

50523792

2ICT15525AMRB

P-1458

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

OBTS Number		Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06-21107449		
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		Weapon Seized / Type <input checked="" type="checkbox"/> 1. Yes <input type="checkbox"/> 2. No N/A		Multiple Clearance Indicator 01				
Location of Arrest (Including Name of Business) 700B LOCK S MILITARY TRAIL WEST PALM BEACH FL, 33415				Location of Offense (Business Name, Address) 700 BLOCK S MILITARY TRAIL, WEST PALM BEACH FL, 33415				
Date of Arrest 09/17/2021	Time of Arrest 0219	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle D&D TOWING		
Name (Last, First, Middle) OLIVER VAZQUEZ, YULIESKY,				Alias (Name, DOB, Soc. Sec. #, Etc.)				
Race W - White - American Indian B - Black - Oriental/Asian W	Sex M	Date of Birth 8/5/1985	Height 5'07	Weight 145	Eye Color BROWN	Hair Color BLACK	Complexion LIGHT	Build SMALL
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)				Marital Status SINGLE	Religion CATHOLIC	Indication of Alcohol/Influence/Drug Influence Y <input type="checkbox"/> N <input type="checkbox"/> Unk. <input type="checkbox"/>		
Local Address (Street, Apt. Number) (City) (State) (Zip) 1447 SHANNONDALE RD APT A, WEST PALM BEACH FL, 33406				Phone (863) 599-8323	Residence Type: 1. City 3. Florida 2. County 4. Out of State 2			
Permanent Address (Street, Apt. Number) (City) (State) (Zip)				Phone	Address Source VERBAL			
Business Address (Name, Street) (City) (State) (Zip)				Phone	Occupation CONSTRUCTION			
D/L Number, State 0416960852850, FL		Soc. Sec. Number		INS Number		Place of Birth (City, State) CUBA		Citizenship NON US
Co-Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large		<input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile
Co-Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large		<input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile
Parent Legal Custodian Other:		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 Dept. and Released. 2. TOT HRS / DYS 3. Incarcerated				
Released To: (Name)		Relationship		Date	Time			
The above address 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 (Phone 355-2526) informed of any change of address. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)				School Attended		Grade		
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property			Value of Property			
Drug Activity N. N/A P. Possess		S. Sell B. Buy T. Traffic	R. Smuggle D. Deliver E. Use	K. Dispense/ Distribute	M. Manufacture/ Produce/ Cultivate	Z. Other		
Drug Type N		Amount / Unit N/A	Offense # 21107449	Statute Violation Number 316.193(1)(A)		Violation of ORD #		
Warrant / Capias Number		Bond						
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number		Violation of ORD #		
Drug Activity		Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond		
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number		Violation of ORD #		
Drug Activity		Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond		
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number		Violation of ORD #		
Drug Activity		Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond		
Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number		Violation of ORD #		
Drug Activity		Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond		
Location (Court, Room Number, Address) PALM BEACH COUNTY CRIMINAL JUSTICE COMPLEX, 3228 GUN CLUB RD WEST PALM BEACH FL 33406								
Court Date and Time Month OCTOBER Day 21ST Year 2021 Time 0830 AM <input checked="" type="checkbox"/> 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. 09/17/2021								
Signature of Defendant (or Juvenile and Parent /Custodian)				Date Signed				
HOLD for other Agency Name:		Signature of Arresting Officer X [Signature] # 34092		Name Verification (Printed by Arrestee)				
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal		<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:		Name of Arresting Officer (Print) D/S D. HARVEY		I.D. # 34092		
Initials Deputy		I.D. #	Pouch #	Transporting Officer INV. A. TEJEDA 31814		Agency PBSO		
Witness here if subject signed with an "X"				PAGE 1 OF 1				

SCANNED

SEP 17 2021

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 17TH DAY OF SEPTEMBER 20 21, AT 0139 AM PM

SUBJECT: OLIVER VAZQUEZ, YULIESKY, CASE NUMBER: 21107449

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: D/S D. HARVEY

PERSONAL CONTACT

DRIVING PATTERN: Actual physical control (physical evidence or statements putting def. behind wheel of vehicle)

On Friday, September 17th, 2021 at approximately 0139 hours while patrolling the 700 block of S Military Trail in Unincorporated West Palm Beach, within Palm Beach County FL I observed a black honda sedan traveling southbound in the outside (number 3) lane. I observed the vehicle to be driving at speeds faster than normal. At that time, Investigator Tejada notified me that the aforementioned vehicle was traveling at 66 miles per hour. It should be noted the posted speed limit in the area is 40 miles per hour.

I then got behind the vehicle in my marked PBSO patrol car in an attempt to conduct a traffic stop on the vehicle. While driving behind the vehicle, I watched as it failed to drive within a single lane. The vehicle went into the bicycle lane several times, almost striking the sidewalk. I then activated my overhead red and blue lights and siren to my patrol car in an attempt to initiate a traffic stop on the vehicle. He came to final stop at, 1675 S. Military Trail in the Dunkin Donuts parking lot.

I then made contact with the driver and sole occupant of the vehicle, upon making contact with the defendant who was seated in the driver seat of his vehicle. I immediately smelled an obvious odor of an unknown alcoholic beverage coming from the car. I observed the defendant's eyes to be glossy and blood shot. I also observed the defendant to have a slow and slurred speech. The defendant also had a pale and flushed face. He was asked for his Driver License, registration, and proof of insurance. At that time, he provided me with only his DL.

OBSERVATION OF DRIVER:

Upon making contact with the defendant who was seated in the driver seat of his vehicle. I immediately smelled an obvious odor of an unknown alcoholic beverage coming from the car. I observed the defendant's eyes to be glossy and blood shot. I also observed the defendant to have a slow and slurred speech. The defendant also had a pale and flushed face. He was asked for his Driver License, registration, and proof of insurance. At that time, he provided me with only his DL. I then asked again for his documents when he provided me with his insurance card. He was asked again for his registration and he went passed it several times, before stating he did not have it. The defendant was asked to step out of his vehicle and speak with me in front of my patrol car, as he stepped out of his car he staggered to the side and had an unstable balance. I also observed the defendant to have a sway as he stood normally without walking. He also immediately grabbed onto the push bumper as he got in front of my patrol car.

DRIVER'S STATEMENTS:

The defendant stated he was on his way to his sisters house from his girlfriend's house. He stated he did not know what street he was currently driving on, then stated Military Trail. He also did not know what his direction of travel was. He stated he has no medical conditions. He stated he is not taking any medications. He stated he has no physical defects or injuries. He stated he has not hit his head recently. He stated the current time is 11PM, it was actually 0151AM. He stated he has not used any marijuana or used any illegal drugs. He stated he was driving his Honda Civic. He stated he drank 6 Bud Light beer cans. He stated his first drink was around 530PM and his last was possibly one hour ago.

ODORS:

An obvious odor of an unknown alcoholic beverage coming from his breath which intensified as he spoke with me.

GENERAL OBSERVATIONS

SPEECH: Slow and slurred

ATTITUDE: Calm and cooperative

CLOTHING: white tshirt, gray shorts, brown sneakers

MEDICAL/OTHER: No medical conditions
All roadsides captured on in car camera

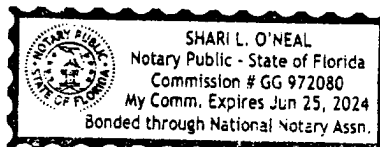
STATE OF FLORIDA
COUNTY OF PALM BEACH

D/S D. HARVEY #34092
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 17th day of September 20 21 by D/S D. HARVEY

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

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



SUBJECT: OLIVER VAZQUEZ, YULIESKY, CASE NUMBER 21107449

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- | | |
|---|---|
| <input checked="" type="checkbox"/> LT EYE-LACK OF SMOOTH PURSUIT | <input checked="" type="checkbox"/> RT EYE-LACK OF SMOOTH PURSUIT |
| <input checked="" type="checkbox"/> LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION | <input checked="" type="checkbox"/> RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION |
| <input checked="" type="checkbox"/> LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES | <input checked="" type="checkbox"/> RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES |

Other Observations:

The defendant was placed into the instructional stance for the Horizontal Gaze Nystagmus. He verbally identified the blue stimulus that I was holding up. He failed to maintain the instructional stance by separating his feet to help steady himself. He swayed from side to side and front to rear. He was told to follow the stimulus with his eyes only and not move his head. I checked his eyes for equal pupil size, equal tracking, and resting nystagmus. He was reminded several times not to move his head and only follow with his eyes. I did not observe vertical nystagmus in either of his eyes.

WALK & TURN:

The defendant was placed into the instructional stance for the Walk and Turn. He stated he understood the instructions and had no questions for me. He failed to maintain the instructional stance by separating his feet to help steady himself. He then began the task on his own without being told. He swayed from side to side. He then stated he was not going to do the task.

ONE LEG STAND:

Refused

FINGER TO NOSE:

Refused

RHOMBERG ALPHABET:

Refused

BREATH TEST RESULTS: 1) .213 2) .204 3) 4)

STATE OF FLORIDA
COUNTY OF PALM BEACH

D/S D. HARVEY

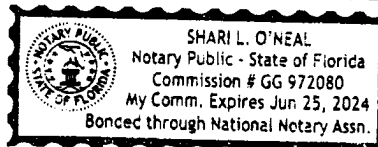
(Signature of Arresting/Investigative Officer)

D/H # 34092

The foregoing instrument was sworn to or affirmed and subscribed before me this 17th day of September, 2021 by D/S D. HARVEY

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

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





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

PBSO CASE # 21107449 PBSO ZONE 1-12

AGENCY CASE # _____ CRASH CASE # _____

TIME OF STOP/CRASH 0139 DATE 09/17/2021 DAY Friday

SUBJECT'S NAME OLIVER VAZQUEZ, YULIESKY, RACE W SEX M

HGT 5'07 WGT 145 DOB 8/5/1985

LOCATION 700B LOCK S MILITARY TRAIL WEST PALM BEACH FL, 33415

ARRESTING OFFICER'S NAME & ID D/S D. HARVEY (34092) AGENCY PALM BEACH COUNTY SHERIFF'S OFFICE

DIVISION: FTO/DUI

NOTIFIED BY COMMO NO

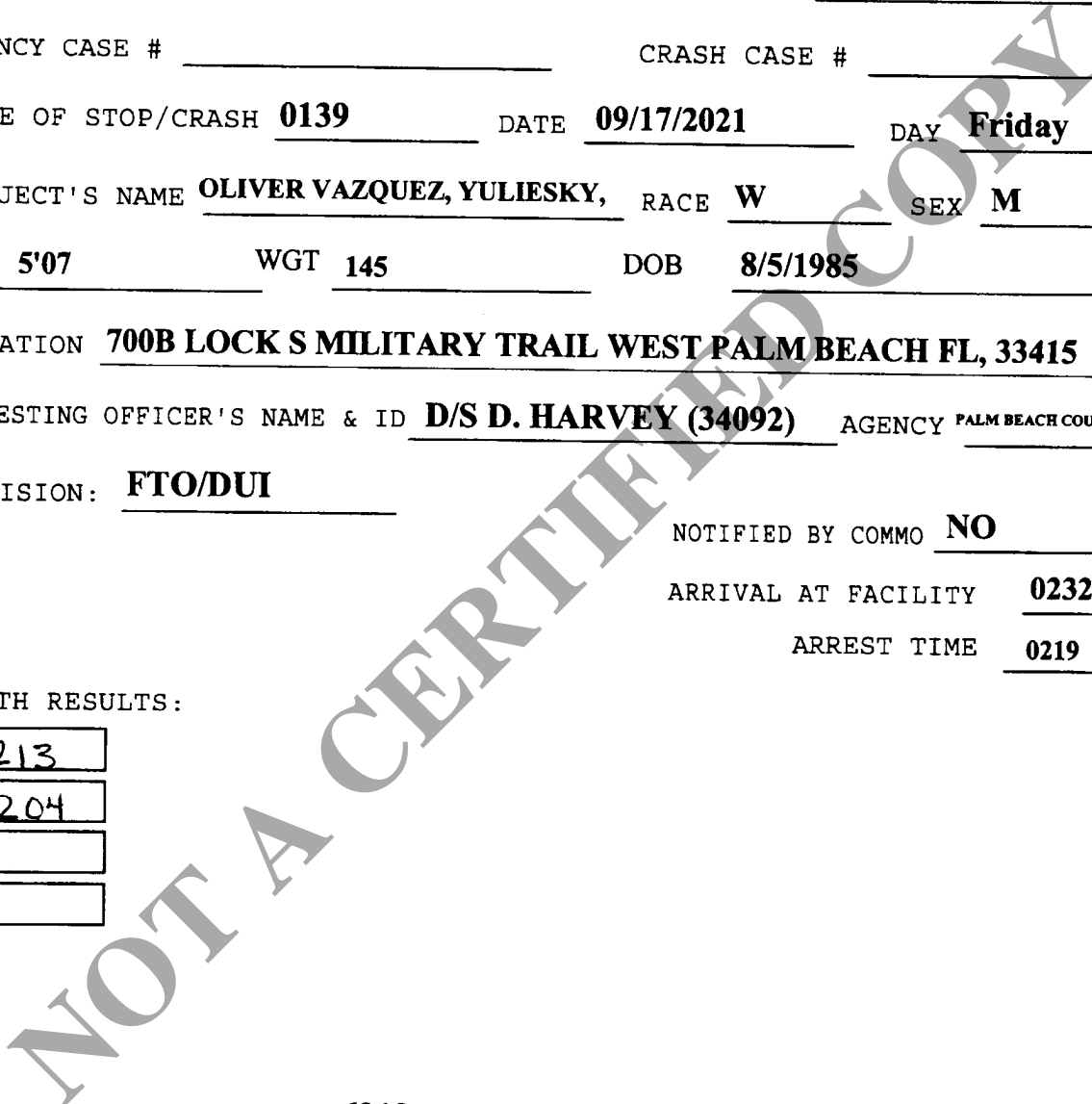
ARRIVAL AT FACILITY 0232

ARREST TIME 0219

BREATH RESULTS:

- 1) .213
- 2) .204
- 3) _____
- 4) _____

TESTING OFFICER'S ID 6212 PBSO VIDEOTAPE # /



WITNESS LIST

CASE NUMBER: 21107449

ARRESTING OFFICER: D/S D. HARVEY

ADDRESS: 3228 GUN CLUB ROAD WEST PALM BEACH FL 33406

PHONE NUMBERS (HOME): _____ (WORK) 561 688 3400

CAN TESTIFY TO: FACTS OF CASE AND DUI INVESTIGATION

NAME: INV. A. TEJEDA

ADDRESS: 3228 GUN CLUB ROAD WEST PALM BEACH FL 33406

PHONE NUMBERS (HOME) _____ (WORK) 561 688 3400

CAN TESTIFY TO: BACK UP DEPUTY, FIELD TRAINING OFFICER

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) 0

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

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CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NOT A CERTIFIED COPY

TESTING FACILITY TASK REPORT

AGENCY: PBSO D/S HARVEY #34092

SUBJECT: OLIVER VAZQUEZ, YULIESKY

CASE NUMBER: 21-107449

DATE: 09-17-21

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 03:08 HRS

ENDING TIME: 03:20 HRS

BREATH TESTS RESULTS: 1) .213 TIME 03:14 A.M. P.M. 2) .204 TIME 03:17 A.M. P.M.
3) TIME A.M. P.M. 4) TIME A.M. P.M.

BREATH OPERATOR: S.O'NEAL #6212

MAINTENANCE TECHNICAN: J. KARLECKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SPANISH SPEAKING TRANSLATION DONE BY D/S BERMUDEZ #36176

ATTITUDE: CALM, QUIET, COOPERATIVE, MOODSWINGS, EMOTIONAL, CRYING

CLOTHING: SHIRT- WHITE/PRINT SHORTS- GRAY

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

EYES: BLOODSHOT, GLASSY, WATERY FROM CRYING
ODOR OF UNKNOWN ALCOHOLIC BEVERAGE.

COMMENTS:

20 MIN. OBSERVATION CONDUCTED BY A/O HARVEY #34092
TRANSLATION DONE BY D/S BERMUDEZ #36176
BREATH TEST REQUESTED IN SPANISH.
D SUBMITTED TO THE BREATH REQUEST.
BREATH INSTRUCTIONS EXPLAINED IN SPANISH.
D COMPLETED THE TEST CORRECTLY.
C/W READ ON CAMERA IN SPANISH.
BREATH RESULTS EXPLAINED IN SPANISH.
NO Q&A, TRANSLATING DEPUTY HAD TO LEAVE.

**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: 80-006477 Software: 8100.27
Date of Test: 09/17/2021

Date of Last Agency Inspection: 09/10/2021
Observation Period Began: 02:32
Subject's Name: YULIESKY OLIVER VAZQUEZ DOB: 08/05/1985 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	03:12
	Air Blank	0.000	03:12
	Control Test	0.079	03:13
	Air Blank	0.000	03:13
	Subject Sample #1	0.213	03:14
	Air Blank	0.000	03:14
	Air Blank	0.000	03:16
	Subject Sample #2	0.204	03:17
	Air Blank	0.000	03:17
	Control Test	0.079	03:18
	Air Blank	0.000	03:18
	Diagnostics Check	OK	03:18

Cylinder Lot: 02021080A1
Exp: 03/05/2023

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 SHARI L O'NEAL, 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: _____ Date: 09-17-21
Signature

Sworn to (or affirmed) before me this 17 day of September, 2021

Signature of Notary Public-State of Florida [Signature] Printed Name of Notary Public-State of Florida DIS Harvey #34092

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: 2021023223	Date: 9/17/2021
	Specialist Name/ID: J. Beck/9007