

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

Juvenile ☒ N

ADMINISTRATIVE	OBTS Number		Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06-21077436		
	Charge Type: Check as many as apply: <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Weapon Seized / Type 2. No N/A		Multiple Clearance Indicator				
	Location of Arrest (Including Name of Business) N SR 7 / REGALO DR, ROYAL PALM, FL 33411				Location of Offense (Business Name, Address) N SR 7 / REGALO DR, ROYAL PALM, FL 33411				
	Date of Arrest 06/19/2021	Time of Arrest 0202	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle STEVE'S TOWING		
DEFENDANT	Name (Last, First, Middle) Margotta, Leonardo,								
	Alias (Name, DOB, Soc. Sec. #, Etc.)								
	Race W - White I - American Indian B - Black O - Oriental/Asian	Sex M	Date of Birth 4/10/1973	Height 5'09	Weight 200	Eye Color BROWN	Hair Color GRAY	Complexion MED	Build MED
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) RIGHT ARM				Marital Status Single	Religion CATHOLIC	Indication of: Alcohol Influence Drug Influence Y <input type="checkbox"/> N <input type="checkbox"/> Unk. <input type="checkbox"/>		
	Local Address (Street, Apt. Number) (City) (State) (Zip) 15664 72nd Ct N, Loxahatchee, FL 33470				Phone (561) 701-0592		Residence Type: 1. City 2. County 3. Florida 4. Out of State 2		
	Permanent Address (Street, Apt. Number) (City) (State) (Zip)				Phone		Address Source FL DL / VERBAL		
	Business Address (Name, Street) (City) (State) (Zip)				Phone		Occupation HANDYMAN		
	D/L Number, State M623520731300, FL		Soc. Sec. Number		INS Number		Place of Birth (City, State) ORANGE, NJ		
	Citizenship YES								
	CO-DEF	Co-Defendant Name (Last, First, Middle)				Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large <input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile
Co-Defendant Name (Last, First, Middle)				Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large <input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. 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 <input type="checkbox"/> defendant and / or <input type="checkbox"/> 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. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)				School Attended Grade					
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No Description of Property				Value of Property					
<div style="display: flex; justify-content: space-between;"> <div> Drug Activity N. N/A P. Possess </div> <div> S. Sell B. Buy T. Traffic </div> <div> R. Smuggle D. Deliver E. Use </div> <div> K. Dispense/ Distribute </div> <div> M. Manufacture/ Produce/ Cultivate </div> <div> Z. Other </div> </div> <div style="display: flex; justify-content: space-between;"> <div> Drug Type N. N/A A. Amphetamine </div> <div> B. Barbiturate C. Cocaine E. Heroin </div> <div> H. Hallucinogen M. Marijuana O. Opium/Deriv. </div> <div> P. Paraphernalia/ Equipment S. Synthetics </div> <div> U. Unknown Z. Other </div> </div>									
CHARGE		Charge Description Driving Under the Influence				Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number 316.193(1)(A)	
	Drug Activity Drug Type Amount / Unit N N				Offense # 21077436		Warrant / Capias Number Bond		
	Charge Description				Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number Violation of ORD #		
	Drug Activity Drug Type Amount / Unit				Offense #		Warrant / Capias Number Bond		
	Charge Description				Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number Violation of ORD #		
	Drug Activity Drug Type Amount / Unit				Offense #		Warrant / Capias Number Bond		
	Charge Description				Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number Violation of ORD #		
	Drug Activity Drug Type Amount / Unit				Offense #		Warrant / Capias Number Bond		
	Charge Description				Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> 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) Criminal Justice Complex, 3228 Gun Club Road, West Palm Beach, FL 33406 - Ph: (561) 688-4600								
	Court Date and Time Month JULY Day 15th Year 2021 Time 08:30 AM <input checked="" type="checkbox"/> 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) 06/19/2021 Date Signed								
	HOLD for other Agency Name: <input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other:				Signature of Arresting Officer Inv. Cisson ID# 24091 I.D. # 24091				
ADMIN	Name of Arresting Officer (Print) Inv. Cisson				Name Verification (Printed by) (PRINT)				
	Transporting Officer ID # 24091 Agency PBSO				Witness here if subject signed with an "X"				
	Inv. Deputy ID # 24091 Pouch #				PAGE 1 OF 1				
	DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT (N.T.A.'s ONLY)								

PROBABLE CAUSE AFFIDAVIT

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

1 Juvenile N

OBTS Number

Agency Off Number

Agency Name

Agency Report Number

FLO 500000

PALM BEACH COUNTY SHERIFF'S OFFICE

06-21077436

Charge Type:
Check as many as apply.

1. Felony
2. Traffic Felony

3. Misdemeanor
4. Traffic Misdemeanor

5. Ordinance
6. Other

Special Notes:

Name (Last, First, Middle)

MARGOTTA, LEONARDO.

Alias

Race

Sex

Date of Birth
04/10/1973

Charge Description

DUI

316.193(1) A

Charge Description

Charge Description

Charge Description

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.

☐ confessed to

admitting to the below facts.

☐ was observed by _____ who told
that he/she saw the arrested person commit the below acts.

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

On the 19 day of JUNE 2021 at _____ ☐ A.M. ☐ P.M. (Specifically include facts constituting cause for arrest.)

On 06/19/2021 at approximately 0113 hours, I was patrolling the area of State Rd 7 Extension and Regalo Dr when I observed a white Chevy Van bearing FL Tag y13HWF traveling northbound on State Rd 7 at about 70 mph. D/S McMahon ID# 6149 activated his Dual Stalker Radar S/N KC059979. The Stalker Radar stated the speed of the White Chevy Van to be 74 mph. while observing the vehicle, it also passed another vehicle in a no passing zone crossing the painted double yellow line.

I activated my emergency lights and conducted a traffic stop on the vehicle. Upon approaching the vehicle I observed the driver to have blood shot glassy eyes and pin point pupils. I also observed an odor of an unknown alcoholic beverage emanating from him. The driver identified himself as Leonardo Margotta. He stated he was coming from "Foster's" Bar.

DUI Investigator Clisson ID#24091 arrived on scene. I notified him of my findings. This case was turned over to him.

This is a supplement of the original.

STATE OF FLORIDA
COUNTY OF PALM BEACH

D/S QUEVEDO

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 19 day of JUNE 2021 by LEO

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

INV. CISSON 24091

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

PAGE

1 of 1

DISTRIBUTION:

WHITE - COURT COPY

GREEN - STATE ATTORNEY

YELLOW - AGENCY

PINK - AGENCY

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 19th DAY OF June 20 21 AT 0112 AM PM

SUBJECT: Margotta, Leonardo, CASE NUMBER: 21077436

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: Inv. Cisson ID# 24091

PERSONAL CONTACT

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

On June 19th 2021 at approximately 0131 hours I arrived on scene of a traffic stop conducted by Deputy Quevedo ID# 12783. Upon arrival he relayed the following to me: On 06/19/2021 at approximately 0113 hours, I was patrolling the area of State Rd 7 Extension and Regalo Dr when I observed a white Chevy Van bearing FL Tag y13HWF traveling northbound on State Rd 7 at about 70 mph. D/S McMahon ID# 6149 activated his Dual Stalker Radar S/N KC059979. The Stalker Radar stated the speed of the White Chevy Van to be 74 mph. while observing the vehicle, it also passed another vehicle in a no passing zone crossing the painted double yellow line. I activated my emergency lights and conducted a traffic stop on the vehicle. Upon approaching the vehicle I observed the driver to have blood shot glassy eyes and pin point pupils. I also observed an odor of an unknown alcoholic beverage emanating from him. The driver identified himself as Leonardo Margotta. He stated he was coming from "Foster's" Bar. This concludes his supplement.

OBSERVATION OF DRIVER:

I observed the defendant, Leonardo Margotta who was wearing a green and gray tee shirt, blue shorts and gray sneakers. The defendant was sitting in the driver seat of his vehicle, he was the sole occupant. I asked the defendant to walk over to the front of my vehicle and speak with me. While walking over to my vehicle, the defendant was unsteady on his feet and staggered as he walked. While standing stationary the defendant swayed. I could see the defendant's eyes were bloodshot and glossy. He had an obvious odor of an unknown alcoholic beverage emitting from his breath that grew stronger as he spoke, although he was wearing a gator style mask.

DRIVER'S STATEMENTS:

The defendant said he did not have any injuries, diabetes, wear glasses or receive a bump on the head. He complained of a old knee injury from playing football in high school and said that he is a handyman and he worked today. The defendant said he had 3 beers to drink and then changed it to 4 beers. He said he was drinking Bud Light bottles. The defendant said he was coming from Fosters Bar and driving home. He said he was driving the vehicle. He agreed to do roadside field sobriety tasks.

ODORS:

An obvious odor of an unknown alcoholic beverage

GENERAL OBSERVATIONS

SPEECH: Slow, Slurred

ATTITUDE: Calm, Compliant,

CLOTHING: Clean

MEDICAL/OTHER: None

STATE OF FLORIDA
COUNTY OF PALM BEACH

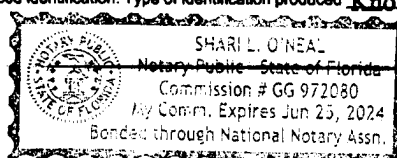
Inv. Cisson ID# 24091
Signature of Arresting/Investigative Officer

The foregoing instrument was sworn to or affirmed and subscribed before me this 19th day of June 20 21 by Inv. Cisson ID# 24091

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

Shari O'Neal (#6212)

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



SUBJECT: Margotta, Leonardo,

CASE NUMBER 21077436

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

Other Observations:

The defendant swayed while standing stationary. I had to remind him to follow the red light. He kept tilting his head back and I had to remind him to keep his head still and bring it down.

WALK & TURN:

The task was explained and demonstrated. The defendant stated he understood the instructions. During the task the defendant failed to maintain the instructional stance. The defendant swayed while standing stationary. The defendant used his arms for balance, did not touch heel to toe multiple times, and took the incorrect number of steps. On the first set of 9 steps, he said 1, 1, 2. He took 10 steps. When he turned, he stepped off the line with the foot he was supposed to keep on the line.

ONE LEG STAND:

The task was explained and demonstrated. The defendant stated he understood the instructions. The defendant swayed while standing stationary. During the task the defendant used arms for balance, put his foot down before 30 seconds elapsed.

FINGER TO NOSE:

The task was explained and demonstrated. The defendant stated he understood the instructions. The defendant swayed while standing stationary. During the task the defendant failed to return his hand to his side. I reminded him to immediately return his hand to his side after the first attempt. He continued to keep his hand/finger up at his nose until I said bring it down. On the second attempt he touched the side of nose. When I called for the 5th attempt/right finger, he raised his left hand.

ROMBERG ALPHABET:

The task was explained and demonstrated. The defendant stated he understood the instructions. The defendant swayed while standing stationary. During the task the defendant missed the letter J. He began again said multiple letter out of order. He stopped at P and refused to continue the task.

BREATH TEST RESULTS: 0.067 0.068 REFUSED URINE

STATE OF FLORIDA
COUNTY OF PALM BEACH

Inv. Cisson ID# 24091

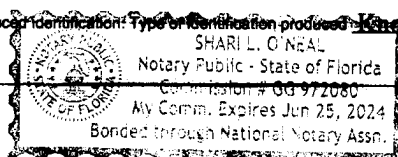
Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 19th day of June, 2021 by Inv. Cisson ID# 24091

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

Shari O'Neal (#6212)

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



WITNESS LIST

CASE NUMBER: 21077436

ARRESTING OFFICER: Inv. Cisson ID# 24091

ADDRESS: 3228 Gun Club Rd, West Palm Beach, FL 33406

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

CAN TESTIFY TO: Facts of the case

NAME: Deputy Quevedo ID# 12783

ADDRESS: 3228 Gun Club Rd, West Palm Beach, FL 33406

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

CAN TESTIFY TO: Traffic Stop

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: _____

TESTING FACILITY TASK REPORT

AGENCY: PBSO INV. CISSON #24091

SUBJECT: MARGOTTA, LEONARDO

CASE NUMBER: 21-077436

DATE: 06-19-21

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 03:02 HRS

ENDING TIME: 03:23 HRS

BREATH TESTS RESULTS: 1) .067 TIME 03:08 A.M. ☒ P.M. ☐ 2) .068 TIME 03:10 A.M. ☒ P.M. ☐
3) TIME A.M. ☐ P.M. ☐ 4) TIME A.M. ☐ P.M. ☐

BREATH OPERATOR: S.O'NEAL #6212

MAINTENANCE TECHNICIAN: J. KARLECKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH:

ATTITUDE: CALM, QUIET, HESITANT, AGITATED, RAMBLING

CLOTHING: SHIRT- GREEN & GRAY SHORTS- NAVY BLUE

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

EYES: RED, GLASSY

FACE: A LITTLE FLUSH

DEXTERITY: FIDGETY

COMMENTS:

20 MIN. OBSERVATION DONE BY A/O CISSON #24091
A/O REQUESTED THE BREATH TEST ON CAMERA.
A/O READ THE IMPLIED CONSENT ON CAMERA.
D UNDERSTOOD THE I/C, D SUBMITTED TO THE BREATH TEST.
D COMPLETED THE TEST CORRECTLY.
EXPLAINED THE BREATH RESULTS TO THE D.
A/O REQUESTED URINE ON CAMERA. D WAS HESITANT ABOUT THE URINE.
A/O READ THE IMPLIED CONSENT AGAIN ON CAMERA.
D REFUSED THE URINE @ 0317 HRS.
C/W READ ON CAMERA.
Q&A CONDUCTED.



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

PBSO CASE # 21077436 PBSO ZONE 15-31
AGENCY CASE # _____ CRASH CASE # _____
TIME OF STOP/CRASH 0112 DATE 06/19/2021 DAY Saturday
SUBJECT'S NAME Margotta, Leonardo, RACE W SEX M
HGT 5'09 WGT _____ DOB 4/10/1973
LOCATION N SR 7 / REGALO DR, ROYAL PALM, FL 33411
ARRESTING OFFICER'S NAME & ID Inv. Cisson ID# 24091 (24091) AGENCY Palm Beach County Sheriff's Office
DIVISION: VCD / DUI
NOTIFIED BY COMMO YES
ARRIVAL AT FACILITY 0240
ARREST TIME 0202

BREATH RESULTS:

.067
.068

Urine/

REFUSED

TESTING OFFICER'S ID 6212 PBSO VIDEOTAPE # /

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: 80-006238 Software: 8100.27
Date of Test: 06/19/2021

Date of Last Agency Inspection: 06/11/2021

Observation Period Began: 02:40

Subject's Name: LEONARDO MARGOTTA

DOB: 04/10/1973 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		03:06
Air Blank	0.000	03:06
Control Test	0.079	03:07
Air Blank	0.000	03:07
Subject Sample #1	0.067	03:08
Air Blank	0.000	03:08
Air Blank	0.000	03:10
Subject Sample #2	0.068	03:10
Air Blank	0.000	03:11
Control Test	0.080	03:11
Air Blank	0.000	03:12
Diagnostics Check OK		03:12

Cylinder Lot: 02021080A1
Exp: 03/05/2023

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: _____

Signature

Date: 06-19-21

Sworn to (or affirmed) before me this 19 day of June, 2021

Signature of Notary Public-State of Florida

Inv. Cisson # 24091
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.

STATE OF FLORIDA
DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES
AFFIDAVIT OF REFUSAL TO SUBMIT TO
BREATH AND/OR URINE TEST

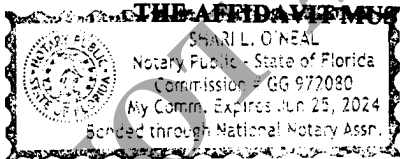
I, Investigator JACKIE CISSON, a duly certified Law Enforcement Officer or Correctional Officer,
(Person reading Implied Consent Warning)
am a member of Palm Beach County Sheriffs Office, and I do swear
(Name of enforcement agency)
or affirm that on or about the NINETEENTH day of June, 2021, at 4:00 AM
DRIVER LEONARDO MARGOTTA
(Type or Print) FIRST MIDDLE OR MAIDEN LAST
DL # M623520731300, state of FL, was placed under lawful arrest for
the offense of DUI by Investigator JACKIE CISSON and
(Name of Arresting Officer)
issued Citation # AEA7JJJE.

That on or about the NINETEENTH day of June, 2021, at 3:17 AM
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 (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 of Law Enforcement Officer or
Correctional Officer



(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before
me this _____ day of _____, 20____
by _____
who is personally known to me or who has produced
_____ as identification.

Notary Public _____

The foregoing instrument was sworn and subscribed before me:

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.



**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)
I/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: 2021014942	Date: 6/20/21
	Specialist Name/ID: A. Pinkney/7796