

0501369

P# 2922

Arrest Report

50-2020-CT-015030-ASB

FLORIDA HIGHWAY PATROL
P.O. BOX 540007, GREENACRES, FL 33454

Report Date / Time 11/21/2020 06:47 PM	Report Number FHP99ARR824225	Case Number/Cad Number FHPL20OFF066873 / LWRC20CAD178873	Reporting Officer Name GONZALEZ, MARQUIS
Originating Agency ORI	Occur Date Time Range 11/21/2020 17:50:02 -	Jurisdiction	Clearance

Location of Occurrence

County PALM BEACH	Location Type PUBLIC PLACE	Location Description SR 9 NB EXIT RAMO TO SR 850			
Street Number I-95 NB	Street	Apt/Lot/Bldg WEST PALM BEACH	City WEST PALM BEACH	State FL	Zip Code 33403

Defendant

First Name COLIN	Middle Name J	Last Name MOCK	Suffix	Race WHITE	Sex MALE	Height 511	Weight 230	Hair BRO	Eyes BRO
MNI #	SSN [REDACTED]	Date of Birth 03/20/1978	Age 42	ID Type	Drivers License or other ID 402728573	State NY	OCA / Agency ID		
Place of Birth:	GREENFIELD CENT NY US								
Address * RESIDENCE / 20 ERICSON DR , GREENFIELD CENT, NY 12833 /									

Arrest

Arrest Date/Time 11/21/2020 6:31:42 PM	Arrest Location Type PUBLIC PLACE	Arrest Location Description SR 9 NB EXIT RAMP TO NORTHLAKE BLVD				
Street Number	Street	Apt/Lot/Bldg	County PALM BEACH	City WEST PALM BEACH	State FL	Zip Code

Charge : S

Counts 1	Charge 316.193.1a	Bond Amount \$0.00	<input type="checkbox"/> No Bond
Charge Degree N	Charge Level MISDEMEANOR	General Offense Code DUI-UNLAW BLD ALCH	
Charge Description DUI ALCOHOL OR DRUGS			
Is Arrestee Juvenile?		No	
Type of Arrest		On-View Arrest (apprehension without a warrant or previous incident report)	

Bond Set by Court

Bond Amount	<input type="checkbox"/> No Bond
Bond Type(s)	

Probable Cause

NOV 21 PM 9:06

Arrest Report

Page 1 of 4

White 840

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On November 21, 2020, the Lake Worth Regional Communications Center (LWRCC) dispatched me to a vehicle crash on State Road 9 (Interstate 95) northbound exit ramp to State Road 850(Northlake Blvd) on the left shoulder. The three-vehicles involved in the crash were a Gray Hyundai (FL tag: KEAE43), a black Chevy Silverado pick-up truck (NY tag: HNP5544 and a silver Cadillac (FL tag: 355PAG. When I arrived at the crash scene, all three drivers were outside their vehicles. I proceeded to start my crash investigation by asking each driver what occurred. As I spoke with the driver of the Chevy pick-up truck later identified as Colin J Mock through his New York driver's license: 402 728 573, Mr. Mocks seemed very lethargic and responded in such a slow manner. Mr. Mocks advised me that he was driving the vehicle and did not know what occurred. I immediately detected the odor of an unknown alcoholic beverage was emitting from his breath as he talked. I also observed Mr. Mocks blood shot watery eyes. As I was conducting my crash investigation, I requested another trooper to respond to the crash scene; Sgt Alarcon (350) arrived shortly after. After I finished conducting the crash investigation, I advised the Mr. Mocks that the crash investigation was over, and I am beginning a criminal investigation for DUI. I proceeded to have Mr. Mocks walk to the front of my patrol car. When we arrived in front of the patrol car, I advised Mr. Mocks that I believed he was under the influence of an unknown alcoholic beverage, chemical substance, or a controlled substance. I then asked Mr. Mocks if he was voluntarily willing to perform field sobriety exercises to help me determine if his normal faculties were impaired. Mr. Mocks understood but was being very indecisive. I explained to Mr. Mocks that if he is willing to perform the exercises, that I would transport him to the nearest gas station to perform the FSE's in a safer location and condition. Mr. Mocks responded still could not give me a yes or no answer. I then explained to Mr. Mocks that if he refuses to do the exercises, any further actions would have to be based on my judgement of his impairment. Mr. Mocks understood and still could not give me a yes or no answer. I asked Mr. Mocks if he wants to perform the FSE's right at the crash location of the exit ramp. I explained to Mr. Mocks that it would not be to his benefit because of the uneven pavements. Mr. Mocks understood still could not give me a Yes or no answer. After being given several opportunities to answer the question, Mr. Mocks refused to perform the exercises.

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Based on my investigation and totality of circumstances, I believed the defendant's normal faculties were impaired and he was placed under arrest for DUI at 6:31 P.M. I proceeded to place Mr. Mocks in the back of Patrol Car. During the vehicle inventory search, I was able to locate a half empty bottle of SOBIESKI 100% PURE RYE VODKA in a cooler in the bed of the pick-up truck. The vodka was cold to the touch indicating the bottle was recently opened. The remaining Vodka inside the bottle was dumped out in the grass and was recorded with my patrol car dash camera. After I finished the vehicle search, Mr. Mocks was then transported to the Palm Beach County Breath test center. Once I arrived, I conducted a 20-minute observation. At no time did he regurgitate or take anything by mouth. I then requested that he provide a sample of his breath which he refused. Florida Implied consent was read for Mr. Mocks and he refused. Mr. Mocks was booked at the Palm Beach County Jail.

The above incident occurred in Palm Beach County.

Jail Booking Facility

Booking Date/Time	Booking County PALM BEACH	Booking Facility PALM BEACH COUNTY CORRECTIONS	Booking Facility Phone (561) 688-4400
Booking Facility Location 3228 GUN CLUB ROAD WEST PALM BEACH, FLORIDA 33406			Booking Number
Booking Comments			

Court

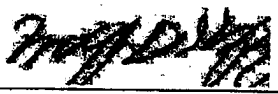
Court County PALM BEACH	Court Location 200 WEST ATLANTIC AVE. DELRAY BEACH, FL 33444		
Court PALM BEACH SOUTH COUNTY COURTHOUSE	Court Phone 561-274-1530	Court Appearance Date / Time 12/24/2020 8:30AM	Court Fine
Comments			

Officer Name Rank / ID # GONZALEZ, MARQUIS TPR 4519	Involvement On Report / Reporting Role REPORTING OFFICER	Officer Agency Org/Unit FLORIDA HIGHWAY PATROL FHPL1LWRCC\PALM BEACH\BROW LN TO SR804
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The undersigned certifies and swears that he/she has just and reasonable grounds to believe that the above named Defendant, committed violation(s), of law, on the below date(s) and time(s), as listed in the probable cause associated with this report:

Reporting Officer

Officer Name GONZALEZ, MARQUIS	Office Rank TPR	Officer ID No 4519	Sworn and subscribed before me, the undersigned authority This the _____ day of _____ DEPUTY OF THE COURT, NOTARY OR LAW ENFORCEMENT
Officer Agency FLORIDA HIGHWAY PATROL			
Officer Signature 			

<input type="radio"/> No Bill / Petition	<input type="radio"/> Issue Warrant	<input type="radio"/> Prosecution Approved	Signature of Assistant State Attorney _____	Date _____
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STATE OF FLORIDA
DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES
AFFIDAVIT OF REFUSAL TO SUBMIT TO
BREATH AND/OR URINE TEST

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

am a member of FLORIDA HIGHWAY PATROL, and I do swear

or affirm that on or about the 21 day of November, 2020, at 6:31 ☒ P.M. ☐ A.M.

DRIVER COLIN J MOCK
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# 402728573, state of NY, was placed under lawful arrest for

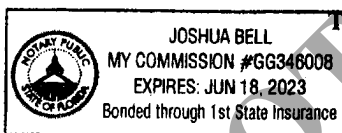
316.193(1)
the offense of D.U.I. - ALCOHOL OR DRUGS (MISDEMEANOR) by GONZALEZ, MARQUIS and
(Name of Arresting Officer)

issued Citation # A7706AE

That on or about the 21 day of November, 2020, at 7:34 ☒ P.M. ☐ A.M.
in palm beach County,

I requested that the driver submit to a ☒ breath 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 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 21 day of November, 2020,
by TPR. GONZALEZ,
who is personally known to me or who has produced
know as identification.

Notary Public Joshua Bell

HSMV-BAR1001 (REV. 10/2016)

Signature of Attesting Officer

Title _____
Date _____

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.

TESTING FACILITY TASK REPORT

AGENCY: FHP

SUBJECT: MOCK, COLIN J

CASE NUMBER: 20-129262

DATE: Nov 21, 2020

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 1932

ENDING TIME: 1936

BREATH TESTS RESULTS: 1) R TIME 1934 A.M. ☐ P.M. ☒ 2) N/A TIME XX A.M. ☐ P.M. ☐
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: LATHARGIC, SLURRED

ATTITUDE: QUIET, COOPERATIVE

CLOTHING: BLACK SLEEVELESS SHIRT, GREY SHORTS, BLACK SHOES

MEDICAL CONDITIONS: AFIB, SEIZURES

MEDICATIONS: METOPROLOL, CARDIZEM, CITALOPRAM, MELOXICAM, UNKNOWN OTHERS

OTHER:

EYES: GLASSY

ODOR OF UNKNOWN ALCOHOLIC BEVERAGE COMING FROM BREATH

COMMENTS:

ARRIVED AT DUI TESTING FACILITY AND BEGAN THE 20 MINUTE OBSERVATION AT 1910 HOURS

SUBJECT STATED HE WOULD NOT TAKE BREATH TEST

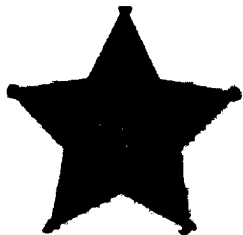
A/O READ I.C

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

A/O READ RIGHTS

SUBJECT STATED HE UNDERSTOOD HIS RIGHTS

SUBJECT ASKED FOR A LAWYER BEFORE QUESTIONING



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

PBSO CASE # 20-129262 PBSO ZONE 3-13
AGENCY CASE # FHPL20OFF066873 CRASH CASE # _____
TIME OF STOP/CRASH 1750 DATE 11/21/20 DAY SATURDAY
SUBJECT'S NAME MOCK, COLIN J RACE W SEX M
HGT 6'0 WGT 300 DOB 03/20/1978
LOCATION SR9 NB EXIT RAMP TO NORTHLAKE BLVD
ARRESTING OFFICER'S NAME & ID TROOPER M. GONZALEZ #4519 AGENCY FHP
DIVISION: _____ NOTIFIED BY COMMO YES
ARRIVAL AT FACILITY 1910
BREATH RESULTS: Arrest Time 1831
1. REFUSED
2. REFUSED
3. REFUSED
4. REFUSED
TESTING OFFICER'S ID BELL 8656

SUBJECT: MOCK, COLIN J

CASE NUMBER: 14122 JPL 1073

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: TJR. GONZALEZ # 4519

SUBJECT: MOCK, Colin J

CASE NUMBER: 100-6-101-16177

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) _____

Read on camera



**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"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
Other	<input type="checkbox"/>	119.071 (2)(j)1	Other: Address, telephone numbers and personal assets of domestic violence and other specified crime victims	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2020027454

Date: 11/22/2020

Specialist Name/ID: LaToya Rouse #6673