

Agency ORI Number FL 0500200	Agency Name BOCA RATON POLICE DEPARTMENT	Agency Report Number 3 2 2020-006797
Charge Type: Check as many as apply. <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Special Notes:

Name (Last, First, Middle) KARAM, RONY	Alias	Race W	Sex M	Date of Birth 05/15/1992
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Charge Description 316.193(3A) DUI - PROPERTY DAMAGE	Charge Description 316.061 LEAVING SCENE OF ACCIDENT INVOLVING DAMAGE
Charge Description 843.02 RESIST OR OBSTRUCT OFFICER WITHOUT VIOLENCE	Charge Description

Victim's Name (Last, First, Middle) HURTUBISE, ALEXANDER CHARLES	Race W	Sex M	Date of Birth 05/27/1990
Local Address (Street, Apt. Number) 5832 SETON DR, MARGATE, FL 33063	(City)	(State)	(Zip)
Business Address (Name, Street)	(City)	(State)	(Zip)

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 _____ that he/she saw the arrested person commit the below acts.
 was found to have committed the below acts, resulting from my (described) investigation.
 On the 13 day of June, 2020 at 02:05 (Specifically include facts constituting cause for arrest.)

On 06-13-2020 at approximately 0015 hours, I responded to the area of 234 S Federal Hwy in reference to a drunk driver. The caller advised that a white male with brown hair, wearing a yellow shirt, driving a black BMW had possibly crashed into two vehicles and then was driving in circles in the parking lot at this location. The caller advised that they had seen him drinking at the bar and believed he was drunk.

Upon arrival I made contact with a white male later identified by Florida driver's license as Rony Karam. Ofc. Vick was already speaking with Rony when I arrived. Immediately upon seeing Rony, I noticed that he was showing signs of impairment. Rony was stumbling when he walked and struggling to maintain his balance. He had glassy eyes and was slurring his words. Speaking with Rony I noticed the overwhelming odor of an alcoholic beverage coming from his breath. Rony advised that he had been drinking and thinks that he had drank at every bar. Rony advised that he did not crash into any cars while he was driving. Rony advised that he was driving a blue BMW 450 but thought it might actually be a 550.

Ofc. Vick went to go investigate the crash and I stayed with Rony. Ofc. Vick advised the following: He had spoken to two witnesses (Pablo Emanuel Saez and Emilio Orlando Reyes) who saw Rony crash into another vehicle, exit the vehicle's driver seat and then try to walk away. They stopped Rony and told him that he needed to leave a letter for the owner of the car he hit. Rony said that it was okay and that he was a Palestinian. Both witnesses spotted Rony in the parking lot and said that 100% Rony was the person they saw hit the other two cars.

I then began to read Rony his Constitutional warnings. Rony refused to listen, became belligerent and tried to leave. When Rony tried to leave, the officers on scene and I told him to stop and stood in his way and held him there. Rony tried to push through and began to resist and he was taken to the ground where I placed him in handcuffs. The

SWORN AND SUBSCRIBED BEFORE ME	SHARI L. O'NEAL Notary Public - State of Florida Commission # FF 966854 My Comm. Expires Jun 25, 2028 Bonded through National Notary Assn	Signature of Arresting / Investigating Officer <i>Walter Rocco</i>
DATE <u>06-13-2020</u>	NAME OF OFFICER (PLEASE PRINT) WALTER ERIC ROCCO (848)	DATE 06/13/2020

PROBABLE CAUSE AFFIDAVIT
SUPPLEMENT

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

1

JUVENILE

Agency ORI Number FL 0500200	Agency Name BOCA RATON POLICE DEPARTMENT	Agency Report Number 3 2 2020-006797
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<input type="checkbox"/> 1. Felony	<input checked="" type="checkbox"/> 3. Misdemeanor	<input type="checkbox"/> 5. Ordinance
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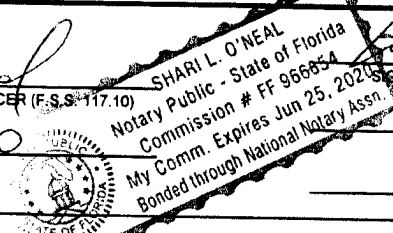
Name (Last, First, Middle) KARAM, RONY	Alias	Race W	Sex M	Date of Birth 05/15/1992
--------------------------------------------------	-------	------------------	-----------------	------------------------------------

handcuffs were checked for tightness and double locked. While escorting Rony over to my patrol vehicle, he continued to push and pull away from other officers and myself and was given numerous commands to stop resisting.

Rony's vehicle was towed by Westway towing. Due to Rony being involved in a crash I took him to Boca Regional hospital where he received medical clearance. I then transported Rony to Palm Beach County Jail. Rony refused to provide a sample of his breath. I read Rony his constitutional warnings, which Rony stated he understood. I asked Rony questions off a sheet provided by Palm Beach BAT. During the questions Rony stated that he had been drinking Black Label, more Black Label and riding a bicycle. When I asked Rony if he was drinking alcohol, he advised that he wasn't. He later advised that his last two drinks he had taken as shots.

Rony was charged with driving under the influence with property damage (FSS 316.193(3A)), Leaving the scene of an accident with damage (FSS 316.061), and Resisting an officer without violence (FSS 843.02). Rony was issued a citation for driving under the influence (A6LQARE) with a mandatory Court appearance at the South County Court House in Delray Beach on Monday July 13th at 8:30AM. He was also issued a citation for careless driving (ADR2A2E). Rony was turned over to Palm Beach County Jail.

NOT A CERTIFIED COPY

SWORN AND SUBSCRIBED BEFORE ME	
<i>[Signature]</i> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)	<i>[Signature]</i> SIGNATURE OF ARRESTING / INVESTIGATING OFFICER
06-13-20 DATE	WALTER, ERIC ROCCO (848) NAME OF OFFICER (PLEASE PRINT)
	06/13/2020 DATE

Information Regarding Review Hearing

FINAL ORDER

This will serve as notice of final order of license suspension/disqualification effective on the date it was issued to you. You may request a formal or informal review of the suspension/disqualification. If you want the department to conduct a review of your suspension/disqualification, you must request such review at the location indicated on the reverse side. Your request must be submitted in writing within ten calendar days following the date of suspension/disqualification, and include your complete name, address, date of birth, driver license number, residence and work telephone numbers, date of suspension/disqualification, citation number and county where the suspension/disqualification occurred.

INFORMAL REVIEW

The informal review shall consist solely of an examination of the materials submitted by you and the law enforcement officer or correctional officer.

FORMAL REVIEW

The formal review allows you to be heard and present witnesses in regard to this suspension/disqualification.

**DRIVING WITH AN UNLAWFUL BLOOD OR BREATH
ALCOHOL LEVEL (.08 OR ABOVE)**

Whether the arresting law enforcement officer had probable cause to believe that the person was driving or in actual physical control of a motor vehicle in this state while under the influence of alcoholic beverages or controlled substances (DUI).

Whether the person had an unlawful blood or breath alcohol level (.08 or above).

REFUSAL TO SUBMIT TO A BREATH, BLOOD OR URINE TEST

Same as number 1 above.

Whether the person refused to submit to any such test after being requested to do so by a law enforcement officer or correctional officer.

Whether the person was told that if he or she refused to submit to such test, his or her privilege to operate a motor vehicle would be suspended.

**IN CASE OF A DISQUALIFICATION THE FOLLOWING ISSUES
WILL BE CONSIDERED:**

**DRIVING WITH AN UNLAWFUL BLOOD OR BREATH
ALCOHOL LEVEL (.08 OR ABOVE)**

Whether the arresting law enforcement officer had probable cause to believe that the person was driving or in actual physical control of a commercial motor vehicle, or any motor vehicle if the driver holds a commercial driver's license, in this state while he or she had any alcohol, chemical substances, or controlled substances in his or her body.

Whether the person had an unlawful blood-alcohol level or breath-alcohol level of 0.08 or higher.

REFUSAL TO SUBMIT TO A BREATH, BLOOD, OR URINE TEST

Same as number one above.

Whether the person refused to any such test after being requested to do so by a law enforcement officer or correctional officer.

Whether the person was told that if he or she refused to submit to any such test, his or her privilege to operate a commercial motor vehicle would be disqualified.

**FAILURE TO REQUEST A REVIEW WITHIN THE 10 DAY PERIOD SHALL RESULT IN THE
WAIVER OF YOUR RIGHT TO A REVIEW OF THE SUSPENSION/DISQUALIFICATION.**

Location of Administrative Reviews Hearing Offices

- | | | |
|----------------------------------------------------------------------------|------------------------------------------------------------------------|----------------------------------------------------------------------------|
| 1. Clearwater 33762
4585 140th Avenue North
Suite 1002 | 6. Jacksonville 32219-3597
7439 Wilson Boulevard,
Room #9 | 11. Panama City 32401-2230
The Lincoln Center 237 W. 15th Street |
| 2. Daytona Beach 32114-4663
995 Orange Avenue | 7. Lake Worth 33467
6801 Lake Worth Road,
Suite 230 | 12. Pensacola 32504-6331
7282 Plantation Road,
Suite 406 |
| 3. Fort Myers 33901
4048 Evans Avenue,
Suite 305 | 8. Lauderdale Lakes 33311
3708 West Oakland Park Boulevard | 13. Tallahassee 32301-3817
504-A Capital Circle S.E. |
| 4. Fort Pierce 34982-8105
3220 South Federal Highway,
Suite 8 | 9. Miami 33135-1422
2515 West Flagler Street | 14. Tampa 33610-4479
2814 East Hillsborough Avenue |
| 5. Gainesville 32609-2861
2815 N.W. 13th Street, Suite 302 | 10. Melbourne 32901-7121
2325 S. Babcock Street, Suite B | 15. Orlando 32810-4221
4101 Clarcona-Ocoee Road,
Suite 152 |
| | | 16. Winter Springs 32708
290 East State Road 434 |

TESTING FACILITY TASK REPORT

AGENCY: BRPD

SUBJECT: KARAM, RONY

CASE NUMBER: 20-077584

DATE: Jun 13, 2020

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 0243

ENDING TIME: 0259

REFUSED

BREATH TESTS RESULTS: 1) R TIME 0246 A.M. P.M. 2) N/A TIME XX A.M. P.M.
3) N/A TIME XX A.M. P.M. 4) N/A TIME XX A.M. P.M.

BREATH OPERATOR: JOSHUA J BELL #8656

MAINTENANCE TECHNICIAN: J. KARLECKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: MAKING JOKES, ARGUMENTATIVE

CLOTHING: YELLOW TEE SHIRT, BLACK SHORTS, GREY FLIP FLOPS

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

EYES: BLOODSHOT

SUBJECT STATED HE WAS DRINKING BLACK LABAL AND MORE BLACK LABEL (Q AND A)

COMMENTS:

ARRIVED AT DUI TESTING FACILITY AND BEGAN THE 20 MINUTE OBSERVATION AT 0221 HOURS

SUBJECT STATED HE WOULD NOT TAKE BREATH TEST

A/O READ I.C

SUBJECT STATED HE UNDERSTOOD I.C AND REFUSED TO TAKE BREATH TEST

A/O READ RIGHTS

SUBJECT STATED HE UNDERSTOOD HIS RIGHTS

A/O CONDUCTED Q AND A

SUBJECT ANSWERED QUESTIONS

REFUSED



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

PBSO CASE # 20-077584 PBSO ZONE 7-53

AGENCY CASE # 2020-006797 CRASH CASE # _____

TIME OF STOP/CRASH 0015 DATE 06/13/2020 DAY Saturday

SUBJECT'S NAME Karam, Rony RACE w SEX M

HGT 5-08 WGT 160 DOB 05/15/1992

LOCATION 234 S Federal Hwy

ARRESTING OFFICER'S NAME & ID Eric Walter 848 AGENCY BRPD

DIVISION: _____

NOTIFIED BY COMMO yes

ARRIVAL AT FACILITY 0221

BREATH RESULTS:

Arrest Time 0035

1. **REFUSEL**
2. _____
3. _____
4. _____

TESTING OFFICER'S ID 8656

NOT A CERTIFIED COPY

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

I, Eric Walter, a duly certified Law Enforcement Officer or Correctional Officer,
(Name of Officer reading Implied Consent Warning)

am a member of Boca Raton Police Services Department, and I do swear
(Name of law enforcement agency)

or affirm that on or about the 13th day of June, 2020, at 12:35 P.M. A.M.

DRIVER Rony Karam
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# K650-720-92-175-0, state of Florida, was placed under lawful arrest for
the offense of driving under the influence by Eric Walter and
(Name of Arresting Officer)

issued Citation # A6LQARE

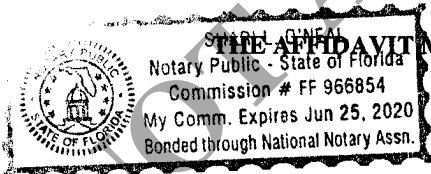
That on or about the 13th day of June, 2020, at 2:46 P.M. A.M.

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.

Eric Walter

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:

Signature of Attesting Officer

Title _____

Date _____

The foregoing instrument was sworn and subscribed before

me this 13 day of June, 2020.

by _____

who is personally known to me or who has produced

as identification

Notary Public S. O'Neal

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.

SUBJECT: Karam, Rony

CASE NUMBER: _____

QUESTIONS AND ANSWERS

I AM NOW GOING TO ASK YOU SOME QUESTIONS. WITH THESE RIGHTS IN MIND, YOU MAY ANSWER SOME OF, ALL OF, OR NONE OF THE FOLLOWING QUESTIONS AS YOU LIKE.

WERE YOU OPERATING A MOTOR VEHICLE AT THE TIME OF THE STOP/ACCIDENT? NO

WHERE WERE YOU GOING? I dont remember

WHAT STREET OR HIGHWAY WERE YOU ON? Not sure

DIRECTION OF TRAVEL? UNKNOWN WHERE DID YOU START? I dont remember

WHAT TIME DID YOU START? UNKNOWN WHAT TIME IS IT NOW? Not sure

WHAT IS TODAY'S DATE? 13th WHAT DAY OF THE WEEK IS IT? Saturday

WHAT COUNTY AND CITY ARE YOU IN NOW? United States of Florida

WHEN DID YOU LAST EAT? JUNE 12th WHAT DID YOU EAT? Beef

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? Drinking Blacklabel, drinking more Blacklabel

HOW MUCH DO YOU WEIGH? 166 HAVE YOU BEEN DRINKING? No WHAT? _____

HOW MUCH? _____ WHERE? Blackrose WITH WHOM? Not sure

WHEN DID YOU HAVE YOUR FIRST DRINK? 12:30 Pm AND YOUR LAST DRINK? unknown

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? Shots

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? No ARE YOU UNDER THE INFLUENCE? Don't Believe so

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? _____ HOW MUCH? _____

WHAT? _____ WHERE? _____ WHEN? _____

WHAT LINE OF WORK ARE YOU IN? Sales WHEN DID YOU LAST WORK? Tonight

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? No WHAT? _____

ARE YOU SICK OR INJURED? NO WHAT'S WRONG? _____

DO YOU LIMP? No DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? NO

WERE YOU IN AN ACCIDENT TODAY? Maybe

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? Not today WHEN? Neve

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? No WHO? _____ WHY? _____

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? No WHAT? _____ WHEN? _____

DO YOU HAVE:

- EPILEPSY? _____
- GLASS EYE? _____
- FALSE TEETH? _____
- EAR INFECTION? _____
- INNER EAR TROUBLE? _____
- DIABETES? _____

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? _____

DO YOU TAKE INSULIN? _____ IF SO, WHEN WAS YOUR LAST INJECTION? _____

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? No WHERE? _____

INTERVIEWER: OFC. Walter #848

WHITE - STATE ATTY. YELLOW - DHSMV PINK - CENTRAL RECORDS GOLD - JAIL

SUBJECT: Karam, Rony CASE NUMBER: _____

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 of chemical or controlled substances.

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

I am ofc. Walter of the Boca Raton Police Department.

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 as a result of a refusal to submit to a lawful test of your breath, urine or blood. Additionally, if you refuse to submit to the test I have requested of you and if your driving privilege has been previously suspended for a prior refusal to submit to a lawful test of your breath, urine or blood, you will be committing a misdemeanor. Refusal to submit to the test I have requested of you is admissible into evidence in any criminal proceeding.

SUBJECT'S SIGNATURE: (X) _____

Read on camera

CONSTITUTIONAL WARNINGS

I AM REQUIRED TO WARN YOU 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 statements and during any questioning.
5. If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent.
6. I can make no threats or promises to induce you to make a statement. This must be of your own free will.
7. Any statement can and will be used against you in a court of law.

SUSPECT'S SIGNATURE: (X) _____

Read on camera



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"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2020014757	Date: 06/14/2020
	Specialist Name/ID: AM/31562

WALTER
(848)

2020006797

\$ 166.00



FLORIDA DUI UNIFORM TRAFFIC CITATION

A6LOARE

COUNTY OF PALM BEACH		<input type="checkbox"/> (1) F.H.P. <input checked="" type="checkbox"/> (2) P.D. <input type="checkbox"/> (3) S.O. <input type="checkbox"/> (4) OTHER	
CITY (IF APPLICABLE) BOCA RATON 06/32		AGENCY NAME BOCA RATON POLICE	
AGENCY # 32		SUMMONS (VIOLATOR'S COPY)	
DAY OF WEEK SATURDAY	MONTH 06	DAY 13	YEAR 2020
NAME (PRINT) FIRST RONY		LAST KARAM	
STREET 1015 SPANISH RIVER RD - APT 303			
CITY BOCA RATON		STATE FL	ZIP CODE 33432
TELEPHONE NUMBER	DATE OF BIRTH MO 05 DAY 15 YR 1992	RACE W	SEX M HOT 508
DRIVER LICENSE NUMBER K 6 5 0 7 2 0 9 2 1 7 5 0	STATE FL	CLASS E	CDL LICENSE <input type="checkbox"/> YR LICENSE EXP. 2027 COMMERCIAL VEHICLE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
VEHICLE YR 2019 MAKE BMW STYLE 4D COLOR BLU	PLACARDED HAZARDOUS MATERIAL <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	VEHICLE LICENSE NO. LVM115 TRAILER TAG NO. STATE FL YEAR TAG EXPIRES 2021 > 18 PASSENGERS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
UPON A PUBLIC STREET OR HIGHWAY, OR OTHER LOCATION, NAMELY 286 ESPLANADE, BOCA RATON			
MOTORCYCLE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
COMPANION CITATION(S) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
FT. _____ MILES _____ OF HOME _____			

DID UNLAWFULLY COMMIT THE OFFENSE OF DRIVING UNDER THE INFLUENCE OF ALCOHOLIC BEVERAGES, CHEMICAL OR CONTROLLED SUBSTANCES; DID DRIVE, OR WAS IN ACTUAL PHYSICAL CONTROL OF A VEHICLE, WHILE UNDER THE INFLUENCE OF AN ALCOHOLIC BEVERAGE/CHEMICAL SUBSTANCE/CONTROLLED SUBSTANCE TO THE EXTENT NORMAL FACULTIES WERE IMPAIRED, OR WITH A BLOOD OR BREATH ALCOHOL LEVEL OF .08 OR ABOVE OF **REF**

COMMENTS PERTAINING TO OFFENSE (Only one offense each citation)

DUI RE-EXAM YES NO

AGGRESSIVE DRIVER PASSENGER 16 YEARS YES NO STATE STATUTE SECTION **316.193** SUB-SECTION **(1)**

CRASH DAMAGE TO OTHER PROPERTY INJURY TO ANOTHER SERIOUS BODILY INJURY TO ANOTHER FATAL YES NO

THIS IS A CRIMINAL VIOLATION, COURT APPEARANCE REQUIRED, AS INDICATED BELOW.
07/13/2020 08:30 AM A6LOARE
SOUTH COUNTY COURTHOUSE
200 W ATLANTIC AVE, DELRAY BCH, FL 33444

ARREST DELIVERED TO **PALM BEACH JAIL** DATE **06/13/2020**
I AGREE AND PROMISE TO COMPLY AND ANSWER TO THE CHARGES AND INSTRUCTIONS SPECIFIED IN THIS CITATION. WILLFUL REFUSAL TO ACCEPT AND SIGN THIS CITATION MAY RESULT IN ARREST. I UNDERSTAND MY SIGNATURE IS NOT AN ADMISSION OF GUILT OR WAIVER OF RIGHTS. IF YOU NEED REASONABLE FACILITY ACCOMMODATIONS TO COMPLY WITH THIS CITATION, CONTACT THE CLERK OF THE COURT.

X SIGNATURE OF VIOLATOR
EFFECTIVE IMMEDIATELY, YOUR DRIVING PRIVILEGE IS SUSPENDED/DISQUALIFIED FOR:
 DRIVING WITH AN UNLAWFUL BLOOD OR BREATH ALCOHOL LEVEL. THIS SUSPENSION IS FOR A PERIOD OF SIX MONTHS IF THIS IS THE FIRST VIOLATION OR ONE YEAR IF PREVIOUSLY SUSPENDED FOR DRIVING WITH AN UNLAWFUL BLOOD OR BREATH ALCOHOL LEVEL. IF YOU HOLD A CDL OR YOU ARE OPERATING A CMV, YOUR COMMERCIAL DRIVER LICENSE/PRIVILEGE WILL ALSO BE DISQUALIFIED FOR A PERIOD OF ONE YEAR FOR THE FIRST OFFENSE OR PERMANENTLY DISQUALIFIED FOR A SUBSEQUENT OFFENSE.

REFUSAL TO SUBMIT TO LAWFUL BREATH, BLOOD OR URINE TEST SECTION 322.2615, F.S. THIS SUSPENSION IS FOR A PERIOD OF ONE YEAR IF THIS IS A FIRST REFUSAL OR 18 MONTHS IF PREVIOUSLY SUSPENDED FOR THIS OFFENSE. IF YOU HOLD A CDL OR YOU ARE OPERATING A CMV, YOUR COMMERCIAL DRIVER LICENSE/PRIVILEGE WILL ALSO BE DISQUALIFIED FOR A PERIOD OF ONE YEAR FOR A FIRST REFUSAL OR PERMANENTLY DISQUALIFIED FOR A SUBSEQUENT REFUSAL.

LICENSE SURRENDERED? YES NO REASON **REFUSAL**
ELIGIBLE FOR PERMIT? YES NO REASON **ELIGIBLE**

UNLESS INELIGIBLE, THIS CITATION SHALL SERVE AS A TEMPORARY DRIVER LICENSE AND WILL EXPIRE AT MIDNIGHT ON THE 10TH DAY FOLLOWING THE DATE OF SUSPENSION.

AT THE **OKALAND PARK** BUREAU OF ADMINISTRATIVE REVIEWS OFFICE, YOU MAY REQUEST, WITHIN 10 DAYS AFTER THE DATE OF SUSPENSION, A REVIEW OF SUSPENSION BY THE DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES OR A REVIEW TO DETERMINE ELIGIBILITY FOR A RESTRICTED LICENSE IF THIS IS YOUR FIRST DUI RELATED OFFENSE. SEE REVERSE SIDE.

RANK: SIGNATURE OF OFFICER **WALTER** BADGE NO. **848** © NO. TROOP UNIT

