22CT9234 NB

ARREST / NOTICE TO APPEAR

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

1 JUVENILE

ADMINISTRATION

OBTS Number

Agency ORI Number: 0502600

Agency Name: Palm Beach Gardens Police Department

Agency Report Number (N.T.A.'s only): 7 | 8 | 22-002845

Charge Type: Check as many as apply. ☐ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

If Weapon Seized — Enter Type: UNARMED

Multiple Clearance Indicator

Location of Arrest (Including Name of Business): , 5343 NORTHLAKE BLVD, PALM BEACH GARDENS, FL 33418

Location of Offense (Business Name, Address): 5343 NORTHLAKE BLVD, PALM BEACH GARDENS, FL 33418

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
06/09/2022	03:01					

DEFENDANT

Name (Last, First, Middle): SMITH, ADAM MICHAEL

Alias (Name, DOB, Soc. Sec. #, Etc.): Alias:

Race (W - White, B - Black, I - American Indian, O - Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	M	02/27/1975	5'11	200	BROWN	BROWN	LIGHT	Large

Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description):

Marital Status: S

Religion:

Indication of: Alcohol Influence ☒ Yes ☐ No ☐ Unk. Drug Influence ☐ Yes ☐ No ☒ Unk.

Local Address (Street, Apt. Number) (City) (State) (Zip): 12678 MARIBOU CIR, ORLANDO, FL 32828

Phone: (407) 252-0010

Residence Type: 1. City 2. County 3. Florida 4. Out of State: 3

Permanent Address (Street, Apt. Number) (City) (State) (Zip): 12678 MARIBOU CIR, ORLANDO, FL 32828

Phone: (407) 252-0010

Address Source: VERBAL

Business Address (Name, Street) (City) (State) (Zip): CAST AWAYS,

Phone:

Occupation: Bartender

D/L Number, State: S530013750670 / FL

[redacted]

INS Number:

Place of Birth (City, State): BROCKTON, MA,

Citizenship: US

CO-DEFENDANT

Co-Defendant Name (Last, First, Middle) | Race | Sex | Date of Birth | ☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile

Co-Defendant Name (Last, First, Middle) | Race | Sex | Date of Birth | ☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile

JUVENILE

☐ Parent ☐ Other: ☐ Legal Custodian

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 Department and Released 2. TOT JAC 3. Incarcerated

Released To: (Name) | Relationship | Date | Time

The above address was provided by ☐ defendant and/or ☐ defendant's parents.
The child and/or parent was told to keep the Juvenile Court Clerk's Office (Phone 355-2526) informed of any change of address.

School Attended | Grade

☐ Yes, by: ☐ No:

Property Crime? ☐ Yes ☒ No | Description of Property | Value of Property

CODE

Drug Activity: N. N/A P. Possess S. Self B. Buy T. Traffic R. Smuggle D. Deliver E. Use K. Disperses/ Distribute M. Manufacture/ Produce/ Cultivate Z. Other

Drug Type: N. N/A A. Amphetamine B. Barbiturate C. Cocaine E. Heroin H. Hallucinogen M. Marijuana O. Opium/Deriv. P. Paraphernalia/ Equipment S. Synthetic U. Unknown Z. Other

CHARGE 1

Charge Description: DUI - REFUSAL TO SUBMIT WITH A PRIOR REFUSAL

Statute Violation Number: 316.1939(1)

Violation of ORD #:

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
	N	/		1	☐ Y ☒ N		

CHARGE 2

Charge Description: DUI - NORMAL FACULTIES IMPAIRED

Statute Violation Number: 316.193(1)(A)

Violation of ORD #:

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
	N	/		1	☐ Y ☒ N		

CHARGE 3

Charge Description:

Statute Violation Number:

Violation of ORD #:

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
		/			☐ Y ☐ N		

INTAKE

Health / Apparent Physical Condition of Defendant:

Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries
Explain:

Check which applies: ☐ Released O.R. ☐ Released to Parent/Guardian ☐ T.O.T. County Jail ☐ Posted Bond ☐ South County Mental Health

PROPERTY - Received By | Released By | Released To

Transported By | Date Transported | Time Transported | Other

NOTICE TO APPEAR

☒ INSTRUCTION NO. 1 - Mandatory appearance in court
☐ INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.

Location (Court, Room): North County PALM BEACH GARD

Court Date and Time: 07/13/2022 10:00:00

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 COMTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.

Signature of Defendant (or Juvenile and Parent/Custodian) | Date Signed

2022 JUN -9 AM 8:08 CLERK OF CIRCUIT COURT PALM BEACH COUNTY FLORIDA

No Photo Available

ADMIN

HOLD for Other Agency

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other

Signature of Arresting Officer: 514

Name of Arresting Officer (Print): FLINK, A. S. | I.D. #: 514

Name Verification (Printed by Arrestee) (PRINT)

Witness here if subject signed with an "X".

Intake Deputy: Bonilla I.D. #: 18342 Pouch #

Transporting Officer: Flink I.D. #: 514 Agency: PBGPD

PAGE 1 OF 2

0532159

SCANNED JUN 09 2022 1679

PROBABLE CAUSE AFFIDAVIT

ADMIN

OBTS Number		1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias	1	JUVENILE

Agency ORI Number	Agency Name	Agency Report Number
FL FL0502600	Palm Beach Gardens Police Department	7 | 8 | 22-002845

Charge Type: Check as many as apply. ☐ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
SMITH, ADAM MICHAEL		W	M	02/27/1975

CHARGES

Charge Description	Charge Description
316.193(1)(A) DUI - NORMAL FACULTIES IMPAIRED	316.1939(1) REFUSAL TO SUBMIT WITH A PRIOR REFSL
Charge Description	Charge Description

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
State Of Florida			

Local Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Address Source

Business Address (Name, Street)	(City)	(State)	(Zip)	Phone	Occupation

PROBABLE CAUSE STATEMENT

The undersigned certifies and swears that he/she has just and resonable 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.

☐ was observed by _____ who told _____ that he/she saw the arrested person committ the below acts.

☐ confessed to _____ admitting to the below facts.

☒ was found to have committed the below acts, resulting from my (described) investigation.

On the 9 day of June, 2022 at 03:16 (Specifically include facts constituting cause for arrest.)

On 06/09/2022 at approximately 0316 hours, this Officer arrived in the area of 5343 Northlake Blvd, PBG, FL, to assist a Florida Fish and Wildlife Conservation Commission Officer on a traffic stop. Body worn camera and in car video were used.

FWC Ofc Harris P220, said he was working an off-duty traffic detail for construction work in the east bound lanes of Northlake Blvd, just east of the location, when he observed a reckless driver approaching. Ofc Harris further advised he heard a vehicle breaking traction and observed same driving through a closed lane, which was marked closed by multiple traffic cones being posted on same. Ofc Harris then said the vehicle crossed over a raised concrete median and traveled west bound on Northlake Blvd. Ofc Harris was able to stop the vehicle, a red Ford pick-up truck (ID86AC/FL) at the location. See Ofc Harris`s supplement for further information and details of the initial encounter.

This Officer observed the driver, identifed via Florida Driver License photo, Adam Smith (OF) leaning against the right rear of the vehicle. This Officer made contact with Smith and only asked him where he resided, to which he confirmed was the same address on his license. Smith further offered that he works at "Castaways". Smith appeared very unsteady on his feet, had watery eyes, low droopy eyelids and very thick slurred speech almost to the extent of being unintelligible. This Officer was also able to detect the overpowering, obvious odor of an unknown alcoholic beverage emanating from Smith`s breath at conversational distance. This odor increased as Smith spoke with this Officer.

Based on this Officer`s observations, Smith was asked to participate in Standardized Field Sobriety Exercises, to which he said his lawyer advised against same. This Officer advised and explained Taylor Warnings to Smith, to which he acknowledged and again refused to participate in exercises. Smith was immediately placed under arrest at

ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

CESARK, KIM #290
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

06/09/2022
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

FLINK, ANDREW S (514)
NAME OF OFFICER (PLEASE PRINT)

06/09/2022
DATE

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O.

ADMIN

OBTS Number	PROBABLE CAUSE AFFIDAVIT SUPPLEMENT	1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias	1	JUVENILE

Agency ORI Number	Agency Name	Agency Report Number
FL FL0502600	Palm Beach Gardens Police Department	7 | 8 | 22-002845

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Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
SMITH, ADAM MICHAEL		W	M	02/27/1975

PROBABLE CAUSE STATEMENT

0321 hours.

On the roadside, this Officer requested Smith to provide a breath sample for the purpose of determining its alcohol content, to which he requested counsel. This Officer read updated Florida Implied Consent, via Florida DOT cards, to Smith, twice, to which he again requested counsel. This Officer advised Smith the request for counsel was being taken as a refusal. The refusal was noted at 0332 hours. It should be noted, Smith has a prior sobriety test refusal dated 02/09/2012 in Orange County, FL. Smith also has a prior DUI conviction dated 08/29/2002 also in Orange County, FL.

Based on the results of the investigation and the totality of the circumstances, this Officer has probable cause to prove Adam Smith operated a motor vehicle, in the state of Florida, while under the influence, in violation of FSS 316.193(1)(A). Smith also refused to submit to a sobriety test required by law, with a prior refusal, in violation of FSS 316.1939(1).

ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

CESARK, KIM #290
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

06/09/2022
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

FLINK, ANDREW S (514)
NAME OF OFFICER (PLEASE PRINT)

06/09/2022
DATE

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O.

22002845

STATE OF FLORIDA
AFFIDAVIT OF REFUSAL TO SUBMIT TO
BREATH TEST

I, A. FLINK, a duly certified Law Enforcement or Correctional Officer, am a
(Name of Officer reading Implied Consent Warning)

member of PALM BEACH GARDENS POLICE DEPARTMENT, and I do swear
(Name of Law Enforcement Agency)

or affirm that on or about the 9TH day of JUNE, 2022, at 03:01 ☐P.M. ☑A.M.

DRIVER ADAM MICHAEL SMITH,
FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL # S530013750670, state of FL, was placed under lawful arrest for

the offense of DRIVING UNDER THE INFLUENCE by A. FLINK and
(Name of Arresting Officer)

issued citation # AGERY9E.

That on or about the 9TH day of JUNE, 2022, at 0332 ☐P.M. ☑A.M.

in PALM BEACH County,

I requested that the driver submit to a **BREATH** test for the purpose of determining its alcohol content. I informed the driver that the refusal to submit to such test 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, or if he or she had been previously fined under s. 327.35215, F.S., 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, or if he or she has been previously fined under s. 327.35215, F.S., for refusal to submit to a lawful test of his or her breath, urine, or blood. Nonetheless, the driver refused to submit to the test requested.

Signature of Law Enforcement Officer or Correctional Officer

THE AFFIDAVIT MUST BE NOTARIZED OR ATTESTED TO (s. 117.10, F.S.)

The foregoing instrument was sworn and subscribed before me:

Signature of Attesting Officer CESARK290

Title SERGEANT

Date 06/09/2022

(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before me this 9TH day of JUNE, 20 22, by A. FLINK, who is personally known to me or who has produced _____ as identification.

Notary Public _____

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.

EFFECTIVE OCTOBER 1, 2021

PALM BEACH GARDENS POLICE DEPARTMENT
DUI TESTING FACILITY INFORMATION SHEET

PBSO Case #: _____ PBSO Zone: 3-13

Agency Case #: 22002845 Crash Case #: _____

Incident Information:

Time of Stop/Crash: 0300 Date of Incident: 06/09/2022 Day: THURSDAY

Location of Incident: 5343 NORTHLAKE BLVD, PBG , FL, 33410

Arrest Information:

Time of Arrest: 03:01 Date of Arrest: 06/09/2022 Day: THURSDAY

Location of Arrest: 5343 NORTHLAKE BLVD, PBG , FL, 33410

Subject's Name: (L) SMITH, (F) ADAM, (M) MICHAEL

DOB: 02/27/1975 Race: W Sex: M Height: 5'11 Weight: 200 Hair BRO Eye BRO

Address: 12678 MARIBOU CIR, ORLANDO, FL 32828 Phone: _____

Arresting Officer's Name: A. FLINK ID#: 514

Agency: PBGPD Division: TRAFFIC UNIT

Breath Results

1) _____ at _____ hrs.
2) _____ at _____ hrs.
3) _____ at _____ hrs.
4) _____ at _____ hrs.

---BAT Use---

BAT Notified: NO

Arrival Time at BAT: N/A

Subject Arrest Time: 03:01

Breath Test Operator: N/A
PBSO

SUBJECT: SMITH, Adam 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 determining the presence of chemical or controlled substances.

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

I am OFC FLINK of the PBGRD

If you refuse to take the test I have requested of you, your driving privilege will be suspended for a period of one (1) year for a FIRST REFUSAL, or eighteen (18) months if your driving privilege has been PREVIOUSLY SUSPENDED, or if you have been PREVIOUSLY FINED under s. 327.35215, for refusing to submit to a lawful test of your breath, urine, or blood. Additionally, if you refuse to take the test I have requested of you, and if your driving privilege has been previously suspended, or if you have been previously fined under s. 327.35215, for a refusal to submit to a lawful test of your ***breath, urine*** or blood, you will be committing a misdemeanor, in addition to any other penalties which can be imposed by law.

Refusal to submit to the test I have requested is admissible into evidence in any criminal proceeding.

Do you understand what I have just read to you? YES <or> NO Do you still refuse to submit to this test? YES <or> NO

NOTE: IF THE SUBJECT POSSESSES A COMMERCIAL DRIVER'S LICENSE (CDL), READ THE FOLLOWING,

If you are a Commercial Driver License (CDL) holder or were driving a Commercial Motor Vehicle (CMV), your refusal to submit to testing will result in the loss of your commercial driving privilege for a period of one year from today. If this is your SECOND REFUSAL, you will be permanently disqualified from holding a CDL or operating a CMV.

Do you understand what I have just read to you? YES <or> NO Do you still refuse to submit to this test? YES <or> NO

SUBJECTS 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) Not Read on camera

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

SUBJECT: Smith, Adam 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: Ofc Flink 5141

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

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	☐	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	☐	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	☐	119.071(4)(c)	Undercover personnel.	
	☐	119.071(2)(f)	Confidential informants (CIs).	
	☐	119.071(2)(e)	Confession.	
Public Info. Exemptions	☐	985.04(1)	Juvenile offender records.	
	☐	119.071(h)(i)	Assets of a crime victim.	
	☐	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	☐	394.4615(7)	Mental health information.	
	☐	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)	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	☐	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	☐			
	☐			
	☐			
	☐			
	☐			
Other	☐		Other:	
	☐		Other:	

REVIEW COMPLETED BY

Booking Number: 2022014848	**Date:** 06/09/2022
	Specialist Name/ID: T.Howard/7185