



2020-447459

A8HNVCE

FLORIDA DUI UNIFORM TRAFFIC CITATION

COUNTY OF HILLSBOROUGH		<input type="checkbox"/> (1) F.H.P. <input checked="" type="checkbox"/> (2) P.D. <input type="checkbox"/> (3) S.O. <input type="checkbox"/> (4) OTHER	
CITY (IF APPLICABLE) TAMPA		AGENCY NAME TAMPA POLICE DEPARTMENT	
IN THE COURT DESIGNATED BELOW THE UNDERSIGNED CERTIFIES THAT HE/SHE HAS JUST AND REASONABLE GROUNDS TO BELIEVE AND DOES BELIEVE THAT ON		ABSTRACT OF COURT RECORD FOR STATE LICENSING AUTHORITY REPORT OF DISPOSITION	
DAY OF WEEK SUN	MONTH 9	DAY 27	YEAR 2020
NAME (PRINT) FIRST CANDISS		MIDDLE MARIE	LAST CANADY
STREET 401 HARBOR PLACE DR APT 1419			
CITY TAMPA		STATE FL	ZIP CODE 33602-92
TELEPHONE NUMBER	DATE OF BIRTH MO 9 DAY 6	YR 1986	RACE W SEX F HGT 5' 05"
DRIVER LICENSE NUMBER	D 0 9 5 2 9 4 0 9		
YR VEHICLE 2009	MAKE INFINITY	STYLE 2D	COLOR SIL
VEHICLE LICENSE NO B P J 3 4 5 0	TRAILER TAG NO	STATE AZ	YEAR TAG EXP
UPON A PUBLIC STREET OR HIGHWAY, OR OTHER LOCATION, NAMELY FRANKLIN ST AT CHANNELSIDE DR N			
FT _____ MILES _____ OF NODE _____			

DID UNLAWFULLY COMMIT THE OFFENSE OF DRIVING UNDER THE INFLUENCE OF ALCOHOLIC BEVERAGES, CHEMICAL OR CONTROLLED SUBSTANCES; DID DRIVE OR WAS IN ACTUAL PHYSICAL CONTROL OF A VEHICLE, WHILE UNDER THE INFLUENCE OF AN ALCOHOLIC BEVERAGE/CHEMICAL SUBSTANCE/CONTROLLED SUBSTANCE TO THE EXTENT NORMAL FACULTIES WERE IMPAIRED, OR WITH A BLOOD OR BREATH ALCOHOL LEVEL OF .08 OR ABOVE OF \_\_\_\_\_

COMMENTS PERTAINING TO OFFENSE: (Only one offense each citation)

**D.U.I. - PROPERTY DAMAGE/PERSONAL INJURY**

AGGRESSIVE DRIVER  PASSENGER 4+ YRS  STATE STATUTE  SECTION **316.193** SUB SECTION **(3)(C)1**

CRASH  YES  NO DAMAGE TO OTHER PROPERTY  YES  NO INJURY TO ANOTHER  YES  NO FATAL  YES  NO

THIS IS A CRIMINAL VIOLATION, COURT APPEARANCE REQUIRED, AS INDICATED BELOW.

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COURT DATE \_\_\_\_\_ TIME \_\_\_\_\_  
(TO BE SET) CLERK OF THE CIRCUIT COURT, HILLSBOROUGH COUNTY

COURT AND LOCATION  
800 EAST TWIGGS STREET TAMPA 33602 FL

ARREST DELIVERED TO **HCSO JAIL** DATE \_\_\_\_\_

I AGREE AND PROMISE TO COMPLY AND ANSWER TO THE CHARGES AND INSTRUCTIONS SPECIFIED IN THIS CITATION. WILLFUL REFUSAL TO ACCEPT AND SIGN THE CITATION MAY RESULT IN ARREST. I UNDERSTAND MY SIGNATURE IS NOT AN ADMISSION OF GUILT OR WAIVER OF RIGHTS. IF YOU NEED REASONABLE FACILITY ACCOMMODATIONS TO COMPLY WITH THIS CITATION, CONTACT THE CLERK OF THE COURT.

**JAIL - AZ FL**

X SIGNATURE OF VIOLATOR

EFFECTIVE IMMEDIATELY, YOUR DRIVING PRIVILEGE IS SUSPENDED/DISQUALIFIED FOR:

DRIVING WITH AN UNLAWFUL BLOOD OR BREATH ALCOHOL LEVEL. THIS SUSPENSION IS FOR A PERIOD OF SIX MONTHS IF THIS IS THE FIRST VIOLATION OR ONE YEAR IF PREVIOUSLY SUSPENDED FOR DRIVING WITH AN UNLAWFUL BLOOD OR BREATH ALCOHOL LEVEL. IF YOU HOLD A CDL OR YOU ARE OPERATING A CMV, YOUR COMMERCIAL DRIVER LICENSE/PRIVILEGE WILL ALSO BE DISQUALIFIED FOR ONE YEAR FOR THE FIRST OFFENSE OR PERMANENTLY DISQUALIFIED FOR A SUBSEQUENT OFFENSE

REFUSAL TO SUBMIT TO LAWFUL BREATH BLOOD OR URINE TEST SECTION 322.2615, F. S. THIS SUSPENSION IS FOR A PERIOD OF ONE YEAR IF THIS IS A FIRST REFUSAL OR 18 MONTHS IF PREVIOUSLY SUSPENDED FOR THIS OFFENSE. IF YOU HOLD A CDL OR YOU ARE OPERATING A CMV, YOUR COMMERCIAL DRIVER LICENSE/PRIVILEGE WILL ALSO BE DISQUALIFIED FOR A PERIOD OF ONE YEAR FOR A FIRST REFUSAL OR PERMANENTLY DISQUALIFIED FOR A SUBSEQUENT REFUSAL.

LICENSE SURRENDERED?  YES  NO REASON \_\_\_\_\_

ELIGIBLE FOR PERMIT?  YES  NO REASON \_\_\_\_\_

UNLESS INELIGIBLE, THIS CITATION SHALL SERVE AS A TEMPORARY DRIVER LICENSE AND WILL EXPIRE AT MIDNIGHT ON THE 10TH DAY FOLLOWING THE DATE OF SUSPENSION.

AT THE **TAMPA** BUREAU OF ADMINISTRATIVE REVIEWS OFFICE, YOU MAY REQUEST, WITHIN 10 DAYS AFTER THE DATE OF SUSPENSION, A REVIEW OF SUSPENSION OR A REVIEW TO DETERMINE ELIGIBILITY FOR A RESTRICTED LICENSE IF THIS IS YOUR FIRST DUI RELATED OFFENSE BY THE DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES. SEE REVERSE SIDE.

*Michael J. Lyon* 999 46376

RANK-SIGNATURE OF OFFICER BADGE NO ID NO TROOP UNIT  
MICHAEL L LYON

FLORIDA DUI  
UNIFORM TRAFFIC CITATION REPORT OF DISPOSITION  
ABSTRACT OF COURT RECORD FOR  
DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES  
MUST BE REPORTED WITHIN 10 DAYS AFTER FINAL ADJUDICATION

**I. COURT ACTION**

DEFENDANT'S PLEA: (CHECK ONE)  GUILTY  NOT GUILTY  NOLO CONTENDERE

TRIAL:  1. JURY  2. NON-JURY

1. DEFENDANT REPRESENTED BY COUNSEL  2. DEFENDANT WAIVED COUNSEL

TOTAL FINE AMOUNT \_\_\_\_\_ TOTAL COURT COSTS \_\_\_\_\_

**VERDICT** CHECK ONLY ONE:

1 GUILTY  
 6 ESTREATED OR FEITED BOND  
 9 ADJUDGED DELINQENT (JUVENILE ONLY)  
 2 NOT GUILTY  
 3 DISMISSED  
 8 NOLLE PROSEQUI  
 A ADJUDICATION WITHHELD BY JUDGE  
 B OTHER \_\_\_\_\_ EXPLAIN \_\_\_\_\_

**SENTENCE** CHECK ONLY WHEN VERDICT IS GUILTY OR ADJUDICATION WITHHELD BY JUDGE.

1 SERVED TIME  
 2 SENTENCE WITHHELD, DEFERRED OR SUSPENDED  
 3 PROBATION  
 4 TRAFFIC SCHOOL  
 5 FINE AND/OR COSTS  
 6 LICENSE ACTION ONLY  
 7 OTHER \_\_\_\_\_ EXPLAIN \_\_\_\_\_  
 8 COMMUNITY SERVICE EXPLAIN \_\_\_\_\_  
 9 INCARCERATION (AFTER DISPOSITION)

**II.**

IF ORIGINAL CHARGE IS CHANGED, ENTER CHARGE OF WHICH VIOLATOR WAS CONVICTED. DO NOT MAKE ANY ADDITIONAL CHANGES ON FRONT OR BACK OF THIS CITATION.

ORIGINAL DUI CHARGE CHANGED PER STATE ATTORNEY  YES  NO

**III. LOCATION**

COUNTY \_\_\_\_\_ TYPE OF COURT (CHECK BOX)  
 COUNTY  
 CIRCUIT

CITY \_\_\_\_\_

LOCATION OF TRIAL COURT \_\_\_\_\_

PRESIDING JUDGE \_\_\_\_\_

**IV. LICENSE ACTION**

COURT RECOMMENDS THE DEPARTMENT SUSPEND DRIVING PRIVILEGE

LENGTH \_\_\_\_\_

**VIOLATIONS CARRYING MANDATORY REVOCATIONS**

COURT MAY SPECIFY LENGTH \_\_\_\_\_ OR CHECK ONE:

MINIMUM  MAXIMUM

LICENSE PICKED UP BY COURT AND ATTACHED TO THIS REPORT AS REQUIRED BY F.S. 322.25.

VIOLATOR'S ABILITY TO DRIVE IS QUESTIONABLE AND COURT RECOMMENDS RE-EXAMINATION.

**V. THE DATES BELOW MUST BE ENTERED ON ALL DISPOSITIONS**

FINAL ADJUDICATION OR ACTION ON \_\_\_\_\_ DATE \_\_\_\_\_

SUBMITTED TO DHSMV ON \_\_\_\_\_ DATE \_\_\_\_\_

SIGNATURE OF INDIVIDUAL SUBMITTING REPORT \_\_\_\_\_

SEP 30 PM 11  
 CIRCUIT COURT