

OBTS Number _____ Agency ORI Number FLO 5 0 0 0 0 0 Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE Agency Report Number 21-051858

1 Arrest 2 NTA 3 Request for Warrant 4 Request for Copies 1 Juvenile

Charge Type: 1 Felony 2 Traffic Felony 3 Misdemeanor 4 Traffic Misdemeanor 5 Ordinance 6 Other

Special Notes _____

Name (Last, First, Middle) OLAZABAL, EUGENIO Alias _____ Race W Sex M Date of Birth 06/02/1956

Charge Description: DUI

Victim's Name (Last, First, Middle) STATE OF FLORIDA Race _____ Sex _____ Date of Birth _____

Local Address (Street, Apt Number) _____ (City) _____ (State) _____ (Zip) _____ Phone _____ Address Source _____

Business Address (Name, Street) _____ (City) _____ (State) _____ (Zip) _____ Phone _____ Occupation _____

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

committed the below acts in my presence. was observed by _____ who told _____

confessed to _____ that he/she saw the arrested person commit the below acts.

admitting to the below facts. _____ was found to have committed the below acts, resulting from my (described) investigation.

On the 4 day of APRIL 20 21 at 1:16 A.M P.M (Specifically include facts constituting cause for arrest.)

On the above date and time while on patrol in the city of Lake Worth, Palm Beach County, FL I observed a white Mazda driving Southbound on Dixie Hwy in the inside lane approaching 4th Ave North with no tail lights. The vehicle was swerving within the lane side to side and it kept speeding up and slowing down. The speed would vary from 30mph to 35mph then to 40 mph and back down to 30 mph. I activated my emergency lights and vehicle slowed and pulled over in the parking lot across 210 S. Dixie Hwy. I approached the driver's side window and identified myself and advised the driver later identified as Eugenio Olazabal via his Florida issued driver's license that he was driving without his headlights on. I then asked for his driver's license and he removed his wallet from his back pocket and started fumbling around different pockets in the wallet for his license. After some time he stopped looking and then reached into his right front pocket and retrieved his license. I detected an odor of an unknown alcoholic beverage coming from his breath as he spoke to me. I also observed the drivers eyes were glassy and watery. I then instructed him to find his registration and proof of insurance while I checked his license. At that time I requested a DUI investigation to respond to the scene to conduct a DUI investigation. D/S P. Pointu # 16032. D/S Pointu responded to the scene and took over the investigation.

NOT ACHIEVED

STATE OF FLORIDA COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer) [Signature]

APR 04 2021

The foregoing instrument was sworn to or affirmed and subscribed before me this 4 day of APRIL 20 21 by Sgt. R. Ugalde #7669

(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. 11 721)

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 4th DAY OF April, 20 21, AT 01:16 X AM PM

SUBJECT: Olazabal, Eugenio, De Jesus CASE NUMBER: 21-051818

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: D/S POINTU P.

PERSONAL CONTACT

DRIVING PATTERN: Actual physical control (physical evidence or statements putting def. behind wheel of vehicle)

Sgt Ugalde (#7669) observed a white Mazda CX3 bearing Florida tag IETM58 driving with no taillights on Southbound on Dixie Hwy, approaching 4th Ave North, in the city of Lake Worth Beach, Palm Beach County Florida. The vehicle was swerving within the lane side to side and speeding up and slowing down.

OBSERVATION OF DRIVER:

Upon contact with the driver who was identified by his driver's license as Eugenio De Jesus Olazabal, Sgt Ugalde observed that Olazabal was fumbling to retrieve his paperwork. He had glassy and watery eyes and an odor of unknown alcohol beverage was coming from his breath.

I also observed that Olazabal had bloodshot and glassy eyes. His speech was low, slow and slurred.

DRIVER'S STATEMENTS:

Olazabal would admit post Miranda that he had been drinking 2 beers at a bar an hour earlier and then another beer before that.

ODORS:

Slight odor of unknown alcohol beverage that became stronger when he spoke.

GENERAL OBSERVATIONS

SPEECH: slow, low and slurred

ATTITUDE: polite, cooperative

CLOTHING: colored shirt, blue jeans, black shoes

MEDICAL/OTHER: Heart stent. Statin and Metoprolol.

STATE OF FLORIDA
COUNTY OF PALM BEACH

D/S POINTU P.

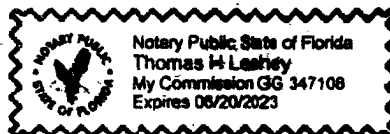
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 4th day of April, 20 21 by D/S POINTU P.

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

Thomas Leahy (#19183)

Notary Public, Clerk of Court, Officer (F.S.S. 117.10)



SUBJECT: Olazabal, Eugenio, De Jesus

CASE NUMBER 21-051818

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 type="checkbox"/> LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES | <input type="checkbox"/> RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES |

Other Observations:

Was anticipating the movement of my stimulus. Swayed. No resting nystagmus. No VGN. No LOC.

WALK & TURN:

Could not maintain the instructional stance. Stepped off the line. Did not walk heel to toe at every steps. Used his arms to balance.

ONE LEG STAND:

Lowered his leg to the ground on his count of 3 and 13. Stopped the task before being told. Leg tremors visible.

FINGER TO NOSE:

Used the pad of his finger on all steps. Swayed. Opened his eyes. Lowered his head.

ROMBERG ALPHABET:

Swayed in all directions.

Modified Romberg: stopped the 30s count at 29s. Swayed in all directions.

BREATH TEST RESULTS: 0.038 0.037

STATE OF FLORIDA
COUNTY OF PALM BEACH

D/S POINTU P.

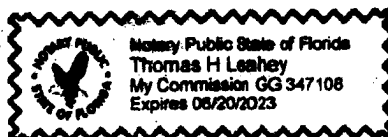
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 4th day of April 2021 by D/S POINTU P.

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

Thomas Leahey (#19183)

Notary Public, Clerk of Court, Officer (F.S.S 117.10)



APR 05 2021



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

PBSO CASE # 21-051818 PBSO ZONE 7-

AGENCY CASE # _____ CRASH CASE # _____

TIME OF STOP/CRASH 01:16 DATE 04/04/2021 DAY Sunday

SUBJECT'S NAME Olazabal, Eugenio, De Jesus RACE H SEX M

HGT 5'05 WGT 155 DOB 6/2/1956

LOCATION S Dixie Hwy / 2 ave S, Lake Worth Beach, FL

ARRESTING OFFICER'S NAME & ID D/S POINTU P. (16032) AGENCY Palm Beach County Sheriff's Office

DIVISION: D7-RP

NOTIFIED BY COMMO yes

ARRIVAL AT FACILITY 02:10

ARREST TIME 01:50

BREATH RESULTS:

- 1 .038
- 2 .037
- 3 urine
- 4

TESTING OFFICER'S ID 19183 PBSO VIDEOTAPE # N/A

NOT A CERTIFIED COPY

APR 04 2021

TESTING FACILITY TASK REPORT

AGENCY:

SUBJECT: CASE NUMBER:

DATE: VIDEO DVD NUMBER:

BEGINNING TIME: ENDING TIME:

BREATH TESTS RESULTS: 1) TIME A.M. P.M. 2) TIME A.M. P.M.
3) TIME A.M. P.M. 4) TIME A.M. P.M.

BREATH OPERATOR:

MAINTENANCE TECHNICIAN:

TESTING OFFICER'S OBSERVATIONS

SPEECH:

ATTITUDE:

CLOTHING:

MEDICAL CONDITIONS:

MEDICATIONS:

OTHER:

eyes are glassy & bloodshot
odor of unknown alcoholic beverage on breath
subject stated he drank 1 beer at home and 2 beers at bar - QA

COMMENTS:

arrived at center A/O conducted 20 minute observation period at 0210 hrs
subject agreed to perform breath test
tech read breath test results & subject understood breath test results
A/O requested urine sample @ 0241
subject agreed to provide urine @ 0241
A/O read I/C & subject understood I/C
subject agreed to provide urine @ 0243
A/O read rights & subject understood rights
A/O conducted Q&A
subject answered questions
subject provided urine sample at 0252

SUBJECT: Muzabadi, Eugene D

CASE NUMBER: 21-031818

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) _____

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) _____

SUBJECT: Orlando, Eugene D CASE NUMBER: 11 091818

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: _____

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: 80-006240 Software: 8100.27
Date of Test: 04/04/2021

Date of Last Agency Inspection: 03/12/2021

Observation Period Began: 02:10

Subject's Name: EUGENIO D OLAZABAL

DOB: 06/02/1956 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	02:33
Air Blank	0.000	02:34
Control Test	0.080	02:34
Air Blank	0.000	02:35
Subject Sample #1	0.038	02:35
Air Blank	0.000	02:36
Air Blank	0.000	02:38
Subject Sample #2	0.037	02:38
Air Blank	0.000	02:39
Control Test	0.079	02:39
Air Blank	0.000	02:39
Diagnostics Check	OK	02:39

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

Signature

Date: 04/04/21

Sworn to (or affirmed) before me this 04 day of April, 2021

Signature of Notary Public-State of Florida

DLS P Pointu # 16032
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.

WITNESS LIST

CASE NUMBER: 21-051818

ARRESTING OFFICER: D/S POINTU P.

ADDRESS: Palm Beach County Sheriff's Office - 3228 Gun Club Rd - West Palm Beach, FL 33406

PHONE NUMBERS (HOME): _____ (WORK) (561) 688 3000

CAN TESTIFY TO: see report

NAME: SGT UGALDE R.

ADDRESS: Palm Beach County Sheriff's Office - 3228 Gun Club Rd - West Palm Beach, FL 33406

PHONE NUMBERS (HOME) () (WORK) (561) 688 3000

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) () (WORK) ()

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

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CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NOT A CERTIFIED COPY



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

REVIEW COMPLETED BY

Booking Number: 2021008086	Date: 04/04/2021
	Specialist Name/ID: C. Denzel/8691