

UCN: N/A

FL0520300

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

OBTS #		REPORT # CW19-178852		DOCKET # 1822292	
Person ID 311411698			SSN# 000-00-0000		
Charge Description ☐ Felony ☒ Misdemeanor ☐ Warrant ☐ Traffic ☐ Ordinance		Traffic Citation # (if any)		Court Case #	
Charge DRIVING UNDER THE INFLUENCE-REFUSED BREATH TEST				ACEV55E-1	
Defendant's Name (Last, First, Middle) MEHEDI, MARJAN		DOB 07/10/1996	Sex M	Race U	Ht 509
		Wt 141	Hair BRO	Eyes BLK	Skin
Alias	DL # M300540962500	State FL	Scars/Marks/Tattoos/Physical Features		
Local Address (Street, City, State, Zip Code) 11711 N 50THST APT 502 TAMPA FL 33617-1463		Telephone 813-606-6177	Place of Birth BANGLADESH		Citizenship BANGLADESH
Permanent Address (Street, City, State, Zip Code) 11711 N 50THST APT 502 TAMPA FL 33617-1463		Telephone 813-606-6177	Employed by / School STUDENT		
Weapon Seized Type ☐ Yes ☒ No		Indication of Drug Influence ☐ Y ☒ N ☐ UNK	Indication of Mental Health Issues ☐ Y ☒ N ☐ UNK	Indication of Alcohol Influence ☒ Y ☐ N ☐ UNK	
Co-Defendant's Name (Last, First, Middle)		DOB	Sex	Race	In Custody ☐ Yes ☐ 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 23 day of NOVEMBER, 2019, at approximately 11:56 PM, at MEMORIAL CAUSEWAY /EAST OF ISLAND WAY, in Pinellas County did:

REASON FOR STOP: MARJAN MEHEDI WAS STOPPED FOR FAILURE TO MOVE OVER / SLOW DOWN FOR LAW ENFORCEMENT ACTIVELY WORKING IN THE WITH EMERGENCY EQUIPMENT ACTIVATED. MEHEDI ADVISED HE WAS COMING FROM TAMPA AND HAD JUST LEFT SHEPPARD' ON CLEARWATER BEACH AFTER ONLY CONSUMING ONE ALCOHOLIC BEVERAGE.

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 HIS NORMAL FACULTIES WERE IMPAIRED.

BRAC: REFUSED BREATH TEST BREATH: ODOR OF ALCOHOLIC BEVERAGE
BALANCE: SWAYING EYES: BLOOD SHOT / GLASSY
PRIOR CONVICTIONS:.

DEFENDANT PERFORMED POORLY ON ROADSIDE FIELD SOBRIETY TESTS.

COURT INFORMATION: NORTH COUNTY TRAFFIC COURT ON 12/18/2019 AT 0900 HOURS. CITATION #: ACEV55E-1

Contrary to Florida Statute/Ordinance 316.193.1.

ARREST DATE: 11/24/2019 Time 12:35 AM . Aggravating/Mitigating Factors _____

Booking Officer: WERNER 59414 Amount of Bond 500** Bond Out Date 11/24/19 Time NA ☐ 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: 11/24/2019 3:08:35 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.  Declarant Signature OFFICER DANIEL NEGERSMITH 8874 Printed Name		REQUEST FOR INVESTIGATIVE COSTS, F.S. 938.27(1)																			
		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>DATE</th> <th>OFFICER</th> <th>HOURS X PAY RATE</th> <th>OR</th> <th>COST</th> </tr> <tr> <td>11/24/2019</td> <td>NEGERSMITH</td> <td>3 30.00</td> <td></td> <td>\$90.00</td> </tr> <tr> <td colspan="5">OTHER – Describe _____</td> </tr> <tr> <td colspan="4">Continuation sheet ☐ Yes ☐ No</td> <td>TOTAL \$ <u>90.00</u></td> </tr> </table>		DATE	OFFICER	HOURS X PAY RATE	OR	COST	11/24/2019	NEGERSMITH	3 30.00		\$90.00	OTHER – Describe _____					Continuation sheet ☐ Yes ☐ No		
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CLEARWATER POLICE DEPT. Agency 02465504 Declarant ID#																					

Defendant MEHEDI, MARJAN

Court Case No: ACEV55E-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.

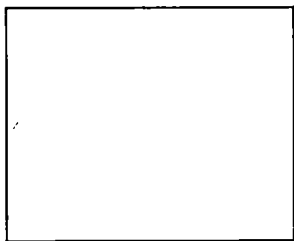
I FURTHER CERTIFY THAT:

- ☐ 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