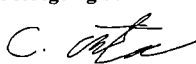


COMPLAINT/ARREST AFFIDAVIT – CIRCUIT/COUNTY COURT – PINELLAS COUNTY, FLORIDA

OBTS #		REPORT # SO20-000060		DOCKET # 1825939						
Person ID 311449152			SSN# [REDACTED]							
Charge Description ☐ Felony ☒ Misdemeanor ☐ Warrant ☐ Traffic ☐ Ordinance		Traffic Citation # (if any)		Court Case #						
Charge DRIVING UNDER THE INFLUENCE		AD0ASHE		AD0ASHE-1						
Defendant's Name (Last, First, Middle) NIEHOFF, ROBERT J		DOB 03/22/1971	Sex M	Race W	Ht 511					
		Wt 250	Hair BLN	Eyes HAZ	Skin					
Alias	DL # 9375712	State AL	Scars/Marks/Tattoos/Physical Features							
Local Address (Street, City, State, Zip Code) 4845 LEE ROAD 179 SALEM AL 36874		Telephone no phone		Place of Birth AL	Citizenship USA					
Permanent Address (Street, City, State, Zip Code) 4845 LEE ROAD 179 SALEM AL 36874		Telephone no phone		Employed by / School DISABLED						
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 <u>01</u> day of <u>JANUARY</u>, 2020, at approximately <u>1:05</u> AM, at <u>BECLHER RD/MAIN ST.</u>, in Pinellas County did: REASON FOR STOP: 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: DISTINCT BALANCE: POOE/SWAY EYES: BLOODSHOT/GLASSY/WATERY PRIOR CONVICTIONS: NONE. DEF. EXERCISES DISPLAYED INDICATORS OF IMPAIRMENT. COURT INFORMATION: NORTH COUNTY TRAFFIC COURT 01/27/2020 AT 0900 CITATION #: AD0ASHE WHILE TRAVELING EAST BOUND ON MAIN ST APPROACHING BELCHER RD. I OBSERVED THE VEHICLE IN FRONT OF ME SWERVE. THE VEHICLE SWERVED OVER A DOUBLE SOLID YELLOW LINE ENTERING A TURNING LANE. THE VEHICLE THEN SWERVED WITH ITS PASSENGER TIRES CROSSING THE SOLID WHITE LINE. THE VEHICLE THEN STOPPED OVER THE STOP BAR AT THE SOLID RED TRAFFIC SIGNAL. THE TRAFFIC LIGHT TURNED GREEN AND THE VEHICLE SAT THERE FOR AN ABNORMALLY LONG AMOUNT OF TIME. THE VEHICLE CONDUCTED A WIDE RADIUS TURN, AND THEN I CONDUCTED A TRAFFIC STOP. THE DEF. THEN HAD BLOODSHOT/GLASSY/WATERY AND A SLOW RESPONSE. THE DEF. HAD FUMBLING FINGERS WHILE RETRIEVING HIS LICENSE. THE DEF. WAS UNABLE TO OPERATE HIS CELL PHONE TO PROVIDE VEHICLE INS. THE DEF. CONSENTED TO EXITING THE VEHICLE, AND PERFORMING FSES. THE DEF. HAD ALL SIX INDICATORS OF HGN, THEN PERFORMED POORLY ON THE FINGER TO NOSE AND THE MODIFIED RHOMBERG BALANCE. DURING HGN I COULD SMELL A DISITINCT ODOR OF AN ALCOHOLIC BEVERAGE COMING FROM THE DEF'S MOUTH AS HE SPOKE, AND HAD AN OBVIOUS SWAY WHILE STANDING. THE DEF DURING THE EXERCISES STATED HE HAD BEEN DRINKING A FEW BEERS AT HOME PRIOR TO LEAVING. THE DEF. WAS ARRESTED, AND LATER REFUSED TO PROVIDE A SAMPLE OF HIS BREATH. POST IMPLIED CONSENT THE DEF SAID "FUCK YOU, NO" AS THE RESPONSE TO PROVIDING A SAMPLE.										
Contrary to Florida Statute/Ordinance <u>316.193.1</u> ARREST DATE: <u>1/1/2020</u> Time <u>1:28 AM</u> Aggravating/Mitigating Factors <u>OUT OF STATE</u> Booking Officer: <u>MAGGIO, K 57191</u> Amount of Bond <u>500</u> Bond Out Date <u>1/1/20</u> Time <u>NA</u> ☐ 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: <u>1/1/2020 2:50:45 AM</u>										
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 DEPUTY CHRIS AMATRUDA 59301 Printed Name		PINELLAS COUNTY SHERIFF Agency 310663792 Declarant ID#								
REQUEST FOR INVESTIGATIVE COSTS, F.S. 938.27(1) <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>DATE 01/01/2020</td> <td>OFFICER AMATRUDA</td> <td>HOURS X PAY-RATE 4 25.00</td> <td>OR</td> <td>COST \$100.00</td> </tr> </table> 96:1 HW 1 - NYC 0202 OTHER – Describe <u>CONVICTION RECORD</u> Continuation sheet ☐ Yes ☐ No TOTAL \$ \$100.00						DATE 01/01/2020	OFFICER AMATRUDA	HOURS X PAY-RATE 4 25.00	OR	COST \$100.00
DATE 01/01/2020	OFFICER AMATRUDA	HOURS X PAY-RATE 4 25.00	OR	COST \$100.00						

Defendant NIEHOFF, ROBERT J

Court Case No: AD0ASHE-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.

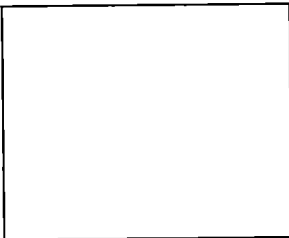
I FURTHER CERTIFY THAT:

- ☐ 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