

ARREST / NOTICE TO APPEAR

Juvenile Referral Report

20CT14726

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

1 Juvenile

N

OBTS Number			ARREST / NOTICE TO APPEAR						Juvenile Referral Report						
ADMINISTRATIVE	Agency ORI Number		Agency Name			Agency Report Number (N.T.A.'s only)									
	FLO 502600		PALM BEACH GARDENS POLICE DEPARTMENT			78-20005136									
Charge Type: Check as many as apply.		<input type="checkbox"/> 1. Felony		<input type="checkbox"/> 3. Misdemeanor		<input type="checkbox"/> 5. Ordinance		Weapon Seized / Type		Multiple Clearance Indicator					
		<input type="checkbox"/> 2. Traffic Felony		<input checked="" type="checkbox"/> 4. Traffic Misdemeanor		<input type="checkbox"/> 6. Other		2 1. Yes 2. No							
Location of Arrest (Including Name of Business)			Location of Offense (Business Name, Address)												
NORTHLAKE/140TH AVE, Palm Beach Gardens, FL			NORTHLAKE/ANCIENT TREE, Palm Beach Gardens, FL												
Date of Arrest		Time of Arrest		Booking Date		Booking Time		Jail Date		Jail Time					
11/16/2020		23:52													
Location of Vehicle KAUFF'S TOWING & RECOVERY 4301 East Avenue, West Palm Beach, FL 33405															
Name (Last, First, Middle) SCHWAN, MAXIMILIAN, A Alias (Name, DOB, Soc. Sec. #, Etc.)															
Race W - White 1 - American Indian B - Black 0 - Oriental/Asian		Sex W M		Date of Birth 03/15/92		Height 5'10		Weight 157		Eye Color BROWN		Hair Color BROWN			
Build SMALL															
DEFENDANT	Scars, Tattoos, Unique Physical Features (Location, Type, Description) N/A						Marital Status Single		Religion		Indication of Alcohol Influence Drug Influence				
											<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> Unk.				
Local Address (Street, Apt. Number)		(City)		(State)		(Zip)		Phone		Residence Type					
16893 81ST LN N		LOXAHATCHEE		FL		33470		(954) 2532625		1. City 2. County 3. Florida 4. Out of State					
Permanent Address (Street, Apt. Number)		(City)		(State)		(Zip)		Phone		Address Source					
16893 81ST LN N		LOXAHATCHEE		FL		33470		(954) 2532625		LICENSE					
Business Address (Name, Street)		(City)		(State)		(Zip)		Phone		Occupation					
MAN ENGINE AND COMPONENTS										ELECTRITIAN					
DL Number, State		Soc. Sec. Number		INS Number				Place of Birth (City, State)		Citizenship					
S-500-541-92-095-0 FL								PLANTATION, FL		US					
CODEF	Co-Defendant Name (Last, First, Middle)						Race		Sex		Date of Birth				
											<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large				
Co-Defendant Name (Last, First, Middle)						Race		Sex		Date of Birth					
										<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large					
JUVENILE	Name (Last) (First) (Middle)						Residence Phone								
							<input type="checkbox"/> ()								
Address (Street, Apt. Number) (City) (State) (Zip)						Business Phone									
						<input type="checkbox"/> ()									
Notified by: (Name)						Date		Time		Juvenile Disposition		2. TOT HRS / DYS			
										1. Handled/processed within Dept. and Released.		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.						School Attended						Grade			
<input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)															
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property						Value of Property							
CODE	S. Sell N. N/A P. Possess	R. Smuggle B. Buy T. Traffic	K. Dispense/ D. Deliver E. Use	M. Manufacture/ Produce/ Cultivate	Z. Other	Drug Type N. N/A A. Amphetamine	B. Barbiturates C. Cocaine E. Heroin	H. Hallucinogen M. Marijuana O. Opium/Deriv.	P. Paraphernalia/ Equipment S. Synthetics	U. Unknown Z. Other					
	DRIVING UNDER THE INFLUENCE						Statute Violation Number 316.193 (1)(a)						Violation of ORD #		
CHARGE	Drug Activity	Drug Type	Amount / Unit	Offense #	Counts Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N						Warrant / Capias Number		Bond		
															<input type="checkbox"/> OR
CHARGE	Charge Description				Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number						Violation of ORD #		
CHARGE	Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number						Bond				
CHARGE	Charge Description				Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number						Violation of ORD #		
CHARGE	Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number						Bond				
CHARGE	Charge Description				Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number						Violation of ORD #		
													<input type="checkbox"/> 07/07/2020		
CHARGE	Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number						Bond				
NOTICE TO APPEAR	Location / Court / Room Number / Address														
	NORTH COUNTY COURTHOUSE, 3188 PGA BOULEVARD, PALM BEACH GARDENS, FL 33410 - PH: (561) 662-6700														
Court Date and Time															
Month <u>December</u> Day <u>21</u> Year <u>2020</u> Time <u>10:00</u> AM <input checked="" type="checkbox"/> PM <input type="checkbox"/>															
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															
11/16/2020															
Signature of Defendant / or Juvenile and Parent / Custodian) <u>NOV 17 2020</u> Date Signed <u>NOV 17 2020</u>															
ADMIN	HOLD for other Agency Name: <u>NOV 17 2020</u>			Signature of Arresting Officer <u>WILLIAM BUTZBACH</u>			Name Verification (Printed by Arrestee)								
							(PRINT) <u>NOV 17 AM 2:39</u>								
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal			<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other			I.D. # <u>507</u>									
Intake Deputy <u>William Butzbach</u>			D. # <u>507</u> Pouch #			Transporting Officer <u>William Butzbach</u> ID # <u>507</u> Agency <u>PBGPD</u>									
Witness here if subject signed with an 'X'															
PAGE <u>1</u> OF <u>1</u>															

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

0519681

3997

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 16 DAY OF NOVEMBER 20 20, AT 2340 AM PM
SUBJECT: SCHWAN, MAXIMILIAN , A CASE NUMBER: 20005136
AGENCY: PALM BEACH GARDENS POLICE DEPT. ARRESTING OFFICER: Ofc. WILLIAM BUTZBACH 507
PERSONAL CONTACT

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

On Monday, November 16th, 2020, at approximately 23:40 I was on stationary in my patrol vehicle observeing traffic travel East and West on Northlake blvd in the area of Northlake Blvd and Ancient Tree Drive (45MPH zone). From Westbound traffic I could hear the faint "wistle" of a vehicle traveling at a high rate of speed. I obsevred and White F-150 traveling at a high rate of speed in the left hand lane. The F-150 proceeded to pass two other vehilces and continue westbound past my location. I pulled out onto Northlake Blvd in an attempt to catch up to the vehicle. I was able to catch up to the vehilce just East of 140th Ave. The vehicle had slowed down to 75MPH in a 55MPH zone. I conducted a traffic stop on the vehicle where he pulled over to the right side of the road just West of 140th Ave. The driver and sole occupant was identified via FL drivers license as Maximilian Schwan.

OBSERVATION OF DRIVER:

Driver was slow and deliberate with his motions, his eyes were red and watery.

DRIVER'S STATEMENTS:

Driver stated he did not know why he was stopped (had radar detector thrown on floor but still plugged in). He advised he was just trying to get home from playing hockey. I informed Schwan of his Taylor Warnings and he said he understood and refused SFST's.

ODORS:

an unknown alcholic beverage emaniting off of his breath at a conversational distance.

GENERAL OBSERVATIONS

SPEECH: slightly slurred

ATTITUDE: defensive

CLOTHING: discheveled

MEDICAL/OTHER: N/A

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 17 day of Nov 20 20 by Ofc. WILLIAM BUTZBACH

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

Personally Known

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





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

PBSO CASE # 20-127661 PBSO ZONE 3-13

AGENCY CASE # 20005136 CRASH CASE #

TIME OF STOP/CRASH 2340 DATE 11/16/2020 DAY monday

SUBJECT'S NAME SCHWAN MAXIMILIAN A
LAST FIRST MID RACE W SEX M
HGT 5'10 WGT 157 DOB 03/15/92

LOCATION NORTHLAKE/140TH AVE

ARRESTING OFFICER'S NAME & ID Ofc. WILLIAM BUTZBACH 507 AGENCY PBGPD

DIVISION: PATROL NOTIFIED BY COMMO YES

ARRIVAL AT FACILITY 0032

ARREST TIME 23:02

BREATH RESULTS:

- 1)
- 2)
- 3) - **REFUSED**
- 4)

BREATH TEST OPERATOR: 16877

1/7/2020

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

<input type="checkbox"/> LT EYE-LACK OF SMOOTH PURSUIT	<input type="checkbox"/> RT EYE-LACK OF SMOOTH PURSUIT
<input type="checkbox"/> LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION	<input type="checkbox"/> RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
<input type="checkbox"/> LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES	<input type="checkbox"/> RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

Other Observations:

REFUSED SFST'S

WALK & TURN:

REFUSED SFST'S

ONE LEG STAND:

REFUSED SFST'S

ROMBERG ALPHABET:

REFUSED SFST'S

FINGER TO NOSE:

REFUSED SFST'S

BREATH TEST RESULTS: 1) Refused 2) Failed 3) 4)

STATE OF FLORIDA

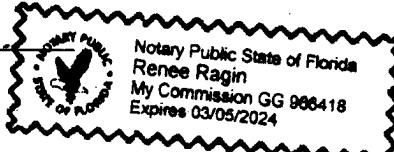
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 17 day of Nov 20 by **Ofc. WILLIAM BUTZBACH**

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

Notary Public, Clerk of Court, Office (P.S.S 117.10)



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

I, Ofc. WILLIAM BUTZBACH, a duly certified Law Enforcement Officer or Correctional Officer,
 (Name of Officer reading Implied Consent Warning)

am a member of Palm Beach Gardens Police Department, and I do swear
 (Name of law enforcement agency)

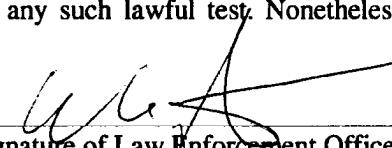
or affirm that on or about the 17th day of November, 20 20, at 23:52 P.M. A.M.

DRIVER MAXIMILIAN A SCHWAN,
 (Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# S-500-541-92-095-0, state of FL, was placed under lawful arrest for
 the offense of DRIVING UNDER THE INFLUENCE by Ofc. WILLIAM BUTZBACH and
 (Name of Arresting Officer)
 issued Citation # _____.

That on or about the 17th day of November, 20 20, at 00:53 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 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 this 17 day of Nov., 20 20,

by Ofc. WILLIAM BUTZBACH,

who is personally known to me or who has produced

Personally Known as identification

Notary Public RL

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.

TESTING FACILITY TASK REPORT

AGENCY: PBG

SUBJECT: Schwan, Maximilian A.

CASE NUMBER: 20-127661

DATE: Nov 17, 2020

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 00:53

ENDING TIME: 00:57

BREATH TESTS RESULTS: 1) Refusal TIME 00:56 A.M. P.M. 2) N/A TIME _____ A.M. P.M.
3) N/A TIME _____ A.M. P.M. 4) N/A TIME _____ A.M. P.M.

BREATH OPERATOR: R. Regin #16877

MAINTENANCE TECHNICIAN: Jason Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: Slurred

ATTITUDE: Calm, cooperative

CLOTHING: Gray pants, black t-shirt, brown boots

MEDICAL CONDITIONS: None

MEDICATIONS: None

OTHER:

Eyes red

Odor of unknown alcoholic beverage on breath.

COMMENTS:

Arrived at center A/O started 20 minute observation period at 00:32 hrs.

Subject stated "do I have too".

A/O read I/C 2x and subject acknowledged he understood I/C.

Subject refused to take test.

A/O read rights.

Subject stated he understood rights.

A/O attempted Q&A.

Subject refuse to answer questions.



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"/>			
Other	<input type="checkbox"/>			
	<input type="checkbox"/>	415.107 (1)	Other: Elderly Abuse	
	<input type="checkbox"/>	119.071(2)(j)	Other: MARSY'S LAW PROTECTED INFORMATION REGARDING VICTIM(S).	

REVIEW COMPLETED BY

Booking Number: 2020027016	Date: 11/17/2020
	Specialist Name/ID: M. Took #8557