

#0238475

21CT3294 NB # 3053

OBTN Number		ARREST / NOTICE TO APPEAR			1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Captus		1	JUVENILE	
Agency ORI Number <b>0501700</b>		Agency Name <b>Jupiter Police Department</b>			Agency Report Number (N.T.A.'s only) <b>514 21-000714</b>						
Charge Type: Check as many as apply 1. Felony 2. Traffic Felony		3. Misdemeanor 4. Traffic Misdemeanor		5. Ordinance 6. Other		If Weapon Seized Enter Type <b>NONE</b>		Multiple Clearance Indicator			
Location of Arrest (Including Name of Business) <b>6779 W INDIANTOWN RD</b>					Location of Offense (Business Name, Address) <b>6779 W INDIANTOWN RD, JUPITER, FL 33458</b>						
Date of Arrest <b>02/27/2021</b>	Time of Arrest <b>22:51</b>	Booking Date <b>02/27/2021</b>	Booking Time <b>23:01</b>	Jail Date <b>// ::</b>	Jail Time	Location of Vehicle					
Name (Last, First, Middle) <b>MOORE, BRIAN PATRICK</b>											
Alias: _____ Alias (Name, DOB, Soc. Sec. #, Etc.) _____											
Race W - White A - Black O - Oriental/Asian <b>W</b>	Sex <b>M</b>	Date of Birth <b>02/15/1975</b>	Height <b>5'11</b>	Weight <b>215</b>	Eye Color <b>BLUE</b>	Hair Color <b>BROWN</b>	Complexion <b>LIGHT</b>	Build <b>Large</b>			
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)					Marital Status <b>M</b>	Religion <b>CHRISTIAN</b>	Indication of Alcohol Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk. <input type="checkbox"/>				
Local Address (Street, Apt. Number) <b>1841 SW CAPEHART AVE, PORT ST LUCIE, FL 34953</b>					Phone <b>(561) 253-4720</b>		Residence Type 1. City 3. Florida 2. County 4. Out of State				
Permanent Address (Street, Apt. Number) <b>1841 SW CAPEHART AVE, PORT ST LUCIE, FL 34953</b>					Phone <b>(561) 253-4720</b>		Address Source <b>VERBAL</b>				
Business Address (Name, Street) _____					Phone _____		Occupation _____				
DL Number, State <b>M600075750550 / FL</b>		Sex, Eye, Hair		INS Number		Place of Birth (City, State) <b>WEST PALM BEACH, FL</b>		Citizenship <b>US</b>			
Co-Defendant Name (Last, First, Middle)					Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile			
Co-Defendant Name (Last, First, Middle)					Race	Sex	Date of Birth	<input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile			
<input type="checkbox"/> Parent <input type="checkbox"/> Other: _____ Name (Last, First, Middle)					Residence Phone						
<input type="checkbox"/> Legal Custodian					Business Phone						
Address (Street, Apt. Number) _____											
Notified by: (Name)					Date	Time	JUVENILE DISPOSITION 1. Bonded/Processed within Department and Released 2. TOT IAC 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.					School Attended			Grade			
<input type="checkbox"/> Yes, by: _____ <input type="checkbox"/> No					Property Crime? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Description of Property <b>VEHICLE</b>			Value of Property <b>\$15,000</b>		
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. 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 - DAMAGE TO PERSON/PROPERTY</b>					Statute Violation Number <b>316.193(3)(C)(1)</b>			Violation of ORD #			
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Captus Number	Bond				
	<b>N</b>			<b>1</b>	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N						
Charge Description					Statute Violation Number			Violation of ORD #			
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Captus Number	Bond				
					<input type="checkbox"/> Y <input type="checkbox"/> N						
Charge Description					Statute Violation Number			Violation of ORD #			
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Captus Number	Bond				
					<input type="checkbox"/> Y <input type="checkbox"/> N						
Health / Apparent Physical Condition of Defendant					Any knowledge of the following: <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input checked="" type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries						
Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> T.O.T. County Jail					PROPERTY - Received By			Released By		Released To	
<input type="checkbox"/> Posted Bond <input type="checkbox"/> South County Mental Health					Date Transported			Time Transported		Other	
Transported By											
<input checked="" type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court					Location (Court, Room) <b>North County PALM BEACH GARD</b>						
<input type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.					Court Date and Time <b>03/31/2021 08:30:00</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.					No Photo Available						
Signature of Defendant (or Juvenile and Parent/Custodian)					Date Signed						
HOLD for Other Agency					Signature of Arresting Officer <b>Ryan Ferguson</b>			Name Verification (Printed by Arrestee) <b>SCANNED</b>			
<input type="checkbox"/> Dangerous <input type="checkbox"/> Restricted Arrest					Name of Arresting Officer (Print) <b>FERGUSON, RYAN</b>			(PRINT) <b>MAR 03 2021</b>			
<input type="checkbox"/> Suicidal <input type="checkbox"/> Other					ID # <b>1202</b>			PAGE <b>1 OF 1</b>			
Initials of Defendant <b>D. Moore</b>					Transporting Officer <b>R. FERGUSON</b>			ID # <b>385</b> Agency <b>JPD</b>			
					Witness here if subject signed with an "X".						

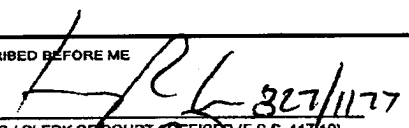

PROBABLE CAUSE AFFIDAVIT

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

1

JUVENILE

A D M I N I S T R A T I V E	OBTS Number		Agency ORI Number <b>FL 0501700</b>		Agency Name <b>JUPITER POLICE DEPARTMENT</b>		Agency Report Number <b>5   4   21-000714</b>	
	Charge Type: Check as many as apply.		Special Notes:		Name (Last, First, Middle) <b>MOORE, BRIAN PATRICK</b>		Race <b>W</b>	Sex <b>M</b>
C H A R G E S	<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			
V I C T I M	Victim's Name (Last, First, Middle) <b>State Of Florida</b>		Local Address (Street, Apt. Number) (City) (State) (Zip)		Phone		Address Source	
	Business Address (Name, Street) (City) (State) (Zip)		Phone		Occupation			
<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. The Person taken into custody . . .</p> <p><input checked="" type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> was observed by <u>TINA</u> who told <u>A.O.</u> that he/she saw the arrested person commit the below acts. <input type="checkbox"/> confessed to _____ <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation. admitting to the below facts.</p> <p>On the <u>28</u> day of <u>February</u>, <u>2021</u> at <u>02:17</u> (Specifically include facts constituting cause for arrest.)</p>								
<p>Body Worn Cameras were utilized for the following:</p> <p>On February 27th, 2021 at approximately 2207 hours, I was dispatched to 6779 W. Indiantown Rd (Jupiter West Plaza) in reference to a vehicle crash.</p> <p>Upon my arrival, I made contact with Tina Marie Mecomonaco (W/F - 02/02/1979) who was driving her 2018 4dr Gray Hyundai bearing FL tag JTYM45 westbound on W. Indiantown Rd towards the stop light at 67th Rd N. Mecomonaco advised she was driving in the outer lane and she had a green light indicating she had the right of way. Mecomonaco advised she observed a white truck driving eastbound on W. Indiantown Rd towards the intersection of 67th Rd N. Mecomonaco advised there was a black vehicle standing at the light to turn northbound into the Jupiter West Plaza. She advised the white truck drove around the black vehicle and ran the red light to turn into Jupiter West Plaza. Mecomonaco advised she attempted to veer her vehicle out of the way; however, the truck struck her, caused her to do a 180-degree turn, and stopped blocking the entrance of Jupiter West Plaza.</p> <p>PFC. Counts advised he spoke to three witnesses who observed the vehicle crash. PFC Counts advised the witness's statements were all consistent with each other. PFC. Counts advised the witness's all identified the driver of the truck as a white male who was later identified as Brian Patrick Moore (W/M - 02/15/1975). Moore was identified via his Florida Driver's License.</p> <p>I proceeded to make contact with Moore who advised he was driving his 2019 white Ford F-350 bearing FL tag Z839JP eastbound on W. Indiantown Rd. towards the intersection of 67rd N. He advised he was turning Northbound into the Jupiter West Plaza to park in the parking lot then the vehicles crashed.</p>								
<p>SWORN AND SUBSCRIBED BEFORE ME</p> <p><u>[Signature]</u> 3/27/17 NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) DATE <u>2/28/2021</u></p> <p><u>[Signature]</u> SIGNATURE OF ARRESTING / INVESTIGATING OFFICER <b>FERGUSON, RYAN (1202)</b> NAME OF OFFICER (PLEASE PRINT) DATE <u>02/28/2021</u></p> <p>SCANNED MAR 03 2021 PAGE 1 OF 2</p>								

OBTs Number Agency ORI Number <b>FL 0501700</b>	<b>PROBABLE CAUSE AFFIDAVIT SUPPLEMENT</b>	1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Copies	<b>1</b>	JUVENILE
Agency Name <b>JUPITER POLICE DEPARTMENT</b>	Agency Report Number <b>5   4   21-000714</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			Special Notes:		
Name (Last, First, Middle) <b>MOORE, BRIAN PATRICK</b>		Race <b>W</b>	Sex <b>M</b>	Date of Birth <b>02/15/1975</b>	
<p>I advised Moore he was at fault of the vehicle crash and I that I am now conducting a DUI Investigation. I read Moore his Miranda Warning from a Pre Printed Miranda Right Card to which Moore advised he understood his rights. Post Miranda, Moore advised he was coming back from picking up his friend, Joseph Hubert Garberoglio (W/M - 03/08/1974) from Jupiter Farms. Moore admitted to drinking alcoholic beverages throughout the day. Moore had blood shot glossy eyes, slurred speech, his face was flushed red and he appeared sweaty. Moore also had a smell of an unknown alcoholic beverage coming from his person that grew when he spoke.</p> <p>Due to my observations of Moore, I asked him if he would like to perform the Standardized Field Sobriety Task's to which he hesitated then advised yes. While conducting the Horizontal Gaze Nystagmus on Moore, his body would sway. During the HGN Moore, stopped and refused to continue the task. I asked Moore if he would like to continue performing the Standardized Field Sobriety Tasks to which he refused. I advised Moore of Taylor Warning's and asked him again if he would like to perform the Standardized Field Sobriety Task's to which he again refused.</p> <p>I advised Moore he was being placed under arrest for DUI. I placed Moore into handcuffs behind his back that were checked for proper spacing and double-locked to prevent tightening. Due to Moore broad shoulders, I placed two handcuffs on him. Moore was issued a citation for DUI w/ Property damage and running a red light.</p> <p>Moore was transported to the Jupiter Medical Center for medical clearance. Moore became very agitated and did not allow medical personnel to do their job. Medical staff had to place restraints on Moore to make sure he was ok. I asked Moore if he would consent to a blood draw to determine his blood alcoholic content to which he refused. Once Moore was medically cleared, he was transported to the Palm Beach County Jail with no further incident.</p> <p>Based on my investigation and the totality of the circumstances, I found probable cause to arrest Brian Patrick Moore for DUI w/ Property Damage because he did drive and was in actual physical control of a vehicle while under the influence of alcoholic beverages as set forth in Florida Statute 877.111, to the extent that his/her normal faculties were impaired, or while having a blood alcohol level of .08 or more grams of alcohol per 100 milliliters of blood or breath alcohol level of .08 or more grams of alcohol per 210 liters of breath, and, during the course of operating a vehicle, and by reason of such operation, did cause or contribute to causing damage to the person or property of Tina Marie Mecomonaco (1 DEG MISD)</p>					
SWORN AND SUBSCRIBED BEFORE ME  NOTARY PUBLIC / CLERK OF COURT, OFFICER (F.S.S. 117.10) <b>2/28/2021</b> DATE		SIGNATURE OF ARRESTING / INVESTIGATING OFFICER  <b>FERGUSON, RYAN (1202)</b> NAME OF OFFICER (PLEASE PRINT) <b>02/28/2021</b> DATE			

**SCANNED**  
**MAR 03 2021**  
 2 OF 2

STATE OF FLORIDA  
DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES  
AFFIDAVIT OF REFUSAL TO SUBMIT TO  
BLOOD TEST

I, Paul Ferguson, 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 27 day of February, 20 21, at 2207  P.M.  A.M.

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

DL# M-600-075-75-055-0, state of Florida, appeared for treatment at a hospital,  
clinic, or other medical facility pursuant to s. 316.1932(I)(c), Florida Statutes; and a breath or urine test was impossible or impractical.

That on or about the 28 day of February, 20 21, at 0003  P.M.  A.M.  
in PALM BEACH County,

I requested that the driver submit to a blood test to determine his or her blood alcohol level and/or the presence of chemical or controlled substances in his or her blood. I informed the driver that refusal to submit to a blood test 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 if he or she holds a CDL, or was operating a CMV, refusal would 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 had been previously disqualified as a result of a refusal to submit to a breath, urine or blood test. The driver nonetheless refused to submit to a blood test.

[Signature]  
Signature of Law Enforcement Officer or  
Correctional Officer

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

The foregoing instrument was sworn and subscribed before me:

(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before  
me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_,  
by \_\_\_\_\_,  
who is personally known to me or who has produced  
\_\_\_\_\_ as identification

Notary Public \_\_\_\_\_

HSMV-BAR1002 (REV. 10/16)

[Signature] 327/1127  
Signature of Attesting Officer  
Title OFFICER  
Date 2/28/2021

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.

SCANNED  
MAR 03 2021



**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: 2021005012	Date: 03/01/2021
	Specialist Name/ID: T Howard/7185