0536878 22CT21355N3

ARREST / NOTICE TO APPEAR

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

ADMINISTRATION

OBTS Number			1 JUVENILE
Agency ORI Number: 0501700	Agency Name: Jupiter Police Department	Agency Report Number (N.T.A.'s only): 5 4 22-004877	

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)	Location of Offense (Business Name, Address)
7699 W INDIANTOWN RD/FLORIDAS TPKE, Jupiter, FL, 33478	7699 W INDIANTOWN RD/FLORIDAS TPKE, JUPITER, FL, 33478

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
12/22/2022	01:38	12/22/2022	01:48			EAST COAST TOWING

DEFENDANT

Name (Last, First, Middle): DAVIS, JASON MARTIN

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	12/23/1983	6'04	240	HAZEL	BALD	LIGHT	Large

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

Marital Status:

Religion: UNKNOWN

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

Local Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Residence Type: 1. City 2. County 3. Florida 4. Out of State
347 COUNTRY CLUB DR, TEQUESTA, FL 33469					2
Permanent Address (Street, Apt. Number)	**(City)**	**(State)**	**(Zip)**	**Phone**	**Address Source**
347 COUNTRY CLUB DR, TEQUESTA, FL 33469					
Business Address (Name, Street)	**(City)**	**(State)**	**(Zip)**	**Phone**	**Occupation**

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
D120433834630 / FL	[redacted]		MILWAUKEE, WI,	USA

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): 1-O.R- (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 - NORMAL FACULTIES IMPAIRED	316.193(1)(A)	

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: 01/31/2023 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.

No Photo Available

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

ADMIN

HOLD for Other Agency: ☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other

Signature of Arresting Officer:

Name of Arresting Officer (Print): PICARD, RONNIE I.D. #: 1240

Name Verification (Printed by Arrestee) (PRINT):

Intake Deputy: TK I.D. #: 9303 Pouch #: 786

Transporting Officer: PICARD I.D. #: 1240 Agency: JUPITE

Witness here if subject signed with an "X".

☒ COURT ☒ STATE ATTORNEY ☐ AGENCY ☐ CENTRAL RECORDS ☐ JAIL ☐ CRIME ANALYSIS ☐ P.I.O. ☐ DEFENDANT

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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 | 22-004877

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

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
DAVIS, JASON MARTIN		W	M	12/23/1983

CHARGES

Charge Description	Charge Description
316.193(1)(A) DUI - NORMAL FACULTIES IMPAIRED	
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.

☐ 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 22 day of December, 2022 at 03:12 (Specifically include facts constituting cause for arrest.)

At approximately 01:10 hours on 12/22/2022, I was conducting patrol while traveling southbound on North Central Blvd in the Town of Jupiter, Palm Beach County, FL. I observed a Chevy Truck bearing Fl tag Y86EUY driving southbound on North Central Blvd in front of my patrol vehicle. The aforementioned vehicle did not stop for the red light before turning right onto to S.R. 706 (W Indiantown Rd). The vehicle began traveling westbound and made a lane change from the middle lane to the inside lane while traveling on S.R. 706 (W Indiantown Rd). While making the lane change the vehicle`s left turn signal was activated and it took and an unusual amount of time to make the lane change. The vehicle drove approximately 400 feet with the dashed line in the middle of the vehicle, it then vacated the middle lane completely and continued traveling in the inside lane. I then conducted a traffic stop at S.R. 706 (W Indiantown Rd) and Florida Turnpike.

I made contact with the driver and later found to be the offender, Jason Martin Davis; W/M; 12/23/1983. When I asked Davis to provide his license, registration, and insurance he took an unusual amount of time. Davis attempted to give me his registration that expired in 2011 after he already provided me with his current registration. I had to remind Davis I still needed his insurance once it was apparent he was no longer looking for it. While I was at the driver`s side window I smelled an odor of an unknown alcoholic beverage coming from the vehicle. I asked Davis to step out of the vehicle. While Davis was walking to the back of his vehicle he was unsteady on his feet and his legs were shaking. I began asking Davis questions and it was at this time I could smell the odor of an unknown alcoholic beverage coming from Davis`s breath. Davis denied drinking or taking any drugs tonight. I asked Davis to consent to Standardized Field Sobriety Tasks so I know he could safely drive tonight. Davis consented to perform the Standardized Field Sobriety Tasks.

As a result of the Standardized Field Sobriety Tasks, Davis gave me many clues that

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

1238

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

12/22/22

DATE

1240

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

PICARD, RONNIE (1240)

NAME OF OFFICER (PLEASE PRINT)

12/22/2022

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 | 22-004877

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
DAVIS, JASON MARTIN		W	M	12/23/1983

PROBABLE CAUSE STATEMENT

indicated impairment (see DUI probable cause affidavit).

After placing Davis under arrest, I requested at roadside that he provide a lawful sample of his breath for the purpose of determining the alcohol content. Davis refused. I advised Davis of Implied Consent, and when I asked again Davis immediately refused a second time at 01:46 hours.

As a result of the above investigation, Davis was charged for driving under the influence pursuant to Florida State Statute 316.193(1)(A).

Davis was transported to The Jupiter Police Department for booking and processing. He was then transported to Palm Beach County Jail without incident.

The above incident was captured on BWC.

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

1238

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

12/22/22

DATE

1240

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

PICARD, RONNIE (1240)

NAME OF OFFICER (PLEASE PRINT)

12/22/2022

DATE

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

22-004877

STATE OF FLORIDA
AFFIDAVIT OF REFUSAL TO SUBMIT TO
BREATH TEST

I, **Officer Picard**, 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 **22** day of **December**, 20**22**, at **01:38** ☐P.M. ☑A.M.

DRIVER **Jason** **Martin** **Davis**,
FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL # **D-120-433-83-463-0**, state of **Florida**, was placed under lawful arrest for

the offense of **DUI** by **Officer Picard** and
(Name of Arresting Officer)

issued citation # **ADB9KCE**.

That on or about the **22** day of **December**, 20**22**, at **01:46** ☐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.

1240
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

Title

Date

(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before me this **22** day of **December**, 20**22**, by **Officer R. Picard 1240**, who is personally known to me or who has produced **Personally Known** 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.

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EFFECTIVE OCTOBER 1, 2021

WITNESS LIST

CASE NUMBER: 22-004877

ARRESTING OFFICER: R. Picard

ADDRESS: 196 Military Trl. Jupiter, FL 33458

PHONE NUMBERS (HOME): _____ (WORK) (561) 746-6201

CAN TESTIFY TO: PC

NAME: _____

ADDRESS: _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

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PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

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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:	

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REVIEW COMPLETED BY

Booking Number: 2022032962	**Date:** 12/23/2022
	Specialist Name/ID: T.Howard/7185