

0435908 20CT-1062

Check if Supplement is Attached

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

ADMINISTRATIVE	OBTS Number		Agency ORI Number FL 5 0 2 7 0 0		Agency Name PALM SPRINGS PUBLIC SAFETY		Agency Report Number (N.T.A.'s only) 8 12 1 2 1 0 1 0 1 4 7 3 1 1 1	
	Charge Type: Check as many as apply.		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 <input type="checkbox"/>	
	Location of Arrest (Including Name of Business) 4400 Forest Hill Blvd, Palm Springs, FL 33461		Location of Offense (Business Name, Address) 4400 Forest Hill Blvd, Palm Springs, FL 33461		Date of Arrest 0 1 1 9 2 0		Time of Arrest 0 2 5 0	
DEFENDANT	Name (Last, First, Middle) Chong, Steven, Wai		Alias (Name, DOB, Soc. Sec. #, Etc.)		Race W M		Sex M	
	Date of Birth 0 8 2 5 6 9		Height 5 7		Weight 1 4 0		Eye Color BRN	
	Hair Color Grey		Complexion Light		Build MED		Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) None	
	Local Address (Street, Apt. Number) 312 S 12th St, Lantana, FL 33462		City Lantana		State FL		Zip 33462	
	Permanent Address (Street, Apt. Number) 312 S 12th St, Lantana, FL 33462		City Lantana		State FL		Zip 33462	
CO-DEF	D/L Number, State CS20 799 69 3050		Soc. Sec. Number		INS Number		Place of Birth (City, State) MIAMI	
	Co-Defendant (Last, First, Middle)		Race		Sex		Date of Birth	
JUVENILE	Parent Name (Last, First, Middle)		Residence Phone		Address (Street, Apt. Number)		City, State, Zip	
	Address (Street, Apt. Number)		City		State		Zip	
	Notified by: (Name)		Date		Time		Juvenile Disposition	
	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 355-2528) informed of any change of address.		School Attended		Grade		Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No	
CHARGE	Drug Activity N N		S. Sell B. Buy T. Traffic		R. Smuggle D. Deliver E. Use		K. Dispense/ Distribute	
	Charge Description Driving Under Influence		Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number 3 1 6 1 1 9 3 1 (1)(a)	
	Drug Activity		Drug Type		Amount / Unit		Offense # 2020-001473	
	Charge Description		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number	
	Drug Activity		Drug Type		Amount / Unit		Offense #	
NOTICE TO APPEAR	Location (Court, Room Number, Address) Criminal Justice Complex 3228 Gun Club Rd, W.P.B., FL 33406		Court Date and Time Month Feb Day 20th Year 2020 Time 8:30 A.M.		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 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.		Signature of Defendant (or Juvenile and Parent/Custodian)	
	HOLD for other agency		Signature of Arresting Officer J. Maldonado 189		Name Verification (Printed by Arresting Officer) J. Maldonado 189		Date Signed 1/19/2020	
	<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other		Name of Arresting Officer (Print) J. Maldonado 189		I.D. # 189		PAGE 1 of 1	
	Intake Deputy		I.D. #		Pouch #		Transporting Officer J. Maldonado 189	
	Witness here if suitable		I.D. #		Agency RSPD		CIRCUIT & COUNTY COURTS (CRIMINAL DIV.)	

SCANNED
JAN 20 2020

FILED
JAN 20 2020
CIRCUIT & COUNTY COURTS
(CRIMINAL DIV.)

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 19th DAY OF January 20 20 AT 2:34 AM PM

SUBJECT: Steven Wai Chong CASE NUMBER: 2020-001473

AGENCY: Palm Springs Police Department ARRESTING OFFICER: J. Maldonado

PERSONAL CONTACT

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

I arrived at the 4400 Block of Forest Hill Blvd, Palm Springs, FL 33461 in reference to a crash with a single vehicle that was on the median. As Sgt. R. Fequiere #115 was investigating the crash I observed a white/male by the name of, Steven Wai Chong outside of the vehicle. A witness by the name of, Tonya M Raschke, observed Chong behind the wheel of the vehicle, prior to our arrival. I then read Chong his miranda rights and conducted a D.U.I investigation.

OBSERVATION OF DRIVER:

Chong was swaying back and forth and had slurred speech and glassy eyes.

Chong was unbalanced.

DRIVER'S STATEMENTS:

Chong stated, he was not drinking and was coming from work?

ODORS:

~~Chong had the smell of an oil.~~
An odor of an unknown alcoholic beverage was coming from Chong's breath.

GENERAL OBSERVATIONS

SPEECH: Slurred

ATTITUDE: Cooperative but refused all road sides.

CLOTHING: Green shirt, grey shorts, black shoes

MEDICAL/OTHER:

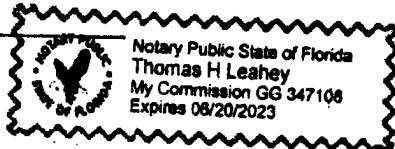
STATE OF FLORIDA
COUNTY OF PALM BEACH

J. Maldonado
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 19th day of January 20 20 by _____

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

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



SCANNED
JAN 20 2020

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS: Refused Road Sides

- LT EYE-LACK OF SMOOTH PURSUIT
- RT EYE-LACK OF SMOOTH PURSUIT
- LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
- RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
- LT EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES
- RT EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

Other Observations:

WALK & TURN:

Refused Road Sides

ONE LEG STAND:

Refused Road Sides

FINGER TO NOSE:

Refused Road Sides

ROMBERG/ALPHABET:

Refused Road Sides

BREATH TEST RESULTS: Refused

STATE OF FLORIDA
COUNTY OF PALM BEACH

[Signature]
(Signature of Arresting/Investigative Officer)

The foregoing instrument was notarized or sworn before me this 19th day of January, 2020 by

who is personally known to me and/or produced identification. Type of identification produced personally known LEO

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

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, Ofc. J. Maldonado, a duly certified Law Enforcement Officer or Correctional Officer,
(Name of Officer reading Implied Consent Warning)

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

or affirm that on or about the 19th day of January, 20 20, at _____ P.M. A.M.

DRIVER Steven Wai Cheng
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# C520 799 69 3050, state of Florida, was placed under lawful arrest for

the offense of Driving Under the Influence by Ofc. J. Maldonado and
(Name of Arresting Officer)

issued Citation # ASBJNSE

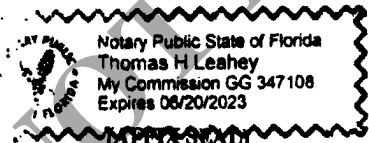
That on or about the 19th day of January, 20 20, at 2:34 P.M. A.M.

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]
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:

The foregoing instrument was sworn and subscribed before
me this 19th day of January, 20 20,
by Ofc. J. Maldonado,

Signature of Attesting Officer

Title _____

Date _____

who is personally known to me or who has produced

personally known LED as identification

Notary Public [Signature]

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: PSPD

SUBJECT: Chang, Steven W CASE NUMBER: 20-037456

DATE: 01/19/2020 VIDEO TAPE NUMBER: N/A

BEGINNING TIME: 03:47 ENDING TIME: 03:52

BREATH TESTS RESULTS: 1) R TIME 03:51 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: T Leakey #19183

MAINTENANCE TECHNICIAN: J Kuntzke #4167

TESTING OFFICER'S OBSERVATIONS

SPEECH: slurred, thick, deliberate

ATTITUDE: calm, cooperative

CLOTHING: gray shorts, lime green polo black sneakers

MEDICAL CONDITIONS: none

MEDICATIONS: none

OTHER: eyes glassy, bloodshot
odor of unknown alcoholic beverage in breath

REFUSED

COMMENTS: arrived at center A/O conducted 20 minute
observation period at 03:25 hrs

Δ requested to speak to an attorney

A/O read I/c + Δ stated he understood I/c

Δ requested attorney - refused to perform breath test

A/O read rights + Δ stated he understood rights

Δ invoked right to counsel

REFUSED

SCANNED
JAN 20 2020

WITNESS LIST

CASE NUMBER: 2020-001473

ARRESTING OFFICER J. Maldonado

ADDRESS 230 Cypress Ln, Palm Springs, FL 33461

PHONE NUMBERS (HOME) _____ (WORK) (561) 968-8243

CAN TESTIFY TO: 2020-001473, Crash 2020-001471

NAME: ~~████~~ Sgt. P. Feguiere

ADDRESS 230 Cypress Ln, Palm Springs, FL 33461

PHONE NUMBERS (HOME) _____ (WORK) (561) 968-8243

CAN TESTIFY TO: 2020-001473 and Crash 2020-001471

NAME: Tonya M Raschke

ADDRESS 5424 Lee Ct, West Palm Beach, FL 33415

PHONE NUMBERS (HOME) (561) 689-8601 / 561 818 7485 (WORK) _____

CAN TESTIFY TO: 2020-001473, Crash 2020-001471

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: _____

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: _____

SCANNED
JAN 20 2020

SUBJECT: Ching, Steven W 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? _____

WHERE WERE YOU GOING? _____

WHAT STREET OR HIGHWAY WERE YOU ON? _____

DIRECTION OF TRAVEL? _____ WHERE DID YOU START? _____

WHAT TIME DID YOU START? _____ WHAT TIME IS IT NOW? _____

WHAT IS TODAY'S DATE? _____ WHAT DAY OF THE WEEK IS IT? _____

WHAT COUNTY AND CITY ARE YOU IN NOW? _____

WHEN DID YOU LAST EAT? _____ WHAT DID YOU EAT? _____

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? _____

HOW MUCH DO YOU WEIGH? _____ HAVE YOU BEEN DRINKING? _____ WHAT? _____

HOW MUCH? _____ WHERE? _____ WITH WHOM? _____

WHEN DID YOU HAVE YOUR FIRST DRINK? _____ AND YOUR LAST DRINK? _____

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? _____

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? _____ ARE YOU UNDER THE INFLUENCE? _____

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

WHAT? _____ WHERE? _____ WHEN? _____

WHAT LINE OF WORK ARE YOU IN? _____ WHEN DID YOU LAST WORK? _____

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? _____ WHAT? _____

ARE YOU SICK OR INJURED? _____ WHAT'S WRONG? _____

DO YOU LIMP? _____ DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? _____

WERE YOU IN AN ACCIDENT TODAY? _____

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? _____ WHEN? _____

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? _____ WHO? _____ WHY? _____

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? _____ 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? _____ WHERE? _____

INTERVIEWER: _____

SCANNED
JAN 20 2020

SUBJECT: Chong, Steven W 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 Dfc Maldonado of the PSPD

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.

**SCANNED
JAN 20 2020**

SUSPECT'S SIGNATURE: (X) Read on camera



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

REVIEW COMPLETED BY

Booking Number: 2020002176	Date: 01/20/2020
	Specialist Name/ID: AM/31562

SCANNED
JAN 20 2020