0530919 22MM2996MB APR 196

ARREST / NOTICE TO APPEAR

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

1 JUVENILE

ADMINISTRATION

OBTS Number

Agency ORI Number: 0501700
Agency Name: Jupiter Police Department
Agency Report Number (N.T.A.'s only): 5 4 22-001548

Charge Type: Check as many as apply — 1. Felony; 2. Traffic Felony; ☒ 3. Misdemeanor; ☒ 4. Traffic Misdemeanor; 5. Ordinance; 6. Other
If Weapon Seized — Enter Type: UNARMED
Multiple Clearance Indicator

Location of Arrest (Including Name of Business): ST MARYS HOSPITAL, WEST PALM BEACH, FL
Location of Offense (Business Name, Address): 2999 MILITARY TRL/INDIAN CREEK PKWY, JUPITER, FL

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
04/15/2022	14:00	04/15/2022	14:10			

DEFENDANT

Alias (Name, DOB, Soc. Sec. #, Etc.)

Name (Last, First, Middle): DELCIOPPO, PETER C — Alias:

Race (W - White, B - Black, 1 - American Indian, O - Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	M	02/13/1974	5'11	235	BROW	BROWN	LIGHT	Medium

Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description):
Marital Status: S
Religion:
Indication of: Alcohol Influence ☐ Yes ☒ No ☐ Unk.; Drug Influence
Residence Type: 1. City 3. Florida 2. County 4. Out of State — 4
Address Source: NY DL
Occupation: Metal Worker

Local Address (Street, Apt. Number) (City) (State) (Zip) — Phone:
1828 S RAILROAD AVE, STATEN ISLAND, NY 10306

Permanent Address (Street, Apt. Number) (City) (State) (Zip) — Phone:
1828 S RAILROAD AVE, STATEN ISLAND, NY 10306

Business Address (Name, Street) (City) (State) (Zip) — Phone:
LOCAL 28 SHEETMETAL,

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
314522764 / NY	[redacted]		QUEENS, NY, United	US

CO-DEF

Co-Defendant Name (Last, First, Middle) — Race — Sex — Date of Birth — ☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile

Co-Defendant Name (Last, First, Middle) — Race — Sex — Date of Birth — ☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile

JUVENILE

☐ Parent ☐ Other: ☐ Legal Custodian
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 Department and Released; 2. TOT JAC; 3. Incarcerated
Released To: (Name) — Relationship — Date — Time
School Attended — Grade
The above address was provided by ☐ defendant and/or ☐ defendant's parents.
The child and/or parent was told to keep the Juvenile Court Clerk's Office (Phone 355-2526) informed of any change of address.
☐ Yes, by: ☐ No
Property Crime? ☐ Yes ☒ No — Description of Property — Value of Property

CODE VIOLATION / CHARGE

Drug Activity: N. N/A; P. Possess; S. Sell; B. Buy; T. Traffic; R. Smuggle; D. Deliver; E. Use; K. Dispense/Distribute; M. Manufacture/Cultivate; Z. Other
Drug Type: N. N/A; A. Amphetamine; B. Barbiturate; C. Cocaine; E. Heroin; H. Hallucinogen; M. Marijuana; O. Opium/Derv.; P. Paraphernalia/Equipment; S. Synthetic; U. Unknown; Z. Other

Charge Description	Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Statute Violation Number	Violation of ORD #	Bond
DRUGS - POSSESS AND/OR USE DRUG PARAPHERNALIA		N			1	☐ Y ☒ N		893.147(1)		
DUI - DAMAGE TO PERSON/PROPERTY		N			2	☐ Y ☒ N		316.193(3)(C)(1)		
DUI - NORMAL FACULTIES IMPAIRED		N			1	☐ Y ☒ N		316.193(1)(A)		

INTAKE

Health / Apparent Physical Condition of Defendant — To the knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☒ Injuries
Explain:
Check which applies: ☐ Released O.R. ☐ Released to Parent/Guardian ☒ T.O.T. County Jail ☐ Posted Bond ☐ North County Mental Health
PROPERTY - Received By — Released By — Released To
Transported By — Date Transported — Time Transported — Other

NOTICE TO APPEAR

☒ INSTRUCTION NO. 1 - Mandatory appearance in court
☐ INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.

Location (Court, Room): North County PALM BEACH GARD
Court Date & Time: 05/18/2022 08:30:00

SCANNED APR 18 2022

No Photo Available

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, I SHALL BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED

Signature of Defendant (or Juvenile and Parent / Custodian) — Date Signed

ADMIN

HOLD for Other Agency
☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other
Intake Deputy — I.D. # — Pouch #
Signature of Arresting Officer
Name of Arresting Officer (Print): MCGILLICUDDY, STEVEN — I.D. # 1216
Transporting Officer: S. MCGILLICUDDY — I.D. # 388 — Agency JUPITE
Name Verification (Printed by Arrestee) (PRINT)
Witness here if subject signed with an "X".

PAGE 1 OF 1

[redacted] ☐ STATE ATTORNEY ☐ AGENCY ☐ [redacted] RECORDS ☐ JAIL ☐ CRIME ANALYSIS [redacted]

PROBABLE CAUSE AFFIDAVIT

OBTS Number | 1 Request for Warrant 2 Request for Capias | 1 | JUVENILE

ARREST

Agency OR Number: **FL 0501700** | Agency Name: **JUPITER POLICE DEPARTMENT** | Agency Report Number: **5 | 4 | 22-001548**

Charge Type (Check as many as apply): ☐ 1 Felony ☒ 3 Misdemeanor ☐ 5 Ordinance ☒ 4 Traffic Misdemeanor ☐ 2 Traffic Felony ☐ 6 Other

Special Notes:

DEFENDANT

Name (Last, First, Middle): **DELCIOPPO, PETER C** | Alias: | Race: **W** | Sex: **M** | Date of Birth: **02/13/1974**

CHARGES

Charge Description: **316.193(1)(A) DUI - NORMAL FACULTIES IMPAIRED**

Charge Description: **316.193(3)(C)(1) DUI - DAMAGE TO PERSON/PROPERTY**

Charge Description: **893.147(1) DRUGS - POSSESS AND/OR USE DRUG PARAPHE**

Charge Description:

VICTIM

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 committ the below acts.

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

On the 15 day of April, 2022 at 11:21 (Specifically include facts constituting cause for arrest.)

PROBABLE CAUSE STATEMENT

On 4/15/2022 at approximately 1121 hrs I responded to the area of Military Trail and Indian Creek Parkway, Jupiter, Florida, in reference to a report of a traffic crash with injuries. Details of the car stated that white Hyundai had struck a blue jeep head-on. Due to the nature of the crash I initiated an emergency response with lights and sirens to the scene. Upon my arrival I observed a white Hyundai bearing NY Tag HTJ1511 (VEHICLE-1) and a blue Jeep bearing FL tag KPNB19 (VEHICLE-2) in final rest, in the northbound lanes. VEHICLE-1 was facing southbound and VEHICLE-2 was facing northbound and it appeared as though VEHICLE-1 had crossed into oncoming traffic and truck VEHICLE-2 head on

Upon getting out of my police vehicle, I observed the driver of VEHICLE-2, William Walter, ambulatory near the crash. He had lacerations to his legs and arms. VEHICLE-2 was damaged to the point of total loss. The driver of VEHICLE-1, Peter Delcioppo, was unconscious and not breathing, still in the driver's seat. As Delcioppo was removed from the vehicle by other officers I observed that he was blue in the face/lips and had pinpoint pupils. CPR was then initiated. Palm Beach County Fire Rescue arrived on scene almost immediately and took over lifesaving efforts. Delcioppo was then transported as a trauma alert by ground to St. Mary s hospital.

Traffic Officer Galina took over as the lead crash investigator. I advised him of what I had observed and informed him that I would be going to the hospital. During the inventory of Delcioppo vehicle, a metal cylindrical object consistent with a crack pipe, along with separate fresh chore boy, both of which are known to be crack cocaine paraphernalia, was found inside of the vehicle.

Upon my arrival at the hospital I was informed by trauma intake that Delcioppo had been administered 2MG of Naloxone (NARCAN). Narcan is an opioid antagonist and works to counter-act opiate-based overdoses. Delcioppo was still in CAT scan. It took approximately 45 minutes for the CAT scan results to return, showing that Delcioppo had not sustained any life threatening injuries. I was again advised of the administration of 2MG of Naloxone on the ambulance as well as the fact that his vital signs at the

ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

DW 13063

NOTARY PUBLIC / CLERK OF COURT / OFFICER (Badge No.)

04/15/2022

DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

MCGILLICUDDY, STEVEN (1216)

NAME OF OFFICER (PLEASE PRINT)

04/15/2022

DATE

PAGE 1 - 3

COURT | STATE ATTORNEY | CENTRAL RECORDS | JAIL | CRIME ANALYSIS | P. I. O.

PROBABLE CAUSE AFFIDAVIT
SUPPLEMENT

Agency ORI Number: FL 0501700	Agency Name: JUPITER POLICE DEPARTMENT	Agency Report Number: 5 4 22-001548	1

Charge Type: ☐ 1. Felony ☒ 3. Misdemeanor ☐ 5. Ordinance ☐ 2. Traffic Felony ☒ 4. Traffic Misdemeanor ☐ 6. Other

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
DELCIOPPO, PETER C		W	M	02/13/1974

hospital revealed him to have elevated levels of both systolic and diastolic blood pressure.
Once Delcioppo CAT scan results came back as normal, I asked him what had happened during the crash. He said the last thing he remembered was trying to avoid hitting a cat. By this time I had consulted with THI investigators and co-crash investigators on scene and determined that Delcioppo was the at-fault party in the crash. It was determined that he had been southbound on Military Trail approaching Indian Creek Parkway and that his vehicle crossed over the median and then went southbound in the northbound lanes of Military trail for some time before crashing head-on into VEHICLE-2.
I conducted a changing of the hats, advised him the crash investigation was over and read him his Miranda rights from a prepared card. He was willing to speak to me.
I explained to Delcioppo that I had concerns that he had ingested narcotics based on my observations of him. I articulated my specific concerns including his pinpoint (both on scene and during this conversation) pupils, blue lips, and immediate improved state upon the administration of an opioid antagonist. We began a conversation about his drug history and he stated that he took Percocet (opioid) starting with an injury four years ago. He stated that he then transitioned to Suboxone and used that for a period of time. He told me that he had not used in approximately four weeks. I urged him to be honest and that the symptomology I was observing was consistent with recent drug use.
He advised me that he "slipped up" today. I asked him what that meant and he stated that he called a friend of his who supplied him with a "small white pill" of unknown type to help with the pain. He stated he took the pill approximately thirty minutes prior to the crash.
He agreed to participate in field sobriety exercises. After HGN I transitioned to seated battery due the injuries to Delcioppo`s legs

HGN
-Pinpoint pupils
-0 of 6 clues
HAND COORDINATION
Task 1 - Improper touch
-Improper count
Task 2 - Improper
Task 3 - Improper count
-Improper touch
-Did not return fist to chest
Task 4 - No end position
-7 clues (3 minimum)
PALM PAT
- Did not speed up as instructed
- Rolled pat
- Double pat
- Other improper (patty cake)
- 4 clues (2 minimum)

SWORN AND SUBSCRIBED BEFORE ME

1303
NOTARY PUBLIC / CLERK OF COURT / OFFICER
04/15/2022
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER
MCGILLICUDDY, STEVEN (1216)
NAME OF OFFICER (PLEASE PRINT)
04/15/2022
DATE

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P.I.O.

OBTS Number

PROBABLE CAUSE AFFIDAVIT
SUPPLEMENT

Page 1 of 1 Pages | 3 Request for Warrant | 4 Request for Capias | 1 | AMENDED

ADMIN

Agency ORI Number	Agency Name	Agency Report Number
FL 0501700	JUPITER POLICE DEPARTMENT	5 | 4 | 22-001548

Charge Type (check as many as apply): 1. Felony; 2. Traffic Felony; X 3. Misdemeanor; X 4. Traffic Misdemeanor; 5. Ordinance; 6. Other

Special Notes:

DEF

Name (Last, First, Middle): DELCIOPPO, PETER C

Alias:

Race	Sex	Date of Birth
W	M	02/13/1974

FACE SHEET CAUSE STATEMENT

MODIFIED RHOMBERG
-20 seconds estimated as 30 seconds
Based on my investigation, observations and the totality of the circumstances, I have probable cause to believe that Peter Delcioppo was in actual physical control of a vehicle while under the influence of an alcoholic beverage, chemical or controlled substance to the point that his normal faculties were impaired, contrary to F.S.S. 316.193 (1 COUNT)
I have probable cause to believe that while under the influence, Delcioppo did cause a motor vehicle crash causing property damage and/or serious bodily injury to another (2 COUNTS), contrary to F.S.S. 316.193(3)(C)(1).
I have probable cause to believe that he was in possession of drug paraphernalia, to wit, a metal pipe and chore boy, contrary to F.S.S. 893.147.
I placed him under arrest at 1600 hrs. I then requested he submit to a blood test, due to a breath test being impossible and impractical. He refused. I then read him blood implied consent and he agreed. Nurse T.W. administered the lawful blood draw at 1520 hrs. I mixed the blood with the preservative. This will be submitted to PBSO lab for drug testing.
I then booked Delcioppo into the county jail with a court date of 5/18/2022 at 0830 hrs.

ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

NOTARY PUBLIC / CLERK OF COURT / DEPUTY CLERK / OFFICER (CIRCLE ONE)

04/15/2022
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

MCGILLICUDDY, STEVEN (1216)
ORDER OF OFFICER (PLEASE PRINT)

04/15/2022
DATE

PAGE 3 OF 3

COURT | STATE ATTORNEY | CENTRAL RECORDS | JAIL | CRIME ANALYSIS | P. I. O.

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

PBSO CASE # _____ PBSO ZONE _____

AGENCY CASE # 22-001548 CRASH CASE # _____

TIME OF STOP/CRASH 1121 DATE 04/15/2022 DAY FRIDAY

SUBJECT'S NAME DELCIOPPO (LAST) PETER (FIRST) C (MID) RACE W SEX M

HGT 5'11 WGT 235 DOB 02/13/1974

LOCATION MILITARY TRAIL/INDIAN CREEK PARKWAY, JUPITER, FL

ARRESTING OFFICER'S NAME & ID MCGILLICUDDY 388 AGENCY Jupiter PD

DIVISION: ROAD PATROL

NOTIFIED BY COMMO Yes

ARRIVAL AT FACILITY N/A

ARREST TIME 1400

BREATH RESULTS:

1) BLOOD DRAW

2) BLOOD DRAW

3)

4)

TESTING OFFICER'S ID N/A PBSO VIDEOTAPE # N/A

WITNESS LIST

CASE NUMBER: 22-001548

ARRESTING OFFICER: MCGILLICUDDY

ADDRESS: 196 Military Trl. Jupiter, FL 33458

PHONE NUMBERS (HOME): _____ (WORK) (561) 746-6201

CAN TESTIFY TO: PC

NAME: OFC GELINA

ADDRESS: 196 Military Trl. Jupiter, FL 33458

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: THI/SBI LEAD INVESTIGATOR

NAME: OFC YOCHUM

ADDRESS 196 Military Trl. Jupiter, FL 33458

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: THI/SBI CO-INVESTIGATOR

NAME: OFC PARTELOW

ADDRESS 196 Military Trl. Jupiter, FL 33458

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: BACKUP ON SCENE/EVIDENCE COLLECTION

NAME: OFC STAN

ADDRESS 196 Military Trl. Jupiter, FL 33458

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: BACKUP ON SCENE/EVIDENCE COLLECTION

NAME: CHRISTOPHER WALTER

ADDRESS 409 ST MARTIN LN JUPITER FL 33458

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: VICTIM OF CAR DAMAGED

NAME: WILLIAM WALTER

ADDRESS 409 ST MARTIN LN JUPITER FL 33458

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: VICTIM OF BODILY INJURY

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: _____

SUBJECT: **DELCIOPPO, PETER C** CASE NUMBER: **22-001548**

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 o chemical or controlled substances.

NOTE: READ ONLY IF THE SUBJECT DOES NOT COMPLY WITH YOUR REQUEST

I am **Officer MCGILLICUDDY** of the **Jupiter Police Department**

If you refuse to take the test I have requested of you, your driving privilege will be suspended for a period of one (1) year for a FIRST REFUSAL, or eighteen (18) months if your driving privilege has been PREVIOUSLY SUSPENDED, or if you have been PREVIOUSLY FINED under s. 327.35215, for refusing to submit to a lawful test of your breath, urine, or blood. Additionally, if you refuse to take the test I have requested of you, and if your driving privilege has been previously suspended, or if you have been previously fined under s. 327.35215, for a refusal to submit to a lawful test of your breath, urine, or blood, you will be committing a misdemeanor, in addition to any other penalties which can be imposed by law. Refusal to submit to the test I have requested is admissible into evidence in any criminal proceeding.

SUBJECT'S SIGNATURE: **Read on BWC** **DELCIOPPO, PETER C**

CONSTITUTIONAL WARNINGS

I AM REQUIRED TO WARN YOU BEFORE YOU MAKE ANY STATEMENTS THAT YOU HAVE THE FOLLOWING RIGHTS:

You have the right to remain silent and not answer any questions.

Any statement must be freely and voluntarily given.

You have the right to the presence of a lawyer of your choice before you make any statement and during any questioning.

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.

If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent.

I can make no threats or promises to induce you to make a statement. This must be of your own free will.

Any statement can and will be used against you in a court of law.

SUSPECT'S SIGNATURE: **Read on Camera** **DELCIOPPO, PETER C**

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	☐	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	☐	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	☐	119.071(4)(c)	Undercover personnel.	
	☐	119.071(2)(f)	Confidential informants (CIs).	
	☐	119.071(2)(e)	Confession.	
Public Info. Exemptions	☐	985.04(1)	Juvenile offender records.	
	☐	119.071(h)(i)	Assets of a crime victim.	
	☐	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	☐	394.4615(7)	Mental health information.	
	☐	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)	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	☐	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	☐			
	☐			
	☐			
	☐			
	☐			
Other	☐		Other:	
	☐		Other:	

REVIEW COMPLETED BY

Booking Number: 2022009907	**Date:** 4/16/2022
	Specialist Name/ID: Chantel Daniels/30347