

0517740

21 CT 18 NB  
ARREST / NOTICE TO APPEAR




2811  
JUVENILE

A D M I N I S T R A T I O N	Agency ORI Number <b>0501700</b>		Agency Name <b>Jupiter Police Department</b>		Agency Report Number (N.T.A.'s only) <b>5   4   21-00001</b>		1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias <b>1</b>		JUVENILE												
	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		If Weapon Seized		Enter Type - <b>NONE</b>		Multiple Clearance Indicator <b>1</b>														
	Location of Arrest (Including Name of Business) <b>6661 W INDIANTOWN RD. JUPITER, FL 33458</b>					Location of Offense (Business Name, Address) <b>6661 W INDIANTOWN RD, JUPITER, FL 33458</b>															
	Date of Arrest <b>01/01/2021</b>		Time of Arrest <b>01:57</b>		Booking Date <b>01/01/2021</b>		Booking Time <b>02:08</b>		Jail Date		Jail Time										
	Name (Last, First, Middle) <b>GROSSMAN, BRIAN</b>		Alias:		Alias (Name, DOB, Soc. Sec. #, Etc.)																
	Race W - White B - Black		Sex <b>M</b>		Date of Birth <b>06/06/1978</b>		Height <b>5'05</b>		Weight <b>175</b>		Eye Color <b>GREEN</b>		Hair Color <b>BROWN</b>		Complexion <b>LIGHT</b>		Build <b>Medium</b>				
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)										Marital Status <b>D</b>		Religion <b>OTHER</b>		Indication of: Alcohol Influence: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk. <input type="checkbox"/> Drug Influence: <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk. <input type="checkbox"/>						
	Local Address (Street, Apt. Number) <b>3900 E INDIANTOWN RD 607-144, <del>33477</del>, FL 33477</b>					(City)		(State)		(Zip)		Phone <b>(561) 222-7456</b>		Residence Type: 1. City 2. County 3. Florida 4. Out of State <b>1</b>							
	Permanent Address (Street, Apt. Number) <b>3900 E INDIANTOWN RD 607-144, <del>33477</del>, FL 33477</b>					(City)		(State)		(Zip)		Phone <b>(561) 222-7456</b>		Address Source <b>FL DL</b>							
	Business Address (Name, Street)					(City)		(State)		(Zip)		Phone		Occupation							
D.V. Number, State <b>G625060782060 / FL</b>		Sec. Sec. Number		INS Number		Place of Birth (City, State) <b>GREENWICH, CT</b>		Citizenship <b>US</b>													
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		Name (Last, First, Middle)										Residence Phone									
Address (Street, Apt. Number)		(City)		(State)		(Zip)		Business Phone													
Notified by: (Name)		Date		Time		JUVENTE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT JAC 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 355-2526) informed of any change of address. <input type="checkbox"/> Yes by: <input type="checkbox"/> No								School Attended		Grade											
Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		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. Disperse/ Distribute		M. Manufacture/ Produce/ 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. Synthetic		U. Unknown Z. Other	
Charge Description <b>DUI - DRIVING UNDER THE INFLUENCE/NORMAL FACULTIES IMPAIRED</b>								Statewide Violation Number <b>316.193(1)(A)</b>		Violation of ORD #											
Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Warrant / Capias Number		Bond							
Charge Description								Statewide Violation Number		Violation of ORD #											
Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Warrant / Capias Number		Bond							
Charge Description								Statewide Violation Number		Violation of ORD #											
Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Warrant / Capias Number		Bond							
Health / Apparent Physical Condition of Defendant								Any knowledge of the following: <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries Explain:													
Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Posted Bond		<input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> South County Mental Health		<input type="checkbox"/> T.O.T. County Jail		PROPERTY - Received By		Released By		Released To											
Transported By		Date Transported		Time Transported		Other <b>JAN 1 AM 4:22</b>															
<input checked="" type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court <input type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.								Location (Court, Room) <b>North County PALM BEACH GARD</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.								Court Date and Time <b>02/03/2021 08:30:00</b>		No Photo Available											
Signature of Defendant (or Juvenile and Parent/Custodian) <b>REFUSED TO SIGN</b>								Date Signed													
HOLD for Other Agency		Signature of Arresting Officer <b>[Signature]</b>		Name Verification (Printed by Arrestee)																	
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal		<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other		Name of Arresting Officer (Print) <b>YOCHUM, CRAIG</b>		I.D. # <b>1185</b>		(PRINT)													
Intake Deputy <b>SMAN GIL</b>		I.D. #		Pouch #		Transporting Officer <b>OFC. C. YOCHUM</b>		I.D. # <b>383</b>		Agency <b>JPD</b>		PAGE <b>1 OF 1</b>									
Witness here if subject signed with an "X".																					

PROBABLE CAUSE AFFIDAVIT

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

1 JUVENILE

OBT'S Number		Agency ORI Number <b>FL 0501700</b>		Agency Name <b>JUPITER POLICE DEPARTMENT</b>		Agency Report Number <b>5   4   21-000001</b>	
Charge Type: Check as many as apply.		<input type="checkbox"/> 1. Felony		<input type="checkbox"/> 3. Misdemeanor		<input type="checkbox"/> 5. Ordinance	
		<input type="checkbox"/> 2. Traffic Felony		<input checked="" type="checkbox"/> 4. Traffic Misdemeanor		<input type="checkbox"/> 6. Other	
Name (Last, First, Middle) <b>GROSSMAN, BRIAN</b>		Alias		Race <b>W</b>	Sex <b>M</b>	Date of Birth <b>06/06/1978</b>	
Charge Description <b>316.193(1)(A) DUI - DRIVING UNDER THE INFLUENCE/NORMAL</b>		Charge Description					
Charge Description		Charge Description					
Victim's Name (Last, First, Middle) <b>State Of Florida</b>		Race		Sex		Date of Birth	
Local Address (Street, Apt. Number)		(City)		(State)		(Zip)	
Business Address (Name, Street)		(City)		(State)		(Zip)	
<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 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>1</u> day of <u>January</u>, <u>2021</u> at <u>01:57</u> (Specifically include facts constituting cause for arrest.)</p> <p>On 01/01/2021 at approximately 0126 hours, I responded to the area of Center St. and N Orange Ave. in the Town of Jupiter, Palm Beach County, FL in reference to a hit-and-run where the caller (victim) was following the suspect vehicle. At the time, I was driving a fully-marked Jupiter Police Department patrol vehicle (vehicle 1425), I was wearing a JPD uniform clearly identifying myself as a Jupiter Police Officer, and I was wearing my department-issued Axon body camera.</p> <p>Dispatch advised the original location of the incident was in the Village of Tequesta's jurisdiction and that the caller was following the suspect vehicle which was described as a black GMC truck bearing FL tag # JRAD17. The caller provided updates to dispatch which was relayed to officers responding. Officer Lopez located the vehicle traveling eastbound on S.R. 706 (W Indiantown Rd.) turning right (north) on N Central Blvd., in the Town of Jupiter's jurisdiction. Due to the matching description of the suspect vehicle, Officer Lopez had reasonable suspicion that the vehicle was involved in the hit-and-run and conducted a traffic stop. The vehicle pulled into the parking lot of 6661 W Indiantown Rd. (Mobil - Jupiter West Plaza).</p> <p>Officer Lopez advised me that, when he stopped the vehicle, he observed the driver [later identified to be Brian Grossman (w/m; 06/06/1978)] and front seat passenger [identified to be Vincent Petress (w/m; 08/10/1981)] switch seats through the open rear window of the truck. When Officer Lopez arrived at the driver window, Petress was sitting in the driver seat and Grossman was sitting in the front passenger seat. See supplement from Officer Lopez.</p> <p>Tequesta PD Officer Jarrell arrived on scene and conducted his crash investigation. He ultimately determined Grossman was the driver of the GMC at the time of the crash and issued him a citation.</p>							
SWORN AND SUBSCRIBED BEFORE ME		 JOSHUA BELL MY COMMISSION #GG346008 EXPIRES: JUN 18, 2023 Bonded through 1st State Insurance		 SIGNATURE OF ARRESTING/INVESTIGATING OFFICER <b>YOCHUM, CRAIG (1185)</b> NAME OF OFFICER (PLEASE PRINT)			
 NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)		<u>01/01/2021</u> DATE		<u>01/01/2021</u> DATE			

PROBABLE CAUSE AFFIDAVIT  
SUPPLEMENT

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

**1** JUVENILE

OBTS Number		
Agency ORI Number <b>FL 0501700</b>	Agency Name <b>JUPITER POLICE DEPARTMENT</b>	Agency Report Number <b>5   4   21-000001</b>
Charge Type: Check as many as apply.	Special Notes:	
<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		

Name (Last, First, Middle) <b>GROSSMAN, BRIAN</b>	Alias	Race <b>W</b>	Sex <b>M</b>	Date of Birth <b>06/06/1978</b>
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I approached the front passenger window and observed Grossman in the seat. I ordered Grossman out of the vehicle and he complied, questioning the reason why. I observed Grossman had no shoes on and that the key fob to the vehicle was between his feet. Grossman located his right shoe but looked around for his left shoe (which he ultimately located in the rear seat of the truck). I observed Grossman had bloodshot/glassy eyes, a flushed face, slurred speech, and the strong odor of an unknown alcoholic beverage on his breath which intensified as he spoke. I also observed he was wearing a neon green wristband typically handed out by bars for admission.

Grossman walked to the front of Officer Lopez' patrol vehicle where I advised him Officer Jarrell was conducting a crash investigation and I was conducting a DUI investigation. I advised Grossman of his Miranda Warnings which he advised he understood. Grossman was not willing to talk to me and did not wish to complete roadside tasks. I advised Grossman of his Taylor Warnings twice before he advised he understood. I again requested Grossman complete roadside tasks and he refused.

I ultimately placed Grossman under arrest for DUI and transported him to the Palm Beach County Breath Alcohol Testing Facility. I conducted a 20 minute observation period to ensure he did not ingest or regurgitate anything. At the conclusion of the observation period, I requested Grossman provide a lawful sample of his breath for the purpose of determining the alcohol content. Grossman refused. I advised Grossman of Implied Consent (excluding the CDL portion of Implied Consent), confirmed he understood, and again requested he provide a breath sample. Grossman refused.

Based on the aforementioned facts resulting from my investigation, I find Probable Cause exists to charge Brian Grossman with DUI pursuant to FSS 316.193(1)(a).

NOT A CERTIFIED COPY

ADMINISTRATIVE	SWORN AND SUBSCRIBED BEFORE ME	 JOSHUA BELL MY COMMISSION #GG346008 EXPIRES: JUN 18, 2023 Covered through 1st State Insurance	 SIGNATURE OF ARRESTING INVESTIGATING OFFICER
	NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S. 117.10) _____ 01/01/2021 DATE		
			PAGE 2 OF 2

# TESTING FACILITY TASK REPORT

AGENCY: JPD

SUBJECT: GROSSMAN, BRIAN

CASE NUMBER: 21-021087

DATE: Jan 1, 2021

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 0314

ENDING TIME: 0316

BREATH TESTS RESULTS: 1) R TIME 0316 A.M.  P.M.

2) N/A TIME XX A.M.  P.M.

**REFUSED**

3) N/A TIME XX A.M.  P.M.

4) N/A TIME XX A.M.  P.M.

BREATH OPERATOR: JOSHUA J BELL #8656

MAINTENANCE TECHNICAN: J. KARLECKE #6467

## TESTING OFFICER'S OBSERVATIONS

SPEECH:

ATTITUDE: QUIET, COOPERATIVE

CLOTHING: BLACK LONG SLEEVE BUTTON UP SHIRT, BLACK PANTS, BROWN BOOTS

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

## OTHER:

EYES: GLASSY

## COMMENTS:

ARRIVED AT DUI TESTING FACILITY AND BEGAN THE 20 MINUTE OBSERVATION AT 0235 HOURS

SUBJECT STATED HE WOULD NOT TAKE BREATH TEST

A/O READ I.C

SUBJECT STATED HE UNDERSTOOD I.C AND REFUSED TO TAKE BREATH TEST

A/O READ RIGHTS ON SCENE

A/O DID NOT CONDUCTED Q AND A

**REFUSED**



**PALM BEACH COUNTY SHERIFF'S OFFICE  
DUI TESTING FACILITY  
INFORMATION SHEET**

PBSO CASE # 21-021087 PBSO ZONE 3-14

AGENCY CASE # 21-000001 CRASH CASE # \_\_\_\_\_

TIME OF STOP/CRASH 0130 DATE 01/01/2021 DAY Friday

SUBJECT'S NAME Grossman Brian RACE W SEX M  
LAST FIRST MID

HGT 505 WGT 175 DOB 06/06/1978

LOCATION 6661 W Indiantown Rd. Jupiter, FL 33458

ARRESTING OFFICER'S NAME & ID Craig Yochum #383 AGENCY Jupiter PD

DIVISION: Nights 1 Traffic

NOTIFIED BY COMMO Yes  
 ARRIVAL AT FACILITY 0235  
 ARREST TIME 0157

BREATH RESULTS:

**REFUSED**

1)

2)

3)

4)

TESTING OFFICER'S ID 8656 PBSO VIDEOTAPE # N/A

NOT A CERTIFIED COPY

STATE OF FLORIDA
DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES
AFFIDAVIT OF REFUSAL TO SUBMIT TO
BREATH AND/OR URINE TEST

I, Officer Craig Yochum, a duly certified Law Enforcement Officer or Correctional Officer,
(Name of Officer reading Implied Consent Warning)

am a member of Jupiter Police Department, and I do swear
(Name of law enforcement agency)

or affirm that on or about the 1st day of January, 20 21, at 1:57 P.M. A.M.

DRIVER Brian Grossman
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# G625-060-78-206-0, state of Florida, was placed under lawful arrest for

the offense of DUI by Officer Craig Yochum and
(Name of Arresting Officer)

issued Citation # ADB9BFE

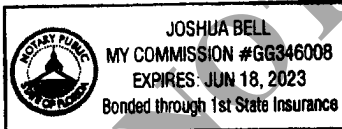
That on or about the 1st day of January, 20 21, at 3:16 P.M. A.M.

in Palm Beach County,

I requested that the driver submit to a Xbreath and/or urine test to determine his or her blood alcohol level and/or the presence of chemical or controlled substances. I informed the driver that the refusal to submit to such test(s) would result in the suspension of his or her driving privilege for a period of one (1) year for a first refusal, or for a period of eighteen (18) months if his or her driving privilege had been previously suspended for refusing to submit to a breath, urine or blood test. I also informed the driver that he or she commits a misdemeanor by refusing to submit to a lawful test as requested above if his or her driving privilege has been previously suspended for refusal to submit to a lawful test of his or her breath, urine, or blood. Additionally, I informed the driver that if he or she holds a CDL, or was operating a CMV, refusal will result in the disqualification of the Commercial Driver's License/driving privilege for a period of one (1) year in the case of a first refusal or permanently if he or she has previously been disqualified as a result of a refusal to submit to any such lawful test. Nonetheless, the driver refused to submit to the test(s) requested.

[Signature]
Signature of Law Enforcement Officer or Correctional Officer

THE AFFIDAVIT MUST BE NOTARIZED OR ATTESTED TO (F.S. 117.10)



(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before

me this 1st day of January, 20 21,

by Officer Craig Yochum # 383,

who is personally known to me or who has produced

Personally Known as identification

Notary Public [Signature]

The foregoing instrument was sworn and subscribed before me:

Signature of Attesting Officer

Title

Date 01/01/2021

Note: Mail or hand deliver to the designated Bureau of Administrative Reviews office, Department of Highway Safety and Motor Vehicles, with the driver's license, the appropriate copy of the UTC, and the probable cause affidavit.

SUBJECT: Grassman, Brian CASE NUMBER: 21-000001

### QUESTIONS AND ANSWERS

I AM NOW GOING TO ASK YOU SOME QUESTIONS. WITH THESE RIGHTS IN MIND, YOU MAY ANSWER SOME OF, ALL OF, OR NONE OF THE FOLLOWING QUESTIONS AS YOU LIKE.

WERE YOU OPERATING A MOTOR VEHICLE AT THE TIME OF THE STOP/ACCIDENT? \_\_\_\_\_

WHERE WERE YOU GOING? \_\_\_\_\_

WHAT STREET OR HIGHWAY WERE YOU ON? \_\_\_\_\_

DIRECTION OF TRAVEL? \_\_\_\_\_ WHERE DID YOU START? \_\_\_\_\_

WHAT TIME DID YOU START? \_\_\_\_\_ WHAT TIME IS IT NOW? \_\_\_\_\_

WHAT IS TODAY'S DATE? \_\_\_\_\_ WHAT DAY OF THE WEEK IS IT? \_\_\_\_\_

WHAT COUNTY AND CITY ARE YOU IN NOW? \_\_\_\_\_

WHEN DID YOU LAST EAT? \_\_\_\_\_ WHAT DID YOU EAT? \_\_\_\_\_

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? \_\_\_\_\_

HOW MUCH DO YOU WEIGH? \_\_\_\_\_ HAVE YOU BEEN DRINKING? \_\_\_\_\_ WHAT? \_\_\_\_\_

HOW MUCH? \_\_\_\_\_ WHERE? \_\_\_\_\_ WITH WHOM? \_\_\_\_\_

WHEN DID YOU HAVE YOUR FIRST DRINK? \_\_\_\_\_ AND YOUR LAST DRINK? \_\_\_\_\_

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? \_\_\_\_\_

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? \_\_\_\_\_ ARE YOU UNDER THE INFLUENCE? \_\_\_\_\_

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? \_\_\_\_\_ HOW MUCH? \_\_\_\_\_

WHAT? \_\_\_\_\_ WHERE? \_\_\_\_\_ WHEN? \_\_\_\_\_

WHAT LINE OF WORK ARE YOU IN? \_\_\_\_\_ WHEN DID YOU LAST WORK? \_\_\_\_\_

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? \_\_\_\_\_ WHAT? \_\_\_\_\_

ARE YOU SICK OR INJURED? \_\_\_\_\_ WHAT'S WRONG? \_\_\_\_\_

DO YOU LIMP? \_\_\_\_\_ DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? \_\_\_\_\_

WERE YOU IN AN ACCIDENT TODAY? \_\_\_\_\_

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? \_\_\_\_\_ WHEN? \_\_\_\_\_

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? \_\_\_\_\_ WHO? \_\_\_\_\_ WHY? \_\_\_\_\_

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? \_\_\_\_\_ WHAT? \_\_\_\_\_ WHEN? \_\_\_\_\_

DO YOU HAVE:

- EPILEPSY? \_\_\_\_\_
- GLASS EYE? \_\_\_\_\_
- FALSE TEETH? \_\_\_\_\_
- EAR INFECTION? \_\_\_\_\_
- INNER EAR TROUBLE? \_\_\_\_\_
- DIABETES? \_\_\_\_\_

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? \_\_\_\_\_

DO YOU TAKE INSULIN? \_\_\_\_\_ IF SO, WHEN WAS YOUR LAST INJECTION? \_\_\_\_\_

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? \_\_\_\_\_ WHERE? \_\_\_\_\_

INTERVIEWER: OFC. C. Yochum #363

SUBJECT: Grossman, Brian

CASE NUMBER: 21-000001

## IMPLIED CONSENT FOR DUI IN A MOTOR VEHICLE

NOTE: READ ONLY THE PARAGRAPH APPLICABLE TO THE TYPE OF TEST YOU ARE REQUESTING.

I am now requesting that you submit to a lawful test of your BREATH for the purpose of determining its alcohol content.

-OR-

I am now requesting that you submit to a lawful test of your URINE for the purpose of detecting the presence of chemical or controlled substances.

-OR-

I am now requesting that you submit to a lawful test of your BLOOD for the purpose of detecting its alcohol content and the presence of chemical or controlled substances.

NOTE: READ ONLY IF THE SUBJECT DOES NOT COMPLY WITH YOUR REQUEST.

I am \_\_\_\_\_ of the \_\_\_\_\_

If you fail to submit to the test I have requested of you, your privilege to operate a motor vehicle will be suspended for a period of one (1) year for a first refusal, or eighteen (18) months if your privilege has been previously suspended as a result of a refusal to submit to a lawful test of your breath, urine or blood. Additionally, if you refuse to submit to the test I have requested of you and if your driving privilege has been previously suspended for a prior refusal to submit to a lawful test of your breath, urine or blood, you will be committing a misdemeanor. Refusal to submit to the test I have requested of you is admissible into evidence in any criminal proceeding.

SUBJECT'S SIGNATURE: (X) Read on camera

## CONSTITUTIONAL WARNINGS

I AM REQUIRED TO WARN YOU BEFORE YOU MAKE ANY STATEMENTS THAT YOU HAVE THE FOLLOWING RIGHTS:

1. You have the right to remain silent and not answer any questions.
2. Any statement must be freely and voluntarily given.
3. You have the right to the presence of a lawyer of your choice before you make any statement and during any questioning.
4. If you cannot afford a lawyer, you are entitled to the presence of a court appointed lawyer before you make any statements and during any questioning.
5. If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent.
6. I can make no threats or promises to induce you to make a statement. This must be of your own free will.
7. Any statement can and will be used against you in a court of law.

SUSPECT'S SIGNATURE: (X) NO + Read on camera



**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"/>			
	<input type="checkbox"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2021000024	Date: 01/02/2021
	Specialist Name/ID: AM/31562