

21 CT 735ASB

Report Date / Time 1/16/2021 08:11 PM	Report Number FHP99ARR834027	Case Number/Cad Number FHPL21OFF003121 / LWRC21CAD008861	Reporting Officer Name Z. TODD
Originating Agency ORI	Occur Date Time Range 01/16/2021 18:27:35 -	Jurisdiction	Clearance

Location of Occurrence

County PALM BEACH	Location Type PUBLIC PLACE	Location Description ROADWAY
Street Number SR-9	Street SB INDIANTOWN ROAD	Apt/Lot/Bldg
City JUPITER	State FL	Zip Code 33458

Defendant

First Name KYLE	Middle Name NICHOLAS	Last Name MEREDITH	Suffix	Race WHITE	Sex MALE	Height 600	Weight 165	Hair RED	Eyes GRN
MNI #	SSN	Date of Birth 12/09/1982	Age 38	ID Type E	Drivers License or other ID M633514824490	State FL	OCA / Agency ID		
Place of Birth:	PAOLI IN USA								
Address * RESIDENCE / 3871 SE FAIRWAY WEST , STUART, FL 34997 /									

Arrest

Arrest Date/Time 1/16/2021 7:16:08 PM	Arrest Location Type PUBLIC PLACE	Arrest Location Description ROADWAY
Street Number SR-9	Street SB INDIANTOWN ROAD	Apt/Lot/Bldg
County PALM BEACH	City JUPITER	State FL
Zip Code 33458		

Charge : S

Counts 1	Charge 316.193.1a	Bond Amount \$0.00	<input type="checkbox"/> No Bond
Charge Degree S	Charge Level MISDEMEANOR	General Offense Code DUI-UNLAW BLD ALCH	
Charge Description DUI INFLUENCE OF ALCOHOL OR DRUGS			

Charge : S

Counts 1	Charge 316.1939.1	Bond Amount \$0.00	<input type="checkbox"/> No Bond
Charge Degree F	Charge Level MISDEMEANOR	General Offense Code DUI-UNLAW BLD ALCH	
Charge Description REFUSE TO SUBMIT DUI TEST AFTER LIC SUSP			

Charge : S

Counts 1	Charge 318.14.3	Bond Amount \$0.00	<input type="checkbox"/> No Bond
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Arrest Report

1021 17 08 21
FILED
JAN 17 2021
 JOSEPH ABRUZZO, CLERK
 PALM BEACH COUNTY, FL

Spann 8161

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JAN 17 2021

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Charge Degree S	Charge Level MISDEMEANOR	General Offense Code RESIST OFFICER
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Charge Description REFUSE TO ACCEPT SIGN CITATION OR POST BOND

Is Arrestee Juvenile?	No
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Type of Arrest	On-View Arrest (apprehension without a warrant or previous incident report)
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Bond Set by Court	
Bond Amount	<input type="checkbox"/> No Bond

Bond Type(s)

Probable Cause

On January 16, 2021 I was on routine patrol in my marked patrol car in Palm Beach County. I arrived at the scene of a traffic crash that occurred on I-95 (State Road 9) southbound south of Indiantown road. Tpr. Gonzalez briefed me on the crash investigation and stated that he observed the driver of the Ford to have bloodshot glassy eyes, slurred speech and the odor of an unknown alcoholic beverage emitting from his breath as he talked. Capt. Strickland also stated to me that he observed the driver of the ford to have slurred speech and bloodshot glassy eyes as he talked to him. Capt. Strickland stated that he observed the driver next to the Ford and with the keys in his pocket. The driver was later identified as Kyle Meredith by his FL DL. Mr. Meredith is also the registered owner of the Ford sedan involved in the crash. I had Mr. Meredith walk towards the front of my patrol car. As he walked, I observed that he had a sway and that several times he used a vehicle to balance himself and keep from falling. He stood in front of me and I observed that he had an orbital sway, bloodshot glassy eyes, slurred thick speech and the odor of an unknown alcoholic beverage was emitting from his breath as he talked. I then advised Mr. Meredith that the crash investigation was concluded and that I was beginning a DUI investigation. He stated that he understood. I then read Miranda Warning from my state issued card and he stated that he understood. He then stated to me that he was driving his car and that he was attempting to turn around and go north instead of south. As he continued to talk, I observed the odor of an unknown alcoholic beverage emitting from his breath as he talked. I then requested that he conduct field sobriety exercises and he refused. Taylor warnings were stated to him and he stated that he understood

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and refused again. He was then placed under arrest for DUI. He was then secured in my patrol car and transported to the county jail.

Once I arrived at the county jail, I conducted a 20-minute observation. At no time did he regurgitate or take anything by mouth. I then requested that he provide a lawful sample of his breath and he refused. Implied consent was read, and he stated that he understood. He then agreed to provide a sample. He failed to provide a sample correctly and implied consent was read again. He stated that he understood again and agreed to provide a sample correctly. He then failed again to provide a correct sample and a refusal was then taken. He was then booked into the county jail. He refused to sign the DUI summons.

The above incident occurred in Palm Beach County.

Jail Booking Facility

Booking Date/Time 1/16/2021 08:34 PM	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 02/22/2021 830AM	Court Fine
Comments			


Officer Name Rank / ID # Z. TODD TPR	Involvement On Report / Reporting Role REPORTING OFFICER	Officer Agency Org/Unit FLORIDA HIGHWAY PATROL FHPL1LWRC1PALM BEACH1SR804 JSOF SR702
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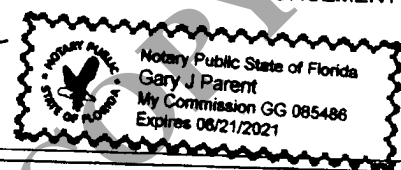
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The undersigned certifies and swears that he/she has just and reasonable grounds to believe that the above named Defendant, committed violation(s), of law, on the below date(s) and time(s), as listed in the probable cause associated with this report:

Reporting Officer

Officer Name Z. TODD	Office Rank TPR	Officer ID No 4141	Sworn and subscribed before me, the undersigned authority This the <u>16</u> day of <u>JANUARY</u> , <u>2021</u> DEPUTY OF THE COURT, NOTARY OR LAW ENFORCEMENT
Officer Agency FLORIDA HIGHWAY PATROL	Officer Signature 		



No Bill / Petition
 Issue Warrant
 Prosecution Approved

Signature of Assistant State Attorney _____ Date _____

NOT A CERTIFIED

Arrest Report

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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, Z. TODD, 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
(Name of law enforcement agency)

or affirm that on or about the 16 day of Jan, 2021, at 1416 P.M. A.M.

DRIVER KYLE NICHOLAS MEREDITH
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# M633514824490, state of FL, was placed under lawful arrest for

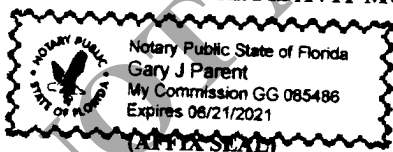
the offense of 316.193(1) D.U.I. - ALCOHOL OR DRUGS (MISDEMEANOR) by Z TODD and
(Name of Arresting Officer)
issued Citation # A7710DE

That on or about the 16 day of Jan, 2021, at 228 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]
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:

The foregoing instrument was sworn and subscribed before
me this 16 day of January, 2021,

by TIA Z. TODD,

who is personally known to me or who has produced
known as identification.

Notary Public [Signature]

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.

**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: 80-006476 Software: 8100.27
Date of Test: 01/16/2021

Date of Last Agency Inspection: 01/15/2021
Observation Period Began: 19:50
Subject's Name: KYLE N MEREDITH

DOB: 12/09/1982 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	20:19
Air Blank	0.000	20:19
Control Test	0.080	20:20
Air Blank	0.000	20:20
Subject Sample #1	VNM*	20:23
Air Blank	0.000	20:24
Air Blank	0.000	20:26
Subject Sample #2	VNM**	20:29
Air Blank	0.000	20:30
Control Test	0.075	20:30
Air Blank	0.000	20:31
Diagnostics Check	OK	20:31

*Volume Not Met (0.223 - Breath Sample Not Reliable to Determine Breath Alcohol Level)
**Volume Not Met (0.193 - Breath Sample Not Reliable to Determine Breath Alcohol Level)

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 GARY J PARENT, 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 Date: 01/16/21

Sworn to (or affirmed) before me this 16 day of January, 2021

Signature of Notary Public-State of Florida J.P.R. Z. TODD 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.



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

PBSO CASE # 21-026234 PBSO ZONE 3-14

AGENCY CASE # FHP21OFF003121 CRASH CASE # _____

TIME OF STOP/CRASH 1820 DATE 1/16/21 DAY SAT

SUBJECT'S NAME KYLE MEREDITH RACE W SEX M

HGT 6'00 WGT 155 DOB 4/12-9-82

LOCATION _____

ARRESTING OFFICER'S NAME & ID TODD C1141 AGENCY FHP E

DIVISION: DUI

NOTIFIED BY COMMO y

ARRIVAL AT FACILITY 1950

Arrest Time 1916

BREATH RESULTS:

1. .223 UNM

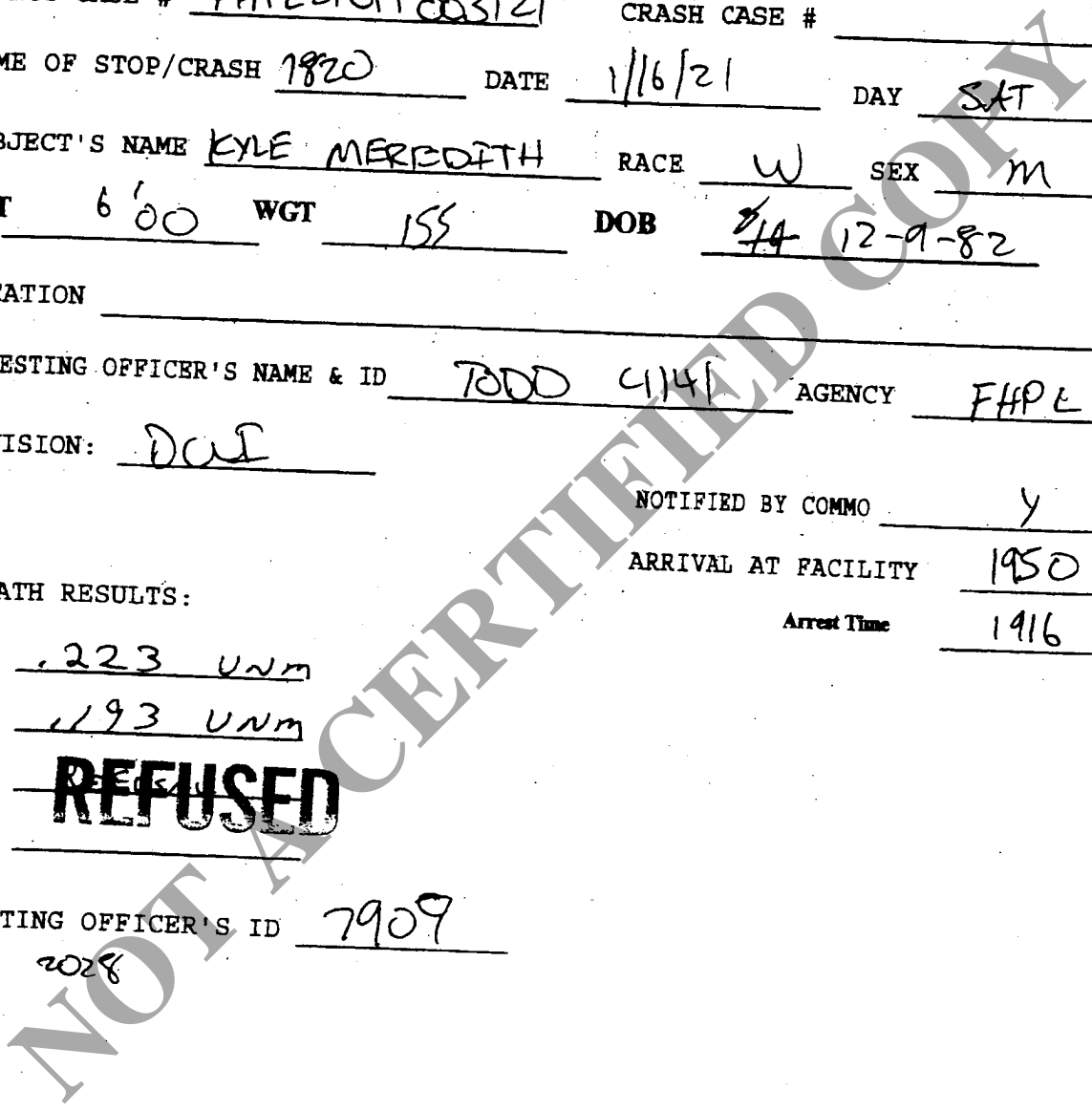
2. .193 UNM

3. **REFUSED**

4. _____

TESTING OFFICER'S ID 7909

2028



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TESTING FACILITY TASK REPORT

AGENCY: FHP-L

SUBJECT: Meredith, Kyle N.

CASE NUMBER: 21-026234

DATE: 01/16/2021

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 2015

ENDING TIME: 2029

BREATH TESTS RESULTS: 1) .223vnm TIME 2023 A.M. P.M. 2) .193vnm TIME 2029 A.M. P.M.
3) Refuse TIME 2028 A.M. P.M. 4) N/A TIME — A.M. P.M.

BREATH OPERATOR: G. Parent #7909

MAINTENANCE TECHNICIAN: J. Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: Thick, slurred.

ATTITUDE: Calm, quiet, vague, dozing off, uncooperative.

CLOTHING: Black slacks, L/S button down blue, white and purple checkered shirt, brown loafers.

MEDICAL CONDITIONS: None.

MEDICATIONS: None.

OTHER:

Eyes glassy, odor of an unknown alcoholic beverage on breath.

REFUSED

COMMENTS:

Arrived at Center A/O began the 20 minute observation at 1950 hrs..

Subject stated no to taking test.

A/O read I/C and explained it.

Subject acknowledged he understood I/C and agreed to take test. Subject would not blow as instructed. After several attempts A/O read I/C again and explained to subject if he could not complete a sample as instructed it would be a refusal. Subject again would not follow instructions A/O called a refusal.

A/O read rights.

Subject stated he understand rights.

A/O attempted Q&A.

Subject invoked right to counsel.

REFUSED

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SUBJECT: MERCEDETH, KYLE N. 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) 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

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SUBJECT: MEREDITH, KYLE A. 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? _____

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: _____

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

REVIEW COMPLETED BY

Booking Number: 2021001361

Date: 01/17/2020

Specialist Name/ID: T Howard/7185

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