0467878   2 2CT 4019MB   142

Sonnenberg, Kevin

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias: 1   Juvenile: N

ADMINISTRATIVE

OBTS Number:

Agency ORI Number: Agency Name: Palm Beach Police Department   Agency Report Number (N.T.A.'s only): 22-000318

Charge Type: Check as many as apply. ☐ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☑ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

Weapon Seized / Type: 1. Yes 2. No — 2   Multiple Clearance Indicator: UK

Location of Arrest: 1100 Block South Ocean Blvd Palm Beach FL   Location of Offense (Business Name, Address): 1100 Block South Ocean Blvd Palm Beach FL

Date of Arrest: 03/11/22   Time of Arrest: 0149   Booking Date: 03/11/22   Booking Time: Jail Date: Jail Time: Location of Vehicle: KAUFF'S TOWING

DEFENDANT

Name (Last, First, Middle): Sonnenberg Kevin Gilbert   Alias (Name, DOB, Soc. Sec. #, Etc.):

Race (W - White I - American Indian B - Black O - Oriental/Asian): W   Sex: M   Date of Birth: 08/02/92   Height: 509   Weight: 190   Eye Color: HAZ   Hair Color: Brown   Complexion: Fair   Build: Small

Scars, Marks, Tatoos, Unique Physcal Features (Location, Type, Description):   Marital Status: Single   Religion: NONE   Indication of: Alcohol Influence Y ☒ / Drug Influence N ☒

Local Address (Street, Apt. Number): 4004 SW 26th Dr Apt 34   (City) Gainesville   (State) FL   (Zip) 32608   Phone (561) 371 3247   Residence Type (1. City 2. County 3. Florida 4. Out of State): 3

Permanent Address (Street, Apt. Number):   (City)   (State)   (Zip)   Phone ( )   Address Source:

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

DL Number, State: S-551-507-92-282-0   [redacted]   INS Number: Place of Birth (City, State): Rio, Brazil   Citizenship: U.S

CO-DEF

Co-Defendant Name (Last, First, Middle):   Race   Sex   Date of Birth   ☐ 1. Arrested ☐ 2. At Large   ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile

Co-Defendant Name (Last, First, Middle):   Race   Sex   Date of Birth   ☐ 1. Arrested ☐ 2. At Large   ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile

JUVENILE

☐ Parent ☐ Legal Custodian ☐ Other: Name (Last)   (First)   (Middle)   Residence Phone ( )

Address (Street, Apt. Number)   (City)   (State)   (Zip)   Business Phone ( )

Notified by: (Name)   Date   Time   Juvenile Disposition: 1. Handled/ processed within Dept. and Released. 2. TOT HRS / DYS 3. Incarcerated

Released To: (Name)   Relationship   Date   Time

The above address provided by ☐ defendant and / or ☐ defendant's parents The child and / or parent was told to keep the Juvenile Court Clerk (Phone 355-2526) informed of any change of address. ☐ Yes, by: (Name) ☐ No: (Reason)   School Attended   Grade

Property Crime? ☐ Yes ☐ No   Description of Property   Value of Property

CODE

Drug Activity: N. N/A P. Possess S. Sell B. Buy T. Traffic R. Smuggle D. Deliver E. Use K. Dispense/ Distribute M. Manufacture/ Produce/ Cultivate Z. Other

Drug Type: N. N/A A. Amphetamine B. Barbiturate C. Cocaine E. Heroin H. Hallucinogen M. Marijuana O. Opium/Deriv. P. Paraphernalia/ Equipment S. Synthetics U. Unknown Z. Other

CHARGE

Charge Description: DUI   Counts: 1   Domestic Violence: ☐Y ☒N   Statute Violation Number: 316.193 1 A   Violation of ORD #:

Drug Activity: Drug Type: Amount / Unit: Offense #: 22-000318   Warrant / Capias Number: Bond:

CHARGE

Charge Description: Counts: Domestic Violence: ☐Y ☐N   Statute Violation Number: Violation of ORD #:

Drug Activity: Drug Type: Amount / Unit: Offense #:   Warrant / Capias Number: Bond:

CHARGE

Charge Description: Counts: Domestic Violence: ☐Y ☐N   Statute Violation Number: Violation of ORD #:

Drug Activity: Drug Type: Amount / Unit: Offense #:   Warrant / Capias Number: Bond:

SCANNED
MAR 11 2022

CHARGE

Charge Description: Counts: Domestic Violence: ☐Y ☐N   Statute Violation Number: Violation of ORD #:

Drug Activity: Drug Type: Amount / Unit: Offense #:   Warrant / Capias Number: Bond:

NOTICE TO APPEAR

Location (Court, Room Number, Address): 322 Gun Club Rd West Palm Beach FL

Court Date and Time: Month April   Day 21   Year 2022   Time 08:30 (AM) PM

I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED BY THIS **NOTICE TO APPEAR**, THAT I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.

Signature of Defendant (or Juvenile and Parent /Custodian)   Date Signed

ADMIN

HOLD for other Agency Name: Signature of Arresting Officer: x [signature] 0059   Name Verification (Printed by Arrestee) (PRINT)

☐ Dangerous ☐ Suicidal ☐ Resisted Arrest ☐ Other: Name of Arresting Officer (Print): Thomas March   I.D. #: 0059   Agency: PBPD

MAR 11 AM 3:48

Intake Deputy: [signature]   I.D. #   Pouch #   Transporting Officer: Thomas March   ID #   Agency   Witness here if subject signed with an -X"   PAGE 1 OF 1

DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT (N.T.A.'s ONLY)

PBSO #148 REV. 8/97

March # 0059

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 11 DAY OF March 20 22, AT 0149 (AM) PM

SUBJECT: Kevin Sonnenberg CASE NUMBER: 22-000318

AGENCY: Palm Beach Police Dept ARRESTING OFFICER: Thomas March

PERSONAL CONTACT

DRIVING PATTERN: ACTUAL PHYSICAL CONTROL (PHYSICAL EVIDENCE OR STATEMENTS PUTTING DEF. BEHIND WHEEL OF VEHICLE)

I observed a silver Honda bearing FL Tag 128PME traveling eastbound over the small bridge on Southern blvd.. I was parked at the BMT Circle facing Southbound and the vehicle stopped at the base of the bridge upon observing my vehicle. The drive then continued traveling Southbound in the 1100 Block of S. Ocean blvd., then suddenly came to an abrupt stop in the roadway and reversed the vehicle. Office Mayles had to stop the patrol vehicle abruptly and use to horn to avoid having the driver crash into us

OBSERVATION OF DRIVER: I approached the passenger side door and shined my flashlight at the driver. The driver did not turn his head until I knocked on the window. Upon opening the passenger window, Sonnenberg had a dazed look.

DRIVER'S STATEMENTS: [redacted] Sonnenberg stated he was going to the beach, then later stated he was going home. [redacted]

ODORS: Unknown alcoholic beverage emanating from facial area

GENERAL OBSERVATIONS

SPEECH: Slurred

ATTITUDE: Calm, Frustrated

CLOTHING: Shoes, Jeans, Shirt

MEDICAL/OTHER: Epolepsy

STATE OF FLORIDA
COUNTY OF PALM BEACH

[signature]
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 11 day of March 20 22 by ofc. March

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

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

JOSHUA BELL
MY COMMISSION #GG346008
EXPIRES: JUN 18, 2023
Bonded through 1st State Insurance

SUBJECT: Kevin Sonnenberg CASE NUMBER 22-000718

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- [x] LT EYE-LACK OF SMOOTH PURSUIT
- [x] RT EYE-LACK OF SMOOTH PURSUIT
- [x] LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
- [x] RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
- [x] LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES
- [x] RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

Other Observations:

WALK & TURN Sonnenberg missed heel to toe several times on first portion of task. During the first nine steps, Sonnenberg took 22 steps and had to be instructed to stop, turn around, and return nine steps. Sonnenberg then proceeded to return

ONE LEG STAND: Used arms for balance. Did not count until instructed. Almost fell several times.

FINGER TO NOSE: not demonstrated

ROMBERG ALPHABET: Not demonstrated

BREATH TEST RESULTS: .214 and .217

STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 11 day of March 20 22 by Ofc. March

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

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

JOSHUA BELL
MY COMMISSION #GG346008
EXPIRES: JUN 18, 2023
Bonded through 1st State Insurance

Mad Hatter Lounge
1532 N Dixie Hwy
Lake Worth, FL 33460

Server: Marc D
Check #97
SONNENBERG, KEVIN G
Guest Count: 1
Ordered: 3/10/22 10:42 PM

4 LONG ISLAND	$38.00
Subtotal	$38.00
Total	$38.00

Credit Card

Incremental pre-authorization
Visa [redacted]
Time 03/11/22 1:05 AM

Transaction Type	Sale
Authorization	Approved
Approval Code	174925
Payment ID	NKqqxdk9cMpX
Card Reader	BBPOS

Amount $38.00

+ Tip: _____

= Total: _____

X_____
KEVIN G SONNENBERG

Customer Copy

THANK YOU!

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: 80-006029 Software: 8100.27
Date of Test: 03/11/2022

Date of Last Agency Inspection: 02/04/2022
Observation Period Began: 02:03
Subject's Name: KEVIN G SONNENBERG DOB: 08/02/1992 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	02:30
Air Blank	0.000	02:31
Control Test	0.081	02:31
Air Blank	0.000	02:32
Subject Sample #1	0.214	02:32
Air Blank	0.000	02:33
Air Blank	0.000	02:35
Subject Sample #2	0.217	02:35
Air Blank	0.000	02:36
Control Test	0.080	02:36
Air Blank	0.000	02:37
Diagnostics Check	OK	02:37

Cylinder Lot: 19021080A2
Exp: 09/05/2023

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 SHARI L O'NEAL, 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: S. O'Neal Date: 03-11-22
Signature

Sworn to (or affirmed) before me this 11 day of March 2022

[signature] Ofc. March #0059
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.

FDLE/ATP FORM 38 - MARCH 2004, Ref. 11D-8.007

TESTING FACILITY TASK REPORT

AGENCY: PBPD OFC. MARCH #0059

SUBJECT: SONNENBERG, KEVIN G.

CASE NUMBER: 22-044987

DATE: 03-11-22

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 02:27 HRS

ENDING TIME: 02:41 HRS

BREATH TESTS RESULTS: 1) .214 TIME 02:32 A.M. ☒ P.M. ☐ 2) .217 TIME 02:35 A.M. ☒ P.M. ☐

3) TIME A.M. ☐ P.M. ☐ 4) TIME A.M. ☐ P.M. ☐

BREATH OPERATOR: S.O'NEAL #6212

MAINTENANCE TECHNICAN: J. KARLECKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: CALM, QUIET, COOPERATIVE

CLOTHING: SHIRT- BLACK PANTS- BLUE JEANS

MEDICAL CONDITIONS: DEPRESSION, ANXIETY, PTSD

MEDICATIONS: SEVERAL MEDS.

OTHER:

EYES: RED, GLASSY
ODOR OF UNKNOWN ALCOHOLIC BEVERAGE.

COMMENTS:

20 MIN. OBSERVATION DONE BY A/O MARCH #0059
A/O REQUESTED THE BREATH TEST.
D SUBMITTED TO THE BREATH REQUEST.
D COMPLETED THE TEST CORRECTLY.
EXPLAINED THE BREATH RESULTS TO THE D.
C/W READ ON CAMERA, Q&A STARTED THEN D DECIDED TO STOP ANSWERING.

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

PBSO CASE # 22-044987 PBSO ZONE 1-23

AGENCY CASE # 22-000318 CRASH CASE #

TIME OF STOP/CRASH 0134 DATE 3/11/22 DAY Friday

SUBJECT'S NAME Kevin Sonnenberg RACE White SEX Male

HGT 509 WGT 190 DOB 08/2/92

LOCATION 1100 Block South Ocean blvd

ARRESTING OFFICER'S NAME & ID Thomas Marcs #0059 AGENCY PBPD

DIVISION: Patrol

NOTIFIED BY COMMO Yes

ARRIVAL AT FACILITY 0203

ARREST TIME 0149

BREATH RESULTS:

1. .214
2. .217
3.
4.

TESTING OFFICER'S ID 6212 PBSO VIDEOTAPE # 1

WITNESS LIST

CASE NUMBER: 22-000318

ARRESTING OFFICER: Thomas Mrzl
ADDRESS: 345 S. County Road
PHONE NUMBERS (HOME): 561-838-5454 (WORK)
CAN TESTIFY TO:

NAME:
ADDRESS:
PHONE NUMBERS (HOME) (WORK)
CAN TESTIFY TO:

NAME:
ADDRESS
PHONE NUMBERS (HOME) (WORK)
CAN TESTIFY TO:

NAME:
ADDRESS
PHONE NUMBERS (HOME) (WORK)
CAN TESTIFY TO:

NAME:
ADDRESS
PHONE NUMBERS (HOME) (WORK)
CAN TESTIFY TO:

NAME:
ADDRESS
PHONE NUMBERS (HOME) (WORK)
CAN TESTIFY TO:

NAME:
ADDRESS
PHONE NUMBERS (HOME) (WORK)
CAN TESTIFY TO:

NAME:
ADDRESS
PHONE NUMBERS (HOME) (WORK)
CAN TESTIFY TO:

NAME:
ADDRESS
PHONE NUMBERS (HOME) (WORK)
CAN TESTIFY TO:

NAME:
ADDRESS
PHONE NUMBERS (HOME) (WORK)
CAN TESTIFY TO:

NAME:
ADDRESS
PHONE NUMBERS (HOME) (WORK)
CAN TESTIFY TO:

SUBJECT: _____ CASE NUMBER: _____

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)_____

WHITE - STATE ATTY. YELLOW - DHSMV PINK - CENTRAL RECORDS GOLD - JAIL

SUBJECT: _____ CASE NUMBER: _____

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? Yes

WHERE WERE YOU GOING? Home

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? [illegible]

HOW MUCH DO YOU WEIGH? _____ HAVE YOU BEEN DRINKING? _____ WHAT? [illegible]

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: _____

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	☐	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	☐	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	☐	119.071(4)(c)	Undercover personnel.	
	☐	119.071(2)(f)	Confidential informants (CIs).	
	☐	119.071(2)(e)	Confession.	
Public Info. Exemptions	☐	985.04(1)	Juvenile offender records.	
	☐	119.071(h)(i)	Assets of a crime victim.	
	☐	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	☐	394.4615(7)	Mental health information.	
	☐	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)	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	☐	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	☐			
	☐			
	☐			
	☐			
	☐			
Other	☐		Other:	
	☐		Other:	

REVIEW COMPLETED BY

Booking Number: 2022006446	**Date:** 03/11/2022
	Specialist Name/ID: T Howard/7185