

UCN: ***

FL0520300

COMPLAINT/ARREST AFFIDAVIT - CIRCUIT/COUNTY COURT - PINELLAS COUNTY, FLORIDA

OBTS # [] REPORT # CW20-45800 DOCKET # 1834712

Person ID 1694434 SSN# [REDACTED]

Charge Description [] Felony [X] Misdemeanor [] Warrant [] Traffic [] Ordinance Traffic Citation # (if any) Court Case # ACEV8UE-1

Defendant's Name (Last, First, Middle) GONZALEZ FLORES, IZAMAR DOB 08/09/1992 Sex F Race H Ht 503 Wt 190 Hair BLN Eyes BRO Skin OLV

Alias [] DL # G-524-400-92-789-1 State FL Scars/Marks/Tattoos/Physical Features MULT TATTOOS

Local Address (Street, City, State, Zip Code) 1300 WINDING CREEK BLVD G443 CLEARWATER FL 33764 Telephone no phone Place of Birth MEXICO Citizenship USA

Permanent Address (Street, City, State, Zip Code) 1300 WINDING CREEK BLVD G443 CLEARWATER FL 33764 Telephone NO PHONE Employed by / School []

Weapon Seized Type [] Yes [X] No Indication of Drug Influence Y [X] N [] UNK [] Indication of Mental Health Issues Y [] N [X] UNK [] Indication of Alcohol Influence Y [] N [X] UNK []

Co-Defendant's Name (Last, First, Middle) NONE DOB [] Sex [] Race [] In Custody [] Yes [X] No [] Felony [] Misdemeanor

Co-Defendant's Name (Last, First, Middle) [] DOB [] Sex [] Race [] In Custody [] Yes [] No [] Felony [] Misdemeanor

The undersigned swears that he/she has reasonable grounds to believe that the above named defendant on the 28 day of MARCH, 2020

at approximately 11:21 PM, at 23492 US HIGHWAY 19 N, in Pinellas County did:

REASON FOR STOP:

THE DEF WAS OBSERVED IN ACTUAL PHYSICAL CONTROL HER VEHICLE WHEN SHE WAS INVOLVED IN A VEHICLE ACCIDENT. THE DEF THEN FLED THE SCENE AND GOT INTO A SECOND CRASH AT THE ABOVE LOCATION. THE VEHICLE ACCIDENTS WERE INVESTIGATED BY OFFICER WILLIAMS AND OFFICER BOSCO. THIS OFFICER WAS THE FIRST ON SCENE FOR THE SECOND ACCIDENT AND OBSERVE THE DEF IN THE DRIVERS SEAT WITH THE STRONG ODOR OF AN ALCOHOLIC BEVERAGE COMING FROM HER BREATH AND PERSON. THE DEF ADVISED SHE DRANK WAY TO MUCH AND WAS ON HER WAY TO HER BABY DADDYS HOME AND ADVISED SHE SMOKED WAY TO MUCH OF HIS WEED. THESE STATEMENTS WERE MADE POST MIRANDA. THIS OFFICER OBSERVED SEVERAL SIGNS OF IMPAIRMENT TO INCLUDE BLOODSHOT WATERY EYES, SLURRED SPEECH, SWAYING BACK AND FORTH, STUMBLING, NO BALANCE, NO COORDINATION, AND THE STRONG ODOR OF AN ALCOHOLIC BEVERAGE COMING FROM HER BREATH AND PERSON. THE DEF WAS TAKEN TO MEASE COUNTRYSIDE HOSPITAL DUE TO HER LEVEL OF IMPAIRMENT. ONCE AT THE HOSPITAL, THE DEF REFUSED TO PROVIDE A SAMPLE OF HER BLOOD EVEN AFTER BEING READ IMPLIED CONSENT. ONCE CLEARED, THE DEF WAS PLACED UNDER ARREST AND TRANSPORTED TO PCJ.

THEN AND THERE UNLAWFULLY DRIVE AND/OR BE IN ACTUAL PHYSICAL CONTROL OF A MOTOR VEHICLE WITHIN PINELLAS COUNTY, FLORIDA WHILE UNDER THE INFLUENCE OF AN ALCOHOLIC BEVERAGE, A CONTROLLED SUBSTANCE AND/OR ANY CHEMICAL SUBSTANCE TO THE EXTENT THAT HER NORMAL FACULTIES WERE IMPAIRED.

BRAC: REFUSED
BREATH: STRONG ODOR OF AN ALCOHOLIC BEVERAGE
BALANCE: SWAYING BACK AND FORTH, UNSTEADY
EYES: BLOODSHOT WATERY/ GLASSY EYES
PRIOR CONVICTIONS: NONE

DEFENDANT REFUSED ALL FIELD SOBRIETY TESTS.

COURT INFORMATION: NORTH COUNTY TRAFFIC COURT AT THE CALL OF THE COURT. CITATION #ACEV8UE

Contrary to Florida Statute/Ordinance 316.193.1

ARREST DATE: 3/29/2020 Time 12:17 AM Aggravating/Mitigating Factors []

Booking Officer: WERNER 59414 Amount of Bond 500 Bond Out Date [] Time [] a.m. [] p.m.

Victim Notified of Advisory? [] Yes [] No Injuries to Victim? [] Yes [] No Medical Treatment to Victim? [] Yes [] No

The Court reviewed this complaint and finds there: [] is probable cause [] is not probable cause to detain defendant [] Bond Action, if any: []

The probable cause determination is passed for: [] 24 Hrs [] 24 Hrs on showing of extraordinary circumstances Received by Booking: 3/29/2020 3:37:42 AM

Pursuant to F.S. 92.525 and under penalty of perjury, I declare that I have read the foregoing document and that the facts in it are true.

[Signature]

CLEARWATER POLICE DEPT.

Declarant Signature Agency

OFFICER JONATHAN HURT 8831 310383841

Printed Name Declarant ID#

REQUEST FOR INVESTIGATIVE COSTS, F.S. 938.27(1)

DATE 03/29/2020 OFFICER HURT HOURS X PAY RATE 5 29.14 OR COST \$145.70

OTHER - Describe []

Continuation sheet [] Yes [] No TOTAL \$ 145.70

FILED COURT ASSISTANT 2020 MAR 29 AM 11:45

Defendant GONZALEZ FLORES, IZAMAR

Court Case No: ACEV8UE-1

ADVISORY AND SOLVENCY HEARING

The above named Defendant came before me for Advisory and Solvency hearing and was advised by me of the charge(s) against him; his right to remain silent; that any statements by him may be used against him; his right to counsel, and, if he is financially unable to afford counsel, that counsel forthwith will be appointed; of his right to communicate with his counsel, family or friends, and that reasonable implementation will be afforded him to contact the foregoing.

I FURTHER CERTIFY THAT:

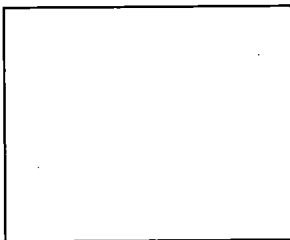
- A. Defendant has advised the Court that he has retained counsel or will retain counsel.
- B. The Court investigated Defendant's solvency and found the Defendant financially able to secure counsel.
- C. The Court investigated Defendant's solvency and provisionally appointed the Public Defender.
- D. The Defendant waived the right to counsel at the first appearance only.

DATE AND TIME



JUDGE

- I hereby waive the right to counsel at the first appearance only.
- I, having been found solvent and financially able to secure counsel, hereby waive counsel until my attorney files an appearance in this case or until I file a written request for a review of my solvency and ability to secure counsel.



Thumb Print

DEFENDANT'S SIGNATURE

I HEREBY acknowledge receipt of a copy of the foregoing Complaint and Advisory.

DEFENDANT'S SIGNATURE

DEFENDANT'S ATTORNEY'S SIGNATURE

DATE