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3452



Arrest Report

FLORIDA FISH AND WILDLIFE CONSERVATION COMMISSION
1937 BANANA GROVE ROAD
MOORE HAVEN, FL.

Report Date / Time 4/25/2021 05:23 PM	Report Number C-0914AAAAA	Case Number/Cad Number FWCS21OFF011235 / FWCS21CAD020495	Reporting Officer Name M. MIANO
Originating Agency ORI FL0488000	Occur Date Time Range 04/25/2021 16:21:09 -	Jurisdiction	Clearance

Location of Occurrence

County PALM BEACH	Location Type PUBLIC PLACE	Location Description			
Street Number 698	Street E ROYAL PALM RD	Apt/Lot/Bldg FWC	City BOCA RATON	State FL	Zip Code 33432

Defendant

First Name JORDAN	Middle Name JOSEPH	Last Name AURILIO	Suffix	Race WHITE	Sex MALE	Height 505	Weight 125	Hair brn	Eyes Blue
MNI #	SSN	Date of Birth 10/01/1998	Age 22	ID Type E	Drivers License or other ID A640430983610	State FL	OCA / Agency ID		
Place of Birth:		New Jersey							
Address * OTHER / 3510 MABILLION WAY , WELLINGTON, FL 33449 /									

Arrest

Arrest Date/Time 4/25/2021 16:21	Arrest Location Type	Arrest Location Description				
Street Number	Street Lake Boca	Apt/Lot/Bldg	County	City	State	Zip Code

Charge : STATE STATUTE

Counts 1	Charge 327.35(4)	Bond Amount \$0.00	<input type="checkbox"/> No Bond
Charge Degree FIRST DEGREE	Charge Level MISDEMEANOR	General Offense Code DUI-UNLAW BLD ALCH	
Charge Description BUI WITH BAL .15 OR HIGHER AND A PERSON UNDER 18 IN THE VESSEL			
Bond Set by Officer			
Bond Amount	<input type="checkbox"/> No Bond		
Bond Type(s)			

Probable Cause

I, Officer Miano with Florida Fish and Wildlife Commission, witnessed Jordan Aurillio operating jetski carelessly. During the stop I noticed his eyes were glossy and he had slurred speech. He wasn't able to get the fire extinguisher almot's fell off of jetski.

Arrest Report

Cpl. White

Off. Felix

Boca Raton

SCANNED

APR 26 2021

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Jordan Aurillio agreed to perform SFST's

During the SFST's

He had 6 clues for HGN, 10 clues for finger to nose task, 2 clues for palm pat, 4 clues for hand coordination tasks.

Jordan Aurillio agreed to breath test and results were .238 BAC, .250 BAC

Jail Booking Facility

Booking Date/Time 4/25/2021 04:43 PM	Booking County PALM BEACH	Booking Facility MAIN DETENTION CENTER	Booking Facility Phone (561) 996-1699
Booking Facility Location 3228 GUN CLUB ROAD WEST PALM BEACH, FLORIDA 33406-3001			Booking Number
Booking Comments			

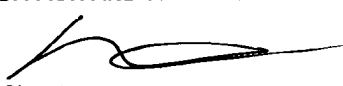
Court

Court County PALM BEACH	Court Location 3228 GUN CLUB ROAD WEST PALM BEACH, FL 33406		
Court PALM BEACH COUNTY COURT AT GUN CLUB	Court Phone	Court Apperance Date / Time	Court Fine
Comments			

Officer Name Rank / ID # M. MIANO WN135	Involvement On Report / Reporting Role REPORTING OFFICER	Officer Agency Org/Unit FLORIDA FISH AND WILDLIFE CONSERVATION COMMISSION FWCSISO REGION AIST LUCIE
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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 M. MIANO	Office Rank OFFICER	Officer ID No WN135	Sworn and subscribed before me, the undersigned authority This the <u>25</u> day of <u>April</u> , <u>2021</u> DEPUTY OF THE COURT, NOTARY OR LAW ENFORCEMENT
Officer Agency FLORIDA FISH AND WILDLIFE CONSERVATION COMMISSION			 Officer Signature

Report Date / Time 4/25/2021 05:23 PM	Report Number C-0914AAAAAA	Case Number/Cad Number FWCS21OFF011235 / FWCS21CAD020495	Reporting Officer Name M. MIANO
Originating Agency ORI FL0488000	Occur Date Time Range 04/25/2021 16:21:09 -	Jurisdiction	Clearance
<input type="radio"/> No Bill / Petition <input type="radio"/> Issue Warrant <input type="radio"/> Prosecution Approved			Signature of Assistant State Attorney _____ Date _____

NOT A CERTIFIED COPY



FLORIDA FISH AND WILDLIFE CONSERVATION COMMISSION
DIVISION OF LAW ENFORCEMENT

IMPLIED CONSENT WARNING FOR BREATH (BUI)

DEFENDANT'S NAME: Jordan Aurilio CASE NO: 11235

I am now requesting that you submit to a lawful test of your **BREATH** for the purpose of determining its alcohol content.

Will you take the test?

YES



NO



NOTE: READ THE BELOW ONLY IF THE ANSWER TO THE ABOVE IS "NO." *If the answer to the above is "YES," move to and complete the signatures section of this document.*

If you refuse to submit to the test I have requested of you, it will result in a civil penalty of \$500. Additionally, if you refuse to submit to the test I have requested of you and you have previously been fined for refusal to submit to a lawful test of your breath, urine, or blood you will be committing a misdemeanor, in addition to any other penalties which can be imposed by law. Refusal to submit to the test I have requested is admissible into evidence in any criminal proceeding.

In ADDITION to the above, read this statement ONLY if the person is under the age of 21:

Furthermore, if you refuse to submit to this test, you will be required to complete 50 hours of community service and your privilege to operate a vessel will be suspended until the community service is performed.

Do you understand what I have just read to you?
Do you still refuse to submit to this test?

YES
YES



NO
NO



will take test

SIGNATURES

Date read: 25 April 2021 Time read: 16:43 Location read: Silver Palms Park

OFFICER'S NAME (printed): M. Miano

OFFICER'S SIGNATURE: [Signature]

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

Instrument Type: Intoxilyzer 8000
Instrument Registered To: FISH & WILDLIFE CC
Instrument Serial Number: 80-005248 Software: 8100.27
Date of Test: 04/25/2021

Date of Last Agency Inspection: 03/30/2021
Observation Period Began: 16:43
Subject's Name: JORDAN J AURILIO

DOB: 10/01/1998 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		17:10
Air Blank	0.000	17:10
Control Test	0.082	17:10
Air Blank	0.000	17:11
Subject Sample #1	0.238	17:12
Air Blank	0.000	17:13
Air Blank	0.000	17:14
Subject Sample #2	0.250	17:15
Air Blank	0.000	17:16
Control Test	0.081	17:16
Air Blank	0.000	17:17
Diagnostics Check OK		17:17

Cylinder Lot: 1217042
Exp: 10/10/2022

State of Florida, County of Palm Beach

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

I NATHAN A BROCK, 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: [Signature] NO21

Date: 4/25/21

Signature

Sworn to (or affirmed) before me this 25 day of April, 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.

BOATING AND RESOURCE WARNING
FLORIDA FISH AND WILDLIFE CONSERVATION COMMISSION

W1219387



COUNTY OF
PALM BEACH (50)

CITY OF (IF APPLICABLE)
BOCA RATON (32)

DAY OF WEEK
SUNDAY

MONTH
APRIL

DAY YEAR TIME OF DAY
25 2021 17:52 PM

RECIPIENT

NAME (FIRST MIDDLE LAST)
JORDAN JOSEPH AURILIO
STREET
3510 MABILLION WAY

CITY

WELLINGTON

TELEPHONE NUMBER DATE OF BIRTH & AGE RACE SEX HEIGHT
10/1/1998 22 W M 505

DRIVER LICENSE OR OTHER I.D. NUMBER
A640430983610
STATE TYPE OF I.D.
FL E

EXPIRES
10/1/2021

VESSEL

VESSEL REGNO STATE EXPIRES ON YEAR MAKE
FL4538RS FL 2/19/2023 2018 YAMAHA MOTOR CORP

VEHICLE

VEHICLE TAG STATE EXPIRES ON YEAR MAKE

LOCATION

699 E ROYAL PALM RD

N 26 21.0114

W 80 4.6879

BOATING WARNINGS

Careless Operation

RANK / SIGNATURE AND IDENTITY OF OFFICER
OFFICER M. MIANO

Don't let a bad decision ruin a good day.
ORG / UNIT I.D. NUMBER
FWCSISO REGION AIST LUC WN135

COPY TYPE
RECIPIENT

NOT A CERTIFIED COPY

FLORIDA FISH AND WILDLIFE CONSERVATION COMMISSION
VESSEL TOW

VESSEL TOW RECEIPT

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CASE NUMBER
FWCS210FF011235

DATE / TIME 4/25/2021 4:43:48 PM COUNTY PALM BEACH (50) CITY BOCA RATON (32) OTHER NUMBER CITATION / REPORT

NO HOLD - MAY BE RELEASED

OWNER NAME (FIRST MIDDLE LAST SUFFIX) / BUSINESS NAME JORDAN JOSEPH AURILIO CITY WELLINGTON STATE FL ZIP CODE 33449 TELEPHONE
ADDRESS 3510 MABILLION WAY
☐ OWNER PRESENT OR ☐ OWNER NOTIFICATION ATTEMPTED OWNER NOTIFICATION ATTEMPTS ☐ OWNER NOTIFICATION SUCCESSFUL

OPERATOR FIRST NAME JORDAN MIDDLE NAME JOSEPH LAST NAME AURILIO SUFFIX NAME
ADDRESS 3510 MABILLION WAY CITY WELLINGTON STATE FL ZIP CODE 33449 TELEPHONE

VESSEL YEAR MAKE 2018 YAMAHA MOTOR CORP USA TYPE PERSONAL WATERCRAFT COLOR BLUE HULL MATERIAL FIBERGLASS LENGTH 10 F
VESSEL HIN YAMA0528E818 VESSEL REGNO FL4638RS STATE FL EXPIRATION 2/19/2023 # ENGINES 1 ENGINE TYPE INBOARD HP FUEL GAS PROPULSION Water Jet
CIC ENTRY RED TAG DATE / TIME ID NUMBER NAME
REASON VESSEL TOWED ARREST

TOW TOW SELECTION TYPE OTHER LOCATION VESSEL INVENTORIED / TOWED FROM SILVER PALMS BOAT RAMP DAY TELEPHONE 561-844-8056 NIGHT TELEPHONE
TOWING SERVICE SEATOW CITY / STATE / ZIP
ADDRESS 2300 BROADWAY RIVIERA BEACH, FL 33404

STORAGE VESSEL STORAGE LOCATION SEATOW STORAGE YARD DAY TELEPHONE 561-844-8056 NIGHT TELEPHONE
ADDRESS 2300 BROADWAY RIVIERA BEACH, FL 33404 CITY / STATE / ZIP

VESSEL DAMAGE ☒ NO DAMAGE DAMAGE COMMENTS
MARK AREA OF DAMAGE
☐ ENGINES
☐ PROPS
☐ SAILS
☐ OTHER
PORT SIDE STARBOARD SIDE
OVERHEAD VIEW HULL BOTTOM VIEW

INVENTORY ITEM TYPE	INVENTORY ITEM DESCRIPTION	QUANTITY	CONDITION
OTHER	VAPE E CIGARETTE	1 OTHER	OTHER
SAFETY EQUIPMENT	KILL SWITCH LANYARD	1 OTHER	FAIR
OTHER	WHITE/GREY TOWEL	1 OTHER	WORN

OFFICER COMMENTS

WE THE UNDERSIGNED OFFICER(S) AND TOW OPERATOR, HEREBY CERTIFY THAT THE ABOVE LISTED JOINT PROPERTY INVENTORY IS CORRECT TO THE BEST OF OUR KNOWLEDGE.

SIGNATURE OF TOW OPERATOR
MATTHEW MAGNER
PRINTED NAME OF TOW OPERATOR

DATE 4/25/21

SIGNATURE OF OFFICER
RANK AND NAME OF OFFICER DUDAS, ZACHARY T
OFFICER
ORG / UNIT FWCS ISO REGION A
ID NUMBER WP215



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

REVIEW COMPLETED BY

Booking Number: 2021010028	Date: 04/26/2021
	Specialist Name/ID: C. Denzel/8691