holcomb, Brian, Christopher		Alias	Race W	Sex M	Date of Birth 04/21/1978	
	Charge Description	Charge Description					
VICTIM	Victim's Name (Last, First, Middle) STATE OF FLORIDA, ,		Race	Sex	Date of Birth		
	Local Address (Street, Apt. Number)		(City)	(State)	(zip)	Phone	
	Business Address (Name, Street)		(City)	(State)	(zip)	Phone	
<p>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.</p> <p>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 checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the <u>11</u> day of <u>March</u> <u>20</u> * <u>2050</u> <input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)</p> <p>On 03/11/2020 at approximately 2050 hours, I was at the Cumberland Farm Gas Station located at 6919 S. Jog Rd, Unincorporated Lake Worth Rd, Florida 33467 within Palm Beach County attempting to pump gas into my marked patrol vehicle. While at the gas station, I heard a loud crash coming just east of my location.</p> <p>I observed three vehicles (red SUV, silver SUV and white Sedan) to be involved in a vehicle crash at the intersection of S Jog Rd and Hypoluxo Rd. The vehicles were on the #2 lane of S Jog Rd traveling southbound. The light at the intersection was red to travel southbound.</p> <p>I quickly approached all three vehicles to see if the occupants were injured or needed medical attention. The drivers of the red SUV and silver GMC advised they were okay. As I approached the white Hyundai Sedan (bearing FL tag# KVDG85), I observed the driver to be falling out of the driver side while opening the car door. The driver, later identified as Brian Christopher Holcomb (W/M, 04/21/1978) by utilizing his Florida Driver's License, advised he was fine and did not need medical attention.</p> <p>I asked Holcomb what happened, to which he advised "I don't know. I was side-swiped, or at least that's what it felt like."</p> <p>Holcomb's vehicle (white Hyundai) did not have any side-swipe damage, he vehicle sustained damage to the front bumper and engine; disabling the vehicle by causing airbag deployment.</p> <p>While speaking to me, Holcomb had a slurred speech, red glossy eyes and an emanating odor of an unknown alcoholic beverage coming from his person, which became stronger as he spoke. Holcomb was not able to stand on his own two feet and had to lean on his vehicle's driver door to stabilize himself and not fall on the pavement.</p> <p>Holcomb showed signs of impairment and DUI Inv. D. Schneider #8723 was contacted. D/S Dalton #32421 arrived on scene.</p>							
<p>STATE OF FLORIDA COUNTY OF PALM BEACH</p> <p style="text-align: center;">D/S J FALCON 28371</p> <p>(Signature of Arresting Investigative Officer)</p>							
ADMINISTRATIVE	The foregoing instrument was sworn to or affirmed and subscribed before me this <u>11</u> day of <u>MARCH</u> <u>20</u> by <u>D/S J FALCON</u>		PERSONALLY KNOWN LEO				
	(Print name of Arresting Investigative Officer, who is personally known to me and/or produce identification. Type of identification produced)		INV. SCHNEIDER 8723				
	Notary Public, Clerk of Court, Officer (F.S.S. 117.10)						
PAGE <u>1</u> OF <u>1</u>							

SCANNED
MAR 12 2020

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 11 DAY OF March 20 20, AT 2050 AM PM

SUBJECT: Holcomb, Brian, Christopher CASE NUMBER: 20-048367

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: INV D. S. SCHNEIDER

PERSONAL CONTACT

DRIVING PATTERN: Actual physical control (physical evidence or statements putting def. behind wheel of vehicle)

On 03/11/2020 at approximately 20:53hrs, I was dispatched to the scene of a motor vehicle crash without injuries at the intersection of Jog Road and Hypoluxo Road, which is located in unincorporated Palm Beach County, Florida.

I arrived at the scene at approximately 2117hrs. After my independent crash investigation, based on physical evidence, and witness statements, I determined that, at approximately 2050hrs, the defendant, Brian Christopher Holcomb, did indeed rear end V2 which was properly stopped for a red light in the number 2 traveling in lane. (See PBSO crash case #20-048343)

Witness Allan Drutz, identified the defendant, to me, as the driver and sole occupant, of the vehicle at the time of the crash. Mr. Drutz completed a sworn video statement as to the events which transpired surrounding the crash.

D/S Falcon # 28371 relayed to me that Holcomb had articulable indicators of impairment, so she called for a DUI Unit to conduct a possible DUI investigation. D/S Falcon provided me with a written sworn supplemental Probable Cause Affidavit.

OBSERVATION OF DRIVER:

Upon making contact with the driver who was identified by his Florida driver license as Brian Christopher Holcomb, I immediately detected an obvious and really strong odor of an unknown alcoholic beverage emitting from his person and face area. This odor intensified as I spoke to Holcomb. Holcomb had glassy, glazed, and blood shot eyes. Holcomb's speech was slurred, slow, thick, and at times difficult to understand. Holcomb's movements were slow and deliberate, and lethargic with poor coordination. Holcomb had an unsteady gait while walking to my patrol vehicle and had difficulty following directions given to him. Holcomb was wearing a blue t-shirt, maroon shorts, and sandals. All the clothing appeared loose fitting.

DRIVER'S STATEMENTS:

Pre-Miranda: He was not injured in the crash and he believed he was crashed into causing him to collide with v2. Post Miranda on scene Holcomb stated he was home celebrating his 17th wedding anniversary and had 2.5 bottles of Corona beer. Holcomb stated he does not use any controlled substances or take any prescription medications.

Holcomb initially consented to breath however he became extremely emotional with periods of anger. Holcomb was unable to provide a second sample before the instrument timed out. Holcomb was read implied consent and still did not provide a second sample.

Due to Holcombs emotional state, Q&A was not attempted.

ODORS:

A really strong and obvious odor of an unknown alcoholic beverage was emitting from his person and face area which intensified as I spoke to Holcomb.

GENERAL OBSERVATIONS

SPEECH: Holcomb's speech was slurred, slow, and thick, and at times difficult to understand.

ATTITUDE: talkative, sleepy, polite, friendly, cooperative.

CLOTHING: Holcomb was wearing a blue t-shirt, maroon shorts, and sandals. All the clothing appeared loose fitting.

MEDICAL/OTHER: Acromegaly, sciatic nerve. No medications

STATE OF FLORIDA
COUNTY OF PALM BEACH

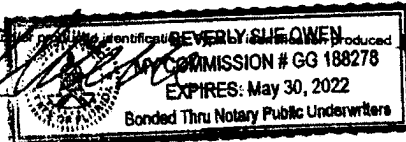
INV D. S. SCHNEIDER
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 11 day of March 20 20 by INV D. S. SCHNEIDER

(Print name of Arresting/Investigative Officer), who is personally known to me and is duly identified by BEVERLY SUE OWEN Produced PERSONALLY KNOWN LEO

Sue Owen (#3184)

Notary Public, Clerk of Court, Officer (F.S.S 117.10)



SCANNED
MAR 12 2020

SUBJECT: Holcomb, Brian, Christopher

CASE NUMBER 20-048367

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- | | |
|---|---|
| <input checked="" type="checkbox"/> LT EYE-LACK OF SMOOTH PURSUIT | <input checked="" type="checkbox"/> RT EYE-LACK OF SMOOTH PURSUIT |
| <input checked="" type="checkbox"/> LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION | <input checked="" type="checkbox"/> RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION |
| <input checked="" type="checkbox"/> LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES | <input checked="" type="checkbox"/> RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES |

Other Observations:

Holcomb would sway roughly in a side to side front to back pattern throughout the task. Holcomb did not touch the tip of the pen as directed to positively identify the point to be tracked, he slide his hand over the light and then touched the tip with his finger. Holcomb was reminded numerous times to track the pen with his/her eyes only. Holcomb failed to keep his head still while tracking the stimulus. Holcomb had VGN.

WALK & TURN:

I attempted explained and demonstrated the instructions for the "Walk & Turn" to Holcomb. Holcomb was unable to maintain the instructional stance. Holcomb was unable to stand on the line and continued to loose his balance and continued stumble and attempt to regain his balance. Holcomb could not maintain his balance while listening to instructions. Holcomb could not perform the task.

ONE LEG STAND:

I explained and demonstrated the instructions for the "One Leg Stand" to Holcomb who stated that he understood. During the task, I observed Holcomb to sway roughly in a side to side, front to back pattern throughout the demonstration phase. Holcomb used his arms to balance raising them more than 6 inches from his sides. Holcomb started hopping in an attempt to maintain balance. Holcomb put his foot down to regain balance numerous times before the 30 seconds had elapsed. Holcomb put foot down three times all before counting to 30 seconds, thusly not being able to complete the task.

FINGER TO NOSE:

I explained and demonstrated the instructions for the "Finger to Nose" task to Holcomb who stated that he understood. During the task, I observed Holcomb to sway roughly in a side to side, front to back pattern throughout the demonstration phase. Holcomb initiated the sequence without being instructed to. Holcomb failed to touch the tip of the finger to the tip of his nose when he initiated the sequences for the first L and R. Due to Holcomb's inability to follow the instructions as described the task was not continued.

ROMBERG ALPHABET:

I explained and demonstrated the instructions for the "Rhomberg Alphabet" task to Holcomb who stated that he understood. During the task, I observed Holcomb to sway roughly in a side to side, front to back pattern throughout the demonstration phase. Holcomb would not keep his eyes closed and had to be reminded numerous times. Holcomb sang the alphabet to include the "Now I know my ABC's...".

BREATH TEST RESULTS: Refusal Refusal

STATE OF FLORIDA
COUNTY OF PALM BEACH

INV D. S. SCHNEIDER

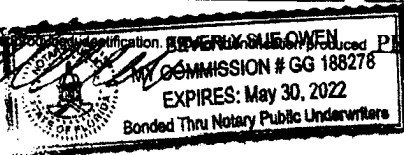
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 11 day of March 2020 by INV D. S. SCHNEIDER

(Print name of Arresting/Investigative Officer), who is personally known to me and is duly identified. BEVERLY SUE OWEN Produced Personally Known LEO

Sue Owen (#3184)

Notary Public, Clerk of Court, Officer (F.S.S 117.10)



SCANNED
MAR 12 2020



**PALM BEACH COUNTY
SHERIFF'S OFFICE**
Florida State Statute Exemption Sheet

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: 2020008068	Date: 03/12/2020
	Specialist Name/ID: T Howard/7185

SCANNED
MAR 12 2020