

20 CT15361 NB

ARREST / NOTICE TO APPEAR  
Juvenile Referral Report

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

OBTS Number  
Agency ORI Number: FLO 502600  
Agency Name: PALM BEACH GARDENS POLICE DEPARTMENT  
Agency Report Number (N.T.A.'s only): 78-2000531

Charge Type: 1. Felony 2. Traffic Felony 3. Misdemeanor 4. Traffic Misdemeanor 5. Ordinance 6. Other  
Weapon Seized / Type: 1. Yes 2. No  
Location of Arrest (Including Name of Business): Burns RD/ Military TRL PBG FL  
Location of Offense (Business Name, Address): Burns RD/ Military TRL PBG FL

Name (Last, First, Middle): Bell, Thomas, Peter  
Date of Arrest: 11/26/2020 11/28/20  
Time of Arrest: 12:41 0041  
Booking Date: Booking Time: Jail Date: Jail Time: Location of Vehicle: KAUFF'S TOWING & RECOVERY 4301 East Avenue, West Palm Beach, FL 33405

Race: W - White 1 - American Indian B - Black 0 - Oriental/Asian W M Sex: M Date of Birth: 9/19/1965 Height: 509 Weight: 170 Eye Color: BLU Hair Color: Bald Complexion: light Build: MAFD  
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description): flower upper back  
Marital Status: Married Religion: catholic Indication of Alcohol Influence Drug Influence: Y N Unk

Local Address (Street, Apt. Number): 3557 Forest Hill Blvd (City): West Palm Beach (State): FL (Zip): 33406 Phone: (561) 3291036  
Permanent Address (Street, Apt. Number): 3557 Forest Hill Blvd (City): West Palm Beach (State): FL (Zip): 33406  
Business Address (Name, Street):  
DL Number, State: B400-835-65-339-0 FL INS Number: Place of Birth (City, State): Memphis TN Citizenship: US

Co-Defendant Name (Last, First, Middle):  
Co-Defendant Name (Last, First, Middle):  
Parent Name (Last, First, Middle):  
Address (Street, Apt. Number):  
Notified by: (Name):  
Released To: (Name): Relationship: Date: Time: Juvenile Disposition: 1. Handled/processed within Dept. and Released. 2. TOT HRS / DYS 3. Incarcerated

Charge Description: DUI breath over .08  
Counts: 1 Domestic Violence: Y N Statute Violation Number: 316.193(1)(C)  
Violation of ORD #: Warrant / Capias Number: Bond:  
Charge Description: Counts: Domestic Violence: Y N Statute Violation Number: Violation of ORD #: Warrant / Capias Number: Bond:  
Charge Description: Counts: Domestic Violence: Y N Statute Violation Number: Violation of ORD #: Warrant / Capias Number: Bond:  
Charge Description: Counts: Domestic Violence: Y N Statute Violation Number: Violation of ORD #: Warrant / Capias Number: Bond:

Location (Court, Court Number, Address): NORTH COUNTY COURTHOUSE, 3188 PGA BOULEVARD, PALM BEACH GARDENS, FL 33410 - PH: (561) 662-6700  
Court Date and Time: Month: December Day: 30th Year: 2020 Time: 10:00 AM X PM  
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, 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): Date Signed: 11/28/2020

HOLD for other Agency Name: Signature of Arresting Officer: Name Verification (Printed by Arrestee): NOV 28 AM 4:45  
Name of Arresting Officer (Print): Ofc. Medina 527 I.D. # (PRINT) SCANNED  
Transporting Officer: Christian Medina ID # 527 Agency: PBGPD  
Witness (Printed by Arrestee): NOV 29 2020 PAGE 1 OF 1

DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT (N.T.A.'s ONLY)

JA 0519893 PA 1089

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 27<sup>th</sup> 28 DAY OF November 2020, AT 12:41 pm  AM  PM

SUBJECT: Bell, Thomas, Peter CASE NUMBER: 2000531

AGENCY: PALM BEACH GARDENS POLICE DEPT. ARRESTING OFFICER: Ofc. Medina 527  
PERSONAL CONTACT

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

Officer Johnson observed a white Toyota traveling west on Northlake blvd at a high rate of speed. Officer Johnston position his marked vehicle behind the vehicle prior to the vehicle making a turn to head northbound on Military trail. The vehicle then accelerated to 62 mph on a posted 45mph. Officer Johnston initiated a traffic stop.

OBSERVATION OF DRIVER:

Bell had glossy eyes. Bell informed me that he had just left Double Roads and was at Keylime House prior in the night. Bell had the odor of an unknown alcoholic beverage emanating from the vehicle.

DRIVER'S STATEMENTS:

Bell stated he drank three vodka sodas.

ODORS:

unknown alcoholic scent

GENERAL OBSERVATIONS

SPEECH: slow slurred

ATTITUDE: compliant

CLOTHING: beige shorts, blue shirt, tan shoes

MEDICAL/OTHER: none stated


STATE OF FLORIDA  
COUNTY OF PALM BEACH

[Signature]  
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 27 day of November 2020 by Ofc. Medina

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

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

 JOSHUA BELL  
MY COMMISSION #GG346008  
EXPIRES: JUN 18, 2023  
Bonded through 1st State Insurance

SCANNED  
NOV 29 2020

SUBJECT: Bell, Thomas, Peter

CASE NUMBER 2000531

**ROADSIDE TASKS**

**HORIZONTAL GAZE NYSTAGMUS:**

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:**

**Bell moved his head to follow the stimulus after being instructed not to.**

**WALK & TURN:**

**During the first set of steps, Bell missed the heel to toe multiple times. Bell used his arms to maintain balance and extended his arms past 45 degrees.**

**ONE LEG STAND:**

**Bell swayed while attempting to maintain balance as well as put his foot back on the ground to regain balance. Bell used his arms to balance and extended them past 45 degrees from his body.**

**ROMBERG ALPHABET:**

**Not conducted**

**FINGER TO NOSE:**

**Not conducted**

**BREATH TEST RESULTS:**

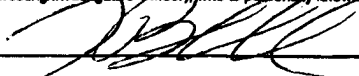
1) .125    2) .125    3) N/A    4) N/A


STATE OF FLORIDA  
COUNTY OF PALM BEACH

  
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 27 day of November 2020 by Ofc. Medina

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

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

 JOSHUA BELL  
MY COMMISSION #GG346008  
EXPIRES: JUN 18, 2023  
Bonded through 1st State Insurance

SUBJECT: \_\_\_\_\_ 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 \_\_\_\_\_ of the \_\_\_\_\_.

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) \_\_\_\_\_

**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) \_\_\_\_\_

SUBJECT: 277 Adams 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: \_\_\_\_\_

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

# TESTING FACILITY TASK REPORT

AGENCY: PBG

SUBJECT: Bell, Thomas P

DATE: Nov 28, 2020

BEGINNING TIME: 0150

CASE NUMBER: 20-131195

VIDEO DVD NUMBER: N/A

ENDING TIME: 0219

BREATH TESTS RESULTS: 1) .125 TIME 0200 A.M.  P.M.  2) .125 TIME 0203 A.M.  P.M.   
3) n/a TIME 0 A.M.  P.M.  4) n/a TIME 0 A.M.  P.M.

BREATH OPERATOR: Thomas H Leahey #19183

MAINTENANCE TECHNICIAN: Jason Karlecke #6467

## TESTING OFFICER'S OBSERVATIONS

SPEECH: thick, deliberate

ATTITUDE: calm, cooperative

CLOTHING: tan shorts, blue l/s shirt, tan shoes

MEDICAL CONDITIONS: High blood pressure

MEDICATIONS: amlopodine, lasartin

## OTHER:

eyes are glassy & bloodshot  
odor of unknown alcoholic beverage on breath  
subject drank 3 vodka on the rocks - Q&A

## COMMENTS:

arrived at center A/O conducted 20 minute observation period 0127 hrs.

subject refused to perform breath test - not at this time

A/O read I/C & subject understood I/C

subject agreed to perform breath test

A/O read rights & subject understood rights

tech read breath test results & subject understood breath test results

A/O conducted Q&A

subject answered questions



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

PBSO CASE # 20-131195 PBSO ZONE 3-13

AGENCY CASE # 20005314 CRASH CASE # \_\_\_\_\_

TIME OF STOP/CRASH 12:29 pm DATE 11/27/2020 DAY Friday

SUBJECT'S NAME Bell Thomas Peter RACE W SEX M  
LAST FIRST MID

HGT 509 WGT 170 DOB 9/19/1965

LOCATION Burns RD/ Military TRL

ARRESTING OFFICER'S NAME & ID Ofc. Medina 527 AGENCY PBGPD

DIVISION: TRAFFIC UNIT

NOTIFIED BY COMMO YES

ARRIVAL AT FACILITY 0127

ARREST TIME 12:41

BREATH RESULTS:

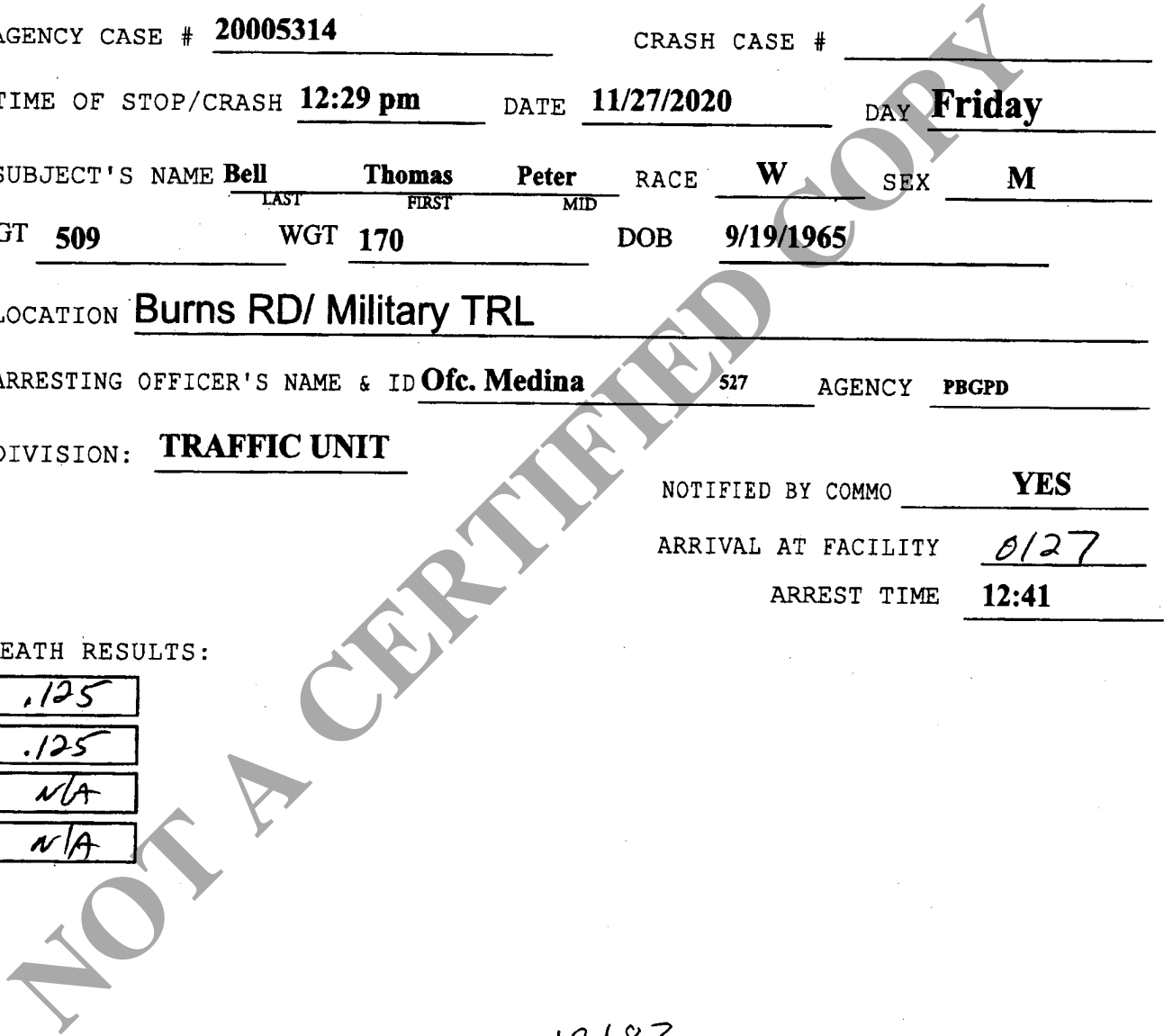
1) .125

2) .125

3) n/a

4) n/a

BREATH TEST OPERATOR: 19183



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: 80-006240 Software: 8100.27  
Date of Test: 11/28/2020

Date of Last Agency Inspection: 11/13/2020

Observation Period Began: 01:27

Subject's Name: THOMAS P BELL

DOB: 09/19/1965 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	01:56
	Air Blank	0.000	01:57
	Control Test	0.080	01:57
	Air Blank	0.000	01:58
	Subject Sample #1	0.125	02:00
	Air Blank	0.000	02:00
	Air Blank	0.000	02:02
	Subject Sample #2	0.125	02:03
	Air Blank	0.000	02:04
	Control Test	0.080	02:04
	Air Blank	0.000	02:04
	Diagnostics Check	OK	02:05

Cylinder Lot: 14020080A1  
Exp: 07/05/2022

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 THOMAS B LEAHEY, 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: \_\_\_\_\_

Signature

Date: 11/28/2020

Sworn to (or affirmed) before me this 28<sup>th</sup> day of November, 2020

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.



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

REVIEW COMPLETED BY

Booking Number: 2020027857	Date: 11/29/2020
	Specialist Name/ID: T Howard/7185