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20CT 3511 SB

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|--|--|---|--|---|-----------------|---|--|---|----------------------|---|--------------------------|--|---------------------|--|--|--|--|--|--|------------------------|--|
| OBTS Number | | ARREST / NOTICE TO APPEAR Juvenile Referral Report | | | | 1. Arrest 3. Request for Warrant 2. N.T.A. 4. Request for Capias | | 1 | Juvenile | N | | | | | | | | | | | |
| Agency ORI Number FL 0500300 | | | Agency Name BOYNTON BEACH POLICE DEPT. | | | Agency Report Number 34-20-010760 | | | | | | | | | | | | | | | |
| 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 | | If Weapon Seized Enter Type | | Multiple Clearance Indicator | | | | | | | | | | | |
| Location of Arrest (Including Name of Business) 800 OLD BOYNTON ROAD BOYNTON BEACH, FL | | | | | | Location of Offense (Business Name, Address) 800 OLD BOYNTON ROAD BOYNTON BEACH, FL | | | | | | | | | | | | | | | |
| Date of Arrest 02/24/2020 | | Time of Arrest 2243 | | Booking Date | | Booking Time | | Jail Date | | Jail Time | | | | | | | | | | | |
| Name (Last, First, Middle) NORTHROP, MICHAEL PAUL | | | | | | Alias (Name, DOB, Soc. Sec. #, Etc) | | | | | | | | | | | | | | | |
| W - White B - Black | | I - American Indian O - Oriental / Asian | | Race W | Sex M | Date of Birth 06/30/1981 | | Height 6-00 | Weight 180 | Eye Color BLUE | Hair Color BRN | Complexion MED | Build MED | | | | | | | | |
| Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) NONE | | | | | | Marital Status UNMARRIED | | Religion NONE | | Indication of: Alcohol Influence <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Drug Influence <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | | | | | | | | | | | |
| Local Address (Street, Apt. Number) (City) (State) (Zip) 204R S IBIS DRIVE BRINY BREEZES, FL 33435 | | | | | | Phone (954)444-4237 | | Residence Type 1. City 3. Florida 2. County 4. Out of State | | | 2 | | | | | | | | | | |
| Permanent Address (Street, Apt. Number) (City) (State) (Zip) SAME | | | | | | Phone () | | Address Source DEF, FL DL | | | | | | | | | | | | | |
| Business Address (Street, Apt. Number) (City) (State) (Zip) N/A REFUSED | | | | | | Phone () | | Occupation SALES | | | | | | | | | | | | | |
| D/L Number, State N635555812300 | | | | Soc. Sec. Number [REDACTED] | | INS Number | | Place of Birth BOYNTON BCH, FL | | Citizenship US | | | | | | | | | | | |
| Co-Defendant Name (Last, First, Middle) | | | | Race | | Sex | | Date of Birth | | <input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor | | | | | | | | | | | |
| Co-Defendant Name (Last, First, Middle) | | | | Race | | Sex | | Date of Birth | | <input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor | | | | | | | | | | | |
| <input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other | | Name (Last) (First) (Middle) | | Address (Street, Apt. Number) (City) (State) (Zip) | | Residence Phone | | 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 was 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's Office (Phone 561-355-2526) 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 | | | | | | | | | | | | | | | |
| Drug Activity N. N/A P. Possess | | S. Sell B. Buy T. Traffic | | R. Smuggle D. Deliver E. Use | | K. Dispense/ Distribute | | M. Manufacture Products/ Cultivars | | Z. Other | | Drug Type N. N/A A. Amphetamine | | B. Barbituate C. Cocaine E. Heroin | | H. Hallucinogen M. Marijuana O. Opium/Deriv. | | P. Paraphernalia/ Equipment S. Synthetic | | U. Unknown Z. Other | |
| Charge Description D.U.I | | | | Counts 1 | | Domestic Violence <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | Statute Violation Number 316.193 1A | | Violation of ORD# | | | | | | | | | | | |
| Drug Activity NA | | Drug Type NA | | Amount/Unit BAC .141 | | Offense # 20-010760 | | Warrant/Capias Number | | Bond | | | | | | | | | | | |
| Charge Description | | | | Counts | | Domestic Violence <input type="checkbox"/> Yes <input type="checkbox"/> No | | 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"/> Yes <input type="checkbox"/> No | | 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"/> Yes <input type="checkbox"/> No | | Statute Violation Number | | Violation of ORD# | | | | | | | | | | | |
| Drug Activity | | Drug Type | | Amount/Unit | | Offense # | | Warrant/Capias Number | | Bond | | | | | | | | | | | |
| <input type="checkbox"/> Instruction No. 1 Mandatory Appearance in Court | | <input type="checkbox"/> Instruction No. 2 You need not appear in Court but must Comply with instruction on reverse side. | | Location (Court, Room Number, Address) South County Courthouse, 200 West Atlantic Ave, Delray Beach, FL 33444 | | | | | | | | | | | | | | | | | |
| 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 FULLY 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. | | | | Month MARCH | | Day 23 | | Year 2020 | | Time 8:30 | | <input checked="" type="checkbox"/> A.M. <input type="checkbox"/> P.M. | | | | | | | | | |
| Signature of Defendant (or Juvenile and Parent/Custodian) | | | | | | Signature of Arresting Officer | | | | | | | | | | | | | | | |
| Name: [Signature] | | | | Name of Arresting Officer (Print) M. SOHN | | | | I.D. # 790 | | Name Verification (Printed by Arresting Officer) BU# | | | | | | | | | | | |
| <input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal | | <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other | | Intake Deputy [Signature] | | I.D. # 696 | | Pouch # | | Transporting Officer M. SOHN | | I.D. # 790 | | | | | | | | | |
| Agency BBPD | | Witness here is subject Signed with an "X". | | Page 1 | | Page 1 | | Page 1 | | Page 1 | | Page 1 | | | | | | | | | |

SCANNED

FEB 27 2020

19825 # 2020

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 24 DAY OF February 2020 AT 10:43 A.M P.M.

CASE #: 20-010760

DEFENDANT: NORTHROP, MICHAEL PAUL

PERSONAL CONTACT/DRIVING PATTERN/OBSERVATION OF DRIVER:

On Tuesday, February 24, 2020 at approximately 2210 hours, I observe a White Toyota Pick-up truck traveling east bound on Old Boynton Road appearing to driving faster than the posted 30 MPH speed. I estimated the vehicle speed to be 55 MPH. Upon activating the LTI Truspeed 20/20 laser which was certified and calibrated in November 2019, I pointed the laser at the front bumper of the vehicle and got a reading of 5MPH at 319 feet in the posted 30 MPH speed zone.

I conducted a traffic stop at 800 Old Boynton Road and made contact with the driver of the vehicle (Michael Paul Northrup) and sole occupant of the vehicle. Upon making contact at the open driver side window and introducing myself, I smell a moderate odor of alcohol emanating from the vehicle. I saw Michael had blood shot, watery eyes and what appeared to be slurred speech, some indicators of impairment. Michael was chewing gum, however when he spoke I could still smell the odor of an alcoholic beverage. Michael stated that he had just come from dinner at Kimura steak house. I asked if he had been drinking which he first denied and said NO. I again asked and told him I could smell the odor and he stated he had "One Saki"

Based on my observations, I had Michael exit the vehicle and to the rear of the vehicle. Once out of the vehicle I could still smell the odor of the alcoholic beverage emanating from his person and still when he spoke. Based on this odor, and my observation I requested that he submit to a series of Road Side Sobriety Tasks/Tests, to which he agreed. Being that the parking lot in which he/we were in did not have any marking or lines of the ground, I placed a stripe of gray colored duct tape on the ground as a reference line. Michael argued that he as not able to see the tape on the black pavement, however with the illumination of my flashlight, and vehicle take down, head lights, the tape was plainly visible on the black pavement. Michael was argumentative and sarcastic during my interaction with him at this point. Michael wanted me to take him to the concrete side walk which was slopped and uneven to perform the tasks/test which would not be fair for him to perform there.

The FSTS are as follows and see below as well....

HGN- While in the position was swaying as I was performing the HGN approximately 1-2 inches in any direction. After explaining the tasks and instructions, Michael did not keep his head still and followed my finger/pen with his head a few times reminding him at least twice to keep his head still and only use his eyes. During the HGN there was a distinct jerking of the eyes at maximum deviation and prior to 45 degree in both eyes. There was no vertical HGN.

Based on the FST's performed I suspected that Michael was driving under the influence of alcohol and could be impaired. Based on this, I placed Michael under arrest for suspicion of DUI, (2243 hours) pursuant to FSS 316.193.1a. Michael was chewing gum which I asked him to spit out. When Michael exhale to spit it out, I was able to smell a stronger odor of the alcoholic beverage coming from his mouth.

Soon after placing Michael in the back of my police car, the odor of the alcoholic beverage was permeating through my police car.

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Upon arriving at the Palm Beach County Sheriff's Office Jail BAT facility, (2310 hours) I conducted a 20 minute observation of Michael where he was free of any objects in his mouth. Michael was handcuffed behind his back and seated on a bench next to me.

At approximately 2335 hours, we entered the breath test room with instrument operator S. Oneil of PBSO. I requested that Michael submit to a test of his breath where for approximately 10 minutes he continued to argue and state he wanted an attorney present that he did not know how to answer with an attorney's advice. Michael would not give a yes or no answer to the testing process. I read Michael this Implied consent twice where eventually, Michael agreed to provide a breath sample. At 2347 hours, Michael first sample of his breather yielded a reading .153 and then at 2350 hours, the second sample read .141. Both samples placing him over the legal limit of .08 which is in violation of FSS 316.193.1a.

I then read Michael his Constitutional Warnings (Miranda Warnings/Rights) to which he first remained silent and did not want to acknowledge the warnings and then said he did. When I asked if he wanted to answer some questions he refused and said no. ending the testing process.

Michael was cited for speeding in violation of FSS 316.189.1, citation # AA W8R0E and provided a DUI Citation # AC8608E.

Michael's vehicle was impounded and removed from the scene, inventory completed by Officer Mastro.

HORIZONTAL GAZE NYSTAGMUS:

- | | |
|---|--|
| <input checked="" type="checkbox"/> Left eye does not follow smoothly | <input checked="" type="checkbox"/> Right eye does not follow smoothly |
| <input checked="" type="checkbox"/> Left eye prior to 45 degrees | <input checked="" type="checkbox"/> Right eye prior to 45 degrees |
| <input checked="" type="checkbox"/> Distinct jerking in left eye at maximum deviation | <input checked="" type="checkbox"/> Distinct jerking in right eye at maximum deviation |
| <input type="checkbox"/> Vertical Nystagmus in left eye | <input type="checkbox"/> Vertical Nystagmus in right eye |

WALK AND TURN:

While explaining and demonstrating the Walk and Turn portion of the test/task, Michael would talk over me and began/started the test too soon before I was done explaining and making sure he understood. Michael had some trouble maintain the instructional phase and would step off the line. When he took his nine steps, he did not touch heel to toe on steps, 3,4,6,7 and 9, he did not turn appropriately he having to ask. When he took his steps back, he never touched heel to toe on any step, but did count out loud each time with the proper number of steps. However, during the WNT, he raised his hands more than six inches to maintain balance during the test/task.

ONE LEG STAND:

During the instructional portion and demonstration part of this task/test, Michael would interrupt and argue. When performing the test/task Michael used both his arms for balance. Michael would count out loud, and place it down once to maintain his balance and then picked it back up and continued.

FINGER TO NOSE:

During the instructional phase and portion of this test, Michael understood and performed this task without any issues or concerns noted.

ROMBERG/ALPHABET:

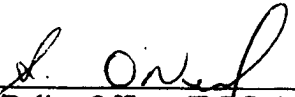
Michael was asked to perform the Alphabet, explained and demonstrated to him to which he understood. Michael performed the Alphabet correctly until he got to letter T and immediately recited the letter Z and stopped. He stated he was done when I asked.

ROMBERH/NUMBERS

Michael was asked to perform this task telling me he understood. He told me could count to a million. I requested that Michael count from numbers 33-63 which he understood and agreed or until I told him to stop. Michael counted over 63 and went to 75, over the 30 seconds and over the number in which I wanted to stop at.

The following instrument was sworn to before me this 24 day of February 2020

By: OFC. M. SOHN #790



Notary/Police Officer (F.S.S. 117.10)



Signature of Arresting Officer

NOT A CERTIFIED COPY

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FEB 27 2020

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: 02/24/2020

Date of Last Agency Inspection: 02/14/2020
Observation Period Began: 23:10
Subject's Name: MICHAEL P NORTHRUP

DOB: 06/30/1981 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 | | 23:45 |
| Air Blank | 0.000 | 23:45 |
| Control Test | 0.080 | 23:46 |
| Air Blank | 0.000 | 23:46 |
| Subject Sample #1 | 0.153 | 23:47 |
| Air Blank | 0.000 | 23:48 |
| Air Blank | 0.000 | 23:49 |
| Subject Sample #2 | 0.141 | 23:50 |
| Air Blank | 0.000 | 23:50 |
| Control Test | 0.080 | 23:51 |
| Air Blank | 0.000 | 23:51 |
| Diagnostics Check OK | | 23:51 |

Cylinder Lot: 00919080A3
Exp: 03/05/2021

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: 02-24-20
Signature

Sworn to (or affirmed) before me this 24 day of February, 2020
M. Sohn Off. Sohn # 790
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.

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FEB 27 2020

TESTING FACILITY TASK REPORT

AGENCY 26th of Salt Lake

SUBJECT Blackburn, Michael P.

CASE NUMBER 20-04203

DATE 02/24/20

VIDEO TAPE NUMBER 10/1

BEGINNING TIME 2:31 hrs

ENDING TIME 2:51 hrs

DRIVER TEST NUMBER 1153

TIME 2:47 AM

DATE 2/26/20

TIME 0

TIME 0

TESTER S. O'Neil # 6212

INSTRUCTOR J. Yankovick # 6467

TESTING OFFICER UNASSIGNED

REMARKS

ATTITUDE: Calm, Quiet, Cooperative, Succumbive, Indecisive, Nervous

CLOTHING: Shirt: light red Pants: Dark Blue Jeans

MEDICAL CONDITIONS: None

MEDICATIONS: None

OTHER: Eyes: Red, Glazy

Substance: Argonometric

Odor of unknown alcoholic beverage

COMMENTS: 20 min observation done by AIA Sal

AIA requested the breath test.

D was indecisive about the breath request.

D kept stating he was waiting for his lawyer.

D stated he was being harassed.

Test was conducted and on camera 20'

D decided to submit after going back and

forth.

D completed the breath test correctly.

AW read on camera.

D refused OAR.

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FEB 27 2020

SUBJECT MR. RUP. MICHAEL P CASE NUMBER 20-010760

IMPLIED CONSENT FOR DUI IN A MOTOR VEHICLE

NOTE: READ ONLY THE PARAGRAPH APPLICABLE TO THE TYPE OF TEST YOU ARE REQUESTED TO TAKE.

I am now requesting that you submit to a breath test of your BREATH for the purpose of detecting the presence of alcohol content.

OR

I am now requesting that you submit to a breath 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 breath test of your BLOOD for the purpose of detecting the presence of alcohol and chemical or controlled substances.

PLEASE SIGN IF THE SUBJECT DOES NOT COMPLY WITH YOUR REQUEST.

I am OFC. M. S. [unclear] of the Donkey Beach Police Dept.

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. If you refuse to submit to a breath test of your breath, urine or blood. Additionally, if you refuse to submit to a breath test of your breath, urine or blood and you have been previously suspended for a prior refusal to submit to a breath test of your breath, urine or blood, you will be liable for a misdemeanor. Refusal to submit to the test is a criminal offense.

SUBJECT'S SIGNATURE _____

CONSTITUTIONAL WARNINGS

PLEASE SIGN 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 statement or during any questioning.
5. If at any time during the interview you do not wish to answer any questions, you may stop the interview at any time.
6. I can make no threats or promises or induce you to make a statement. This statement is for your information only.
7. Any statement you make will be used against you in a court of law.

SCANNED Dell tw out to take



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"/> | | | |
| Other | <input type="checkbox"/> | 119.071 (3)(A),(3)(B), (1-3C) | Other: Security at the Jail | |
| | <input type="checkbox"/> | 415.107 (1) | Other: In order to protect the rights of the individual or other persons responsible for the welfare of a vulnerable adult, all records concerning reports of abuse, neglect, or exploitation of the vulnerable adult. | |

REVIEW COMPLETED BY

| | |
|----------------------------|------------------------------------|
| Booking Number: 2020006315 | Date: 2/25/2020 |
| | Specialist Name/ID: M. Tooks #8557 |

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FEB 27 2020**