

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

1 Juvenile

	OBTS Number		
ADMINISTRATIVE	Agency ORI Number FL0-502600	Agency Name PALM BEACH GARDENS POLICE DEPARTMENT	Agency Report Number (N.T.A.'s only) 78-2100688
	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	Weapon Seized / Type <input type="checkbox"/> 1. Yes <input checked="" type="checkbox"/> 2. No	Multiple Clearance Indicator
	Location of Arrest (Including Name of Business) 3360 Burns Rd. Palm Beach Gardens, FL 33410 (Gardens Hospital)		Location of Offense (Business Name, Address) 3360 Burns Rd. Palm Beach Gardens, FL 33410 (Gardens Hospital)
	Date of Arrest 02/14/2021	Time of Arrest 02:06	Location of Vehicle REAFF'S TOWING & RECOVERY 4301 East Avenue, West Palm Beach, FL 33405
	Name (Last, First, Middle) Adler, Bruce, Howard		
	Alias (Name, DOB, Soc. Sec. #, Etc.)		
DEFENDANT	Race W - White I - American Indian B - Black O - Oriental/Asian W	Sex M	Date of Birth 06/29/1947
	Height 5'08"	Weight 155	Eye Color Brown
	Hair Color Brown	Complexion Light	Build Small
	Scars, Marks, Tattoos; Unique Physical Features (Location, Type, Description) None		Marital Status Married
Local Address (Street, Apt. Number) 2700 N Ocean Dr Unit 1605B Riviera Beach FL 33404		Phone (201) 362-7764	Residence Type: 1. City 2. County 3. Florida 4. Out of State 2
Permanent Address (Street, Apt. Number) 2700 N Ocean Dr Unit 1605B Riviera Beach FL 33404		Phone ()	Address Source FL DL
Business Address (Name, Street) ()		Phone ()	Occupation Investor
DL Number, State A346068472290 FL	Soc. Sec. Number ()	INS Number ()	Place of Birth (City, State) Queens, NY
Co-Defendant Name (Last, First, Middle)		Race	Sex
Co-Defendant Name (Last, First, Middle)		Race	Sex
Parent Name (Last, First, Middle)		Residence Phone	
Address (Street, Apt. Number)		Business Phone	
Notified by: (Name)		Date	Time
Released To: (Name)		Relationship	Date
The above address 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 (Phone 356-2526) informed of any change of address. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No (Reason)		School Attended	Grade
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No	Description of Property	Value of Property	
Drug Activity S. Sell N. N/A P. Possess	R. Struggle D. Deliver E. Use	K. Dispense/ Distribute	M. Manufacture/ Produce/ Cultivate
Charge Description DUI		Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N
Drug Activity Drug Type Amount / Unit		Offense #	Statute Violation Number 316.193(1)(A)
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N
Drug Activity Drug Type Amount / Unit		Offense #	Statute Violation Number
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N
Drug Activity Drug Type Amount / Unit		Offense #	Statute Violation Number
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N
Drug Activity Drug Type Amount / Unit		Offense #	Statute Violation Number
1. Location (Court Room Number, Address) NORTH COUNTY COURTHOUSE, 3188 PGA BOULEVARD, PALM BEACH GARDENS, FL 33410 - PH: (561) 662-6700			
Court Date and Time Month March Day 17 Year 2021 Time 10:00 AM <input checked="" type="checkbox"/> PM <input type="checkbox"/>			
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 UNWILLINGLY 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 (or Juvenile and Parent /Custodian)		Date Signed 02/14/2021	
HOLD for other Agency Name: <input type="checkbox"/> Dangerous <input type="checkbox"/> Released Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other:		Name Verification (Printed by Arresting Officer) (PRINT) FEB 14 2021 5:30	
Signature of Arresting Officer James Lovett		I.D. # #523	
Intake Deputy James Lovett		Agency ()	
Witness here if subject signed with an "X"			1 OF 1

DISTRIBUTION: WHITE - COURT COPY

GREEN - STATE ATTORNEY

YELLOW - AGENCY

PINK - AGENCY

GOLD - DEPARTMENT

0521412

283
FEB 17 2021

SUBJECT: Adler, Bruce, Howard

CASE NUMBER 21000688

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:

I observed a 3-4 inch orbital sway during the task. Adler did not keep his hands at his side during the task. Adler did not keep his feet together during the task. Adler's eyes were bloodshot, glassy, and his eyelids were slapping. Adler had to be told multiple times not to move his head. Adler did not track the stimulus to maximum deviation multiple times. Adler looked away from the stimulus multiple times.

WALK & TURN:

Adler stated he understood all instructions. Adler did not remain in the position prior to starting the task. When asked to stand back in the position he stood with his feet together and hands at his sides. Adler counted step 1 prior to taking step 1. He then counted step 1 as step 2, step 2 as step 3, and continued being off 1 step the rest of the first sequence. During the first sequence he took 10 steps and counted 11 steps. Adler missed all heel to toe steps during the first sequence. Adler stepped off the line multiple times during the first sequence. Adler did not perform the turn and had to be reminded of it. He then performed an improper turn. Adler missed all heel to toe steps during the second sequence.

ONE LEG STAND:

Adler stated that he understood all instructions. Adler did not look at his raised foot during the task. Adler placed his foot down after the first few seconds of the task. Adler would then raise his foot and counted one thousand five and put his foot down. He then raised his foot again and counted one thousand six and put his foot down. He then raised his foot and counted one thousand seven. He counted to count in the manner, raising his foot and putting his foot down until the task was over.

DRE S. McGillicuddy, Jupiter Police Department, conducted a DRE evaluation at the BAT. His evaluation concluded that Adler was under the influence of chemical or controlled substance. See DRE McGillicuddy's DRE report for full details.

BREATH TEST RESULTS: 1) .000 2) .000 3) 4)

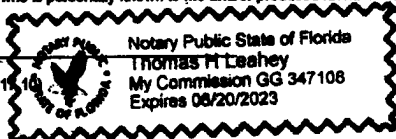
STATE OF FLORIDA
COUNTY OF PALM BEACH

[Signature]
(Signature of Arresting/Investigative Officer)

This foregoing instrument was sworn to or affirmed and subscribed before me this 14 day of February 2021 by Ofc. James Lovett

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced Personally Known

T. Leahy



Notary Public, Clerk of Court, Officer (F.S.S. 119.16)

SCANNED
FEB 17 2021

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 14 DAY OF February 2021, AT 0206 AM PM

SUBJECT: Adler, Bruce, Howard CASE NUMBER: 21000688

AGENCY: PALM BEACH GARDENS POLICE DEPT. ARRESTING OFFICER: Ofc. James Lovett #523
PERSONAL CONTACT

DRIVING PATTERN: ACTUAL PHYSICAL CONTROL (PHYSICAL EVIDENCE OR STATEMENTS PUTTING DEF. BEHIND WHEEL OF VEHICLE)
Ofc. Hennessy observed a yellow Volkswagen Beetle travelling Weston Burns behind a Riviera Beach Rescue truck that had its emergency lights activated. The vehicle crossed was failing to maintain a single lane and struck the median curb in front of 3355 Burns Road. The vehicle was following the ambulance at a distance of approximately 25 feet and nearly rear-ended the ambulance as it turned into Gardens Medical Center where a traffic stop was initiated. The vehicle continued following the ambulance into the ambulance bay at Gardens Medical Center where is struck another curb on the passenger side. I then responded to the scene as a backup officer. I made contact with the driver and sole occupant of the vehicle, Bruce Adler.

OBSERVATION OF DRIVER:
I observed Adler's eyes to be blood shot, gassy, and his eyelids sagging. Adler's speech was slurred. Adler began eating from a bag of peanuts during my encounter with him. I asked Adler to exit the vehicle to verify that he was in a safe condition to drive and he agreed. Adler used the driver door and the driver side of the vehicle to exit. Upon his exit, I observed food residue on Adler's clothing and face.

DRIVER'S STATEMENTS:
Adler stated during the traffic that he did not drink anything. At the BAT Adler stated he takes Flomax, Lipitor, Aripiprinal, Lexapro, and Ambien every evening.

ODORS:
Unable to detect odor due to abiding by Covid-19 mandated mask

GENERAL OBSERVATIONS

SPEECH: slurred

ATTITUDE: compliant

CLOTHING: business casual


MEDICAL/OTHER:

STATE OF FLORIDA
COUNTY OF PALM BEACH

[Signature]
(Signature of Arresting/Investigative Officer)
The foregoing instrument was sworn to or affirmed and subscribed before me this 14 day of February 2021 by Ofc. James Lovett

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced Personally Known

[Signature]
Notary Public, Clerk of Court, Officer (F.S.S 117.14)



SCANNED
FEB 17 2021

SUBJECT: Adler, Bruce H CASE NUMBER: 71000688

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 Off J Lovett # 523 of the P156 PD

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) Read on camera

SUBJECT: Adler, Bruce H

CASE NUMBER: 21000682

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? Yes

WHERE WERE YOU GOING? Following ambulance to Bureau Medical

WHAT STREET OR HIGHWAY WERE YOU ON? Bureau I guess

DIRECTION OF TRAVEL? N WHERE DID YOU START? Home address

WHAT TIME DID YOU START? 1:30 maybe WHAT TIME IS IT NOW? Doesn't know

WHAT IS TODAY'S DATE? 15th of February WHAT DAY OF THE WEEK IS IT? Saturday

WHAT COUNTY AND CITY ARE YOU IN NOW? Albany, New York

WHEN DID YOU LAST EAT? 12:30 WHAT DID YOU EAT? a cheese

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? sleeping

HOW MUCH DO YOU WEIGH? 155 HAVE YOU BEEN DRINKING? No WHAT? I don't know

HOW MUCH? No WHERE? No WITH WHOM? No

WHEN DID YOU HAVE YOUR FIRST DRINK? No AND YOUR LAST DRINK? No

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? No

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? No ARE YOU UNDER THE INFLUENCE? No

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? No HOW MUCH? No

WHAT? No WHERE? No WHEN? No

WHAT LINE OF WORK ARE YOU IN? Investor, bookkeeping WHEN DID YOU LAST WORK? last Friday

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? No

ARE YOU SICK OR INJURED? No WHAT'S WRONG? No

DO YOU LIMP? No DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? No

WERE YOU IN AN ACCIDENT TODAY? No

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? No WHEN? No

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? No WHO? No WHY? No

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? Yes WHAT? Plan 1 - Bladder WHEN? Every day

DO YOU HAVE:

EPILEPSY?	<u>No</u>
GLASS EYE?	<u>No</u>
FALSE TEETH?	<u>Yes (3 top 4 bottom)</u>
EAR INFECTION?	<u>No</u>
INNER EAR TROUBLE?	<u>No</u>
DIABETES?	<u>No</u>

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? No

DO YOU TAKE INSULIN? No IF SO, WHEN WAS YOUR LAST INJECTION? No

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? Yes WHERE? New York

INTERVIEWER: Joe Lovett 523

WHITE - STATE ATTY. YELLOW - DHSMV. PINK - CENTRAL RECORDS GOLD - JAIL

SCANNED
FEB 17 2021

TESTING FACILITY TASK REPORT

AGENCY: PBG
SUBJECT: Adler, Bruce H
CASE NUMBER: 21-035381
DATE: Feb 14, 2021
VIDEO DVD NUMBER: N/A
BEGINNING TIME: 0257
ENDING TIME: 0318

BREATH TESTS RESULTS: 1) .000 TIME 0301 A.M. P.M. 2) .000 TIME 0304 A.M. P.M.
3) n/a TIME 0 A.M. P.M. 4) n/a TIME 0 A.M. P.M.

BREATH OPERATOR: Thomas H Leahey #19183
MAINTENANCE TECHNICIAN: Jason Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: thick
ATTITUDE: calm
CLOTHING: blue jeans, purple polo shirt, tan moccasins
MEDICAL CONDITIONS: Chloelesterol, Gout, depression, blatter, sleeping
MEDICATIONS: Lipitor, Arripinal, Lexipro, Flomax, Ambien

OTHER:

eyes are glassy
subject stated he takes all pills in the evening - took them tonight

COMMENTS:

arrived at center A/O conducted 20 minute observation period 0235 hrs
subject agreed to perform breath test
tech read breath test results & subject understood breath test results
A/O requested urine sample @ 0307
subject agreed to provide urine sample @0307
A/O read I/C 3X & subject understood I/C
subject agreed to provide urine sample @0308
A/O read rights & subject understood rights
A/O conducted Q&A
subject answered questions
subject provided urine sample @0333

**FLORIDA DEPARTMENT OF LAW ENFORCEMENT
ALCOHOL TESTING PROGRAM
BREATH ALCOHOL TEST AFFIDAVIT**

Instrument Type: Intoxilyzer 8000
Instrument Registered To: PALM BEACH CO SO
Instrument Serial Number: 80-006238 Software: 8100.27
Date of Test: 02/14/2021

Date of Last Agency Inspection: 02/12/2021

Observation Period Began: 02:35

Subject's Name: BRUCE H ADLER

DOB: 06/29/1947 Sex: M

The subject was observed for at least twenty-minutes prior to the administration of the breath test to ensure that the subject did not take anything orally and did not regurgitate.

Results:

Test	g/210L	Time
Diagnostics Check	OK	02:59
Air Blank	0.000	03:00
Control Test	0.079	03:00
Air Blank	0.000	03:01
Subject Sample #1	0.000	03:01
Air Blank	0.000	03:02
Air Blank	0.000	03:04
Subject Sample #2	0.000	03:04
Air Blank	0.000	03:05
Control Test	0.078	03:05
Air Blank	0.000	03:06
Diagnostics Check	OK	03:06

Cylinder Lot: 22620080A2
Exp: 10/05/2022

State of Florida, County of Palm Beach

Personally appeared before me the undersigned authority, who () is personally known to me or () produced _____ as identification, and who after being placed under oath, states:

I THOMAS H LEANEY, hold a valid Breath Test Operator permit issued by the Florida Department of Law Enforcement, I administered the above breath test to the subject named above in accordance with Chapter 11D-8, Florida Administrative Code, and this form is a true and accurate report of that breath test.

Breath Test Operator: T Leaney Date: 02/14/21
Signature

Sworn to (or affirmed) before me this 14th day of February, 2021

Signature of Notary Public-State of Florida _____ Printed Name of Notary Public-State of Florida _____

Note: Pursuant to section 117.10, Florida Statutes, law enforcement officers, correctional officers, traffic accident investigation officers and traffic infraction enforcement officers are notaries public when engaged in the performance of official duties. In accordance with section 316.1934(5), F.S., this completed form is admissible without further authentication and is presumptive proof of the results herein. To be used in accordance with Section 316.1934(5), F.S., and in administrative proceedings pursuant to 322.2615, F.S.



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"/>		** (viii) Clinical records under the Baker Act. §394.4615(7), Fla. Stat.	
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
Other	<input type="checkbox"/>	119.0712(2)	Other: Personal information contained in a motor vehicle record	
	<input type="checkbox"/>	119.071(2)(l)	Other: MARSY'S LAW PROTECTED INFORMATION REGARDING VICTIM(S).	

REVIEW COMPLETED BY

Booking Number: 2021003787	Date: 2/15/2021
	Specialist Name/ID: M. Tooks #8557

SCANNED
FEB 17 2021