0286798 22CT12911NB 3934

ARREST / NOTICE TO APPEAR

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

1 JUVENILE

ADMINISTRATION

OBTS Number

Agency ORI Number: 0501700 | Agency Name: Jupiter Police Department | Agency Report Number (N.T.A.'s only): 5 | 4 | 22-003016

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

If Weapon Seized: Enter Type: UNARMED | Multiple Clearance Indicator

Location of Arrest (Including Name of Business): 1699 S CENTRAL BLVD/INDIAN CREEK DR JUPI

Location of Offense (Business Name, Address): 1699 S CENTRAL BLVD/INDIAN CREEK DR E, JUPITER, FL

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
08/05/2022	22:00					

DEFENDANT

Name (Last, First, Middle): DWYER, BARBARA LORI

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	F	11/02/1968	4'11	117	GRN	BLONDE /	FAIR	SMALL

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

Marital Status:

Religion: OTHER

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

Local Address (Street, Apt. Number) (City) (State) (Zip): 304 TIMBERWALK TRL, JUPITER, FL 33458

Phone: (561) 308-1446

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

Permanent Address (Street, Apt. Number) (City) (State) (Zip): 304 TIMBERWALK TRL, JUPITER, FL 33458

Phone: (561) 308-1446

Address Source: FL DL

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

Phone:

Occupation: Hair Dresser

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
D600072689020 / FL	[redacted]		NEW YORK, NY, United	US

CO-DEF

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.
☐ Yes, by: ☐ No:

School Attended | Grade

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

CODE

Drug Activity: N. N/A P. Possess S. Sell 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

Charge Description	Statute Violation Number	Violation of ORD #
DUI - DAMAGE TO PERSON/PROPERTY	316.193(3)(C)(1)	

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

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #

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

CHARGE

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: 09/07/2022 08:30:00

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.

X Barbara Dwyer — Signature of Defendant (or Juvenile and Parent/Custodian)

X Aug 6 2022 — Date Signed

No Photo Available

ADMIN

HOLD for Other Agency

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other

Signature of Arresting Officer:

Name of Arresting Officer (Print): FANDREY, CHRISTOPHER I.D. #: 1182

Intake Deputy I.D. # Pouch #

Transporting Officer C Fandrey I.D. # 1182 Agency JPD

Name Verification (Printed by Arrestee) (PRINT) Barbara Dwyer

Witness here if subject signed with an "X".

PAGE 1 OF 1

☐ COURT ☐ STATE ATTORNEY ☐ AGENCY ☒ CENTRAL RECORDS ☒ JAIL ☐ CRIME ANALYSIS ☒ PRO ☒ DEFENDANT

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 0501700	JUPITER POLICE DEPARTMENT	5 | 4 | 22-003016

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
DWYER, BARBARA LORI		W	F	11/02/1968

CHARGES

Charge Description	Charge Description
316.193(3)(C)(1) DUI - DAMAGE TO PERSON/PROPERTY	
Charge Description	Charge Description

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
PETROSKA, KIMBERLY ANN	W	F	07/01/1967

Local Address (Street, Apt. Number) (City) (State) (Zip)	Phone	Address Source
1527 LANCE RD, JUPITER, FL 33469	(612) 239-8548	
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.

☐ confessed to _____ admitting to the below facts.

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

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

On the 5 day of August, 2022 at 22:00 (Specifically include facts constituting cause for arrest.)

On 8/5/2022 at approximately 2126hrs I was dispatched to a traffic crash in the area of Indian Creek Dr E and S Central Blvd, Jupiter, Palm Beach County, Florida. Upon arrival I observed two vehicles on the side of the roadway. I made contact with Officer Robichaud who advised there were no reports of injuries and explained which two vehicles were involved.

I made contact with the driver of V1 who was identified as WF Barbara L. Dwyer (11/2/1968). Dwyer had red bloodshot glassy eyes and the odor of an unknown alcoholic beverage coming from her person. Dwyer had thick slurred speech and immediately made comments about not being able to complete Roadside Tasks and having inner ear trouble.

After completing the traffic crash investigation I found Dwyer to be at fault for the crash. Dwyer was read her Miranda Warnings from a preprinted card and stated that she understood her rights. Dwyer stated she was coming from the golf course visiting a friend and repeated that she was unable to do SFSTs because her inner ear trouble. Dwyer denied consuming any alcohol today and eventually admitted to having one Smirnoff today. Dwyer was repetitive and continued to state she had inner ear issues and wasn`t able to do roadside tasks.

Based upon my entire investigation up to this point including the crash, observations of Dwyer, and statements made by Dwyer, I asked her to perform Standardized Field Sobriety Tasks (SFSTs). Dwyer stated she was unable to perform SFSTs and I tried to explain to her that there were other tasks and that Dwyer was placing a blanket statement on being unable to do all tasks. Dwyer continued to state she was unable to do the tasks. Dwyer was explained her refusal to complete the tasks could be used against her in court and her refusal would be forcing me to make a decision based upon my investigation up to this point. Dwyer stated she would fail the tasks if she tried and continued to refuse to complete any tasks.

ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

Notary 1009

NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

08/05/2022
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

FANDREY, CHRISTOPHER (1182)
NAME OF OFFICER (PLEASE PRINT)

08/05/2022
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 0501700	JUPITER POLICE DEPARTMENT	5 4 22-003016

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
DWYER, BARBARA LORI		W	F	11/02/1968

PROBABLE CAUSE STATEMENT

Based upon the totality of circumstances Dwyer was placed under arrest for DUI Property Damage. Dwyer was placed into handcuffs which were double locked and checked for spacing. Per PBSOs Jail Policy, Dwyer was medically cleared at Jupiter Medical Center for being involved in a crash. After being medically cleared, Dwyer was asked to provide a lawful sample of her breath and she refused. Dwyer was read implied consent from a preprinted card and again refused a lawful sample of her breath. Dwyer was later transported to the Palm Beach County Jail and turned over to the booking staff without incident.

ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

[signature] 1009

NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

08/05/2022

DATE

[signature]

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

FANDREY, CHRISTOPHER (1182)

NAME OF OFFICER (PLEASE PRINT)

08/05/2022

DATE

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

22-003016

STATE OF FLORIDA
AFFIDAVIT OF REFUSAL TO SUBMIT TO
BREATH TEST

I, C Fandrey, a duly certified Law Enforcement or Correctional Officer, am a
(Name of Officer reading Implied Consent Warning)

member of Jupiter Police Department, and I do swear
(Name of Law Enforcement Agency)

or affirm that on or about the 5 day of August, 20 22, at 2200 ☑P.M. ☐A.M.

DRIVER Barbara L Dwyer,
FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL # D600072689020, state of Florida, was placed under lawful arrest for

the offense of DUI Property Damage by C Fandrey and
(Name of Arresting Officer)

issued citation # ADB9IFE.

That on or about the 5 day of August, 20 22, at 2305 ☑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

(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before me this 5 day of August, 20 22, by Officer C Fandrey 1182, who is personally known to me or who has produced Personally Known as identification.

Notary Public

Title Police Officer

Date 8/5/2022

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

WITNESS LIST

CASE NUMBER: 22-003016

ARRESTING OFFICER: C Fandrey
ADDRESS: 196 Military Trl. Jupiter, FL 33458
PHONE NUMBERS (HOME): (WORK) (561) 746-6201
CAN TESTIFY TO: PC

NAME: Ofc. Robichaud
ADDRESS: 196 Military Trl. Jupiter, FL 33458
PHONE NUMBERS (HOME) (WORK) (561) 746-6201
CAN TESTIFY TO: On scene

NAME: Ofc. Matonti
ADDRESS 196 Military Trl, Jupiter, FL 33458
PHONE NUMBERS (HOME) (WORK) (561) 746-6201
CAN TESTIFY TO: On scene

NAME: Kimberly A. Petroska
ADDRESS 1527 Lane Rd Jupiter FL 33469
PHONE NUMBERS (HOME) 612 239 8548 (WORK)
CAN TESTIFY TO:

NAME:
ADDRESS
PHONE NUMBERS (HOME) (WORK)
CAN TESTIFY TO:

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ADDRESS
PHONE NUMBERS (HOME) (WORK)
CAN TESTIFY TO:

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

PBSO CASE # _____ PBSO ZONE _____

AGENCY CASE # 22-003016 CRASH CASE # 22-003016

TIME OF STOP/CRASH 2126 DATE 08/05/2022 DAY Friday

SUBJECT'S NAME Dwyer (LAST) Barbara (FIRST) L (MID) RACE White SEX Female

HGT 411 WGT 117 DOB 11/02/1968

LOCATION S Central Blvd/Indian Creek Drive E

ARRESTING OFFICER'S NAME & ID C Fandrey 1182 AGENCY Jupiter

DIVISION: Traffic

NOTIFIED BY COMMO No

ARRIVAL AT FACILITY NA

ARREST TIME 2200

BREATH RESULTS:

1) Refused
2) Refused
3)
4)

TESTING OFFICER'S ID NA PBSO VIDEOTAPE # NA

SUBJECT: **Dwyer, Barbara L** CASE NUMBER: **22-003016**

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 o chemical or controlled substances.

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

I am **C Fandrey** of the **Jupiter Police Department**

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.

SUBJECT'S SIGNATURE: **Read on Camea** **Dwyer, Barbara L**

CONSTITUTIONAL WARNINGS

I AM REQUIRED TO WARN YOU BEFORE YOU MAKE ANY STATEMENTS THAT YOU HAVE THE FOLLOWING RIGHTS:

You have the right to remain silent and not answer any questions.

Any statement must be freely and voluntarily given.

You have the right to the presence of a lawyer of your choice before you make any statement and during any questioning.

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.

If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent.

I can make no threats or promises to induce you to make a statement. This must be of your own free will.

Any statement can and will be used against you in a court of law.

SUSPECT'S SIGNATURE: **Dwyer, Barbara L**

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: 2022020242	**Date:** 08/06/22
	Specialist Name/ID: T.Howard/7185