0154110 22CT12219MB 2871

☐ Marsy's Law CVI FL Const. Art.1 § 16(b)

ARREST/NOTICE TO APPEAR
Juvenile Referral Report

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

ADMINISTRATIVE

OBTS Number:

Agency ORI Number: FLO 500000 | Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE | Agency Report Number: 06- 22092217

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

Weapon Seized / Type (1. Yes 2. No): 2 | Multiple Clearance Indicator: 1

Location of Arrest (Including Name of Business): B ROAD AND STATEROAD 80 Loxahatchee, FL 33470

Location of Offense (Business Name, Address): B ROAD AND STATEROAD 80 Loxahatchee, FL 33470

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
07/27/22	1457					

DEFENDANT

Name (Last) (First) (Middle): Melchiori, Joseph, Eugene | Alias (Name, DOB, Soc. Sec. #, Etc.):

Race (W - White I - American Indian B - Black O - Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	M	11/21/1972	5'07 5'09	180	Brown	Brown	Light	Med

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

Marital Status: Single | Religion: None | Indication of: Alcohol Influence / Drug Influence (Y N Unk.)

Local Address (Street, Apt. Number) (City) (State) (Zip): 5840 205th Dr N Loxahatchee, FL 33470 | Phone: (561)7624483 | Residence Type (1. City 2. County 3. Florida 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: NONE

D/L Number, State: M426485724210, FL | Soc. Sec. Number: [redacted] | INS Number: | Place of Birth (City, State): PBC, FL | Citizenship: 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

JUVENILE

☐ Parent ☐ Legal ☐ Other: (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 ☐ defendant and / or ☐ 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. ☐ Yes, by: (Name) ☐ No: (Reason) | 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. Dispense/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. Synthetics U. Unknown Z. Other

CHARGE (1)

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
D.U.I.	1	☐Y ☒N	316.193(1)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
N	N	N/A	22092217		

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

NOTICE TO APPEAR

Location (Court, Room Number, Address): Criminal Justice Complex - 3228 Gun Club Road, West Palm Beach FL. 33406

Court Date and Time: Month AUGUST Day 8TH Year 2022 Time 0830 AM ☒ 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: 07/27/22

ADMIN

HOLD for other Agency Name: | Signature of Arresting Officer: x | Name Verification (Printed by Arrestee) (PRINT)

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other: | Arresting Officer (Print): Jose A. Claudio | I.D. #: 7022

Intake Deputy | I.D. # | Pouch # | Transporting Officer: D/S OROZCO | ID #: 8057 | Agency: PBSO | Witness here if subject signed with an -X"

PAGE 1 of 2

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

PBSO #0148 REV. 04/22

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 27 DAY OF July 20 ____, AT 1432 AM PM

SUBJECT: MELCHIORI, JOSEPH, UGENE III CASE NUMBER: 22092217

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: Jose A Claudio 7022

PERSONAL CONTACT

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

On Wednesday July 27, 2022 at 1432 hours I was patrolling southbound on B Rd approaching the intersection of Southern Blvd. when I heard a loud noise and then saw up in front of me that a gray GMC pickup had turned into the northbound lane of B Rd and struck a white Dodge pickup that was first in line awaiting the traffic light to change. Both vehicles remained motionless.

As I approached the gray pick up on foot to investigate, from my training and experience I could see that the driver of the gray pickup was obviously impaired. His eyes were blood shot and glossy, his speech was slurred and a heavy odor alcoholic beverages came from breath when he spoke. Deputy J. Murphy

OBSERVATION OF DRIVER:

As I approached I could see that the driver of the gray pickup was obviously impaired. His eyes were blood shot and glossy, his speech was slurred and a heavy odor alcoholic beverages came from breath when he spoke. I asked him to get out of his truck he was unsteady on his feet, swaying from side to side.

DRIVER'S STATEMENTS:

He stated that he was drinking.

ODORS:

STRONG ODOR OF AN UNKNOWN ALCOHOLIC BEVERAGE EMANATING FROM SUBJECT'S BREATH

GENERAL OBSERVATIONS

SPEECH: **Slur**

ATTITUDE: **upset, Mad at times**

CLOTHING: **Gray T-shirt, Camo pants and Brown Boots**

MEDICAL/OTHER: **none**

TATE OF FLORIDA
'OUNTY OF PALM BEACH

Jose A Claudio 7022
ignature of Arresting/Investigative Officer

ne foregoing instrument was sworn to or affirmed and subscribed before me this ____ day of ____ 20____ by Jose A Claudio 7022

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

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

PARIS POUND
MY COMMISSION # HH 202850
EXPIRES: March 25, 2026
Bonded Thru Notary Public Underwriters

SUBJECT: MELCHIORI, JOSEPH, UGENE III CASE NUMBER 22092217

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

)ther Observations:

Subject was asked to stand with their feet together and place their hands by their side. They were asked to focus on the stimulus and follow it with their eyes. Lastly they were told not to move their head to assist in following the stimulus with their eyes. Subject showed equal pupil size that tracked equally. Both eyes lacked a smooth pursuit. I saw distinct and sustained Nystagmus at maximum deviation. I also saw an onset of Nystagmus prior to 45 degrees in both eyes. Subject swayed while performing this task.

WALK & TURN:
Refused

ONE LEG STAND:
Refused

FINGER TO NOSE:
Refused

ROMBERG ALPHABET:
Refused

BREATH TEST RESULTS: 1) 2) 3) 4)

TATE OF FLORIDA
OUNTY OF PALM BEACH

Jose A Claudio 7022 7022
ignature of Arresting/Investigative Officer)

he foregoing instrument was sworn to or affirmed and subscribed before me this _____ day of _____ 20_____ by Jose A Claudio 7022

Print name of Arresting/Investigative Officer), who is personally known to me and/or has produced identification/produced KNOWN

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

PARIS POUND
MY COMMISSION # HH 202850
EXPIRES: March 25, 2026
Bonded Thru Notary Public Underwriters

WITNESS LIST

CASE NUMBER: 22092217

ARRESTING OFFICER: Jose A Claudio 7022

ADDRESS: PBSO

PHONE NUMBERS (HOME): 561-996-1670 (WORK)

CAN TESTIFY TO:

NAME: J. Murphy D15

ADDRESS: PBSO

PHONE NUMBERS (HOME) 561-996-1670 (WORK)

CAN TESTIFY TO:

NAME:

ADDRESS

PHONE NUMBERS (HOME) (WORK)

CAN TESTIFY TO:

NAME:

ADDRESS

PHONE NUMBERS (HOME) (WORK) 0

CAN TESTIFY TO:

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ADDRESS

PHONE NUMBERS (HOME) (WORK)

CAN TESTIFY TO:

NAME:

ADDRESS

PHONE NUMBERS (HOME) (WORK)

CAN TESTIFY TO:

TESTING FACILITY TASK REPORT

AGENCY: PBSO

SUBJECT: MELCHIORI, JOSEPH U

CASE NUMBER: 22-092217

DATE: Jul 27, 2022

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 16:38

ENDING TIME: 16:46

BREATH TESTS RESULTS: 1) R TIME 16:44 A.M.☐ P.M.☒ 2) N/A TIME N/A A.M.☐ P.M.☒

3) N/A TIME N/A A.M.☐ P.M.☐ 4) N/A TIME N/A A.M.☐ P.M.☐

BREATH OPERATOR: P.POUND #24639

MAINTENANCE TECHNICAN: J. KARLECKE# 6467

TESTING OFFICER'S OBSERVATIONS

REFUSED

SPEECH: SLURRED

ATTITUDE: TALKATIVE

CLOTHING: ARMY FATIGUE PANTS, GRAY SHIRT , BROWN BOOTS

MEDICAL CONDITIONS: BRAIN CANCER

MEDICATIONS: NONE

OTHER:

COMMENTS:

ARRIVED AT CENTER A/O BEGAN THE 20 MINUTE OBSERVATION PERIOD AT 15:55 HRS.

SUBJECT: REFUSED TO TAKE TEST

A/O: READ I/C

SUBJECT: STATED HE UNDERSTOOD I/C AND REFUSED TO TAKE TEST

A/O: READ RIGHTS

SUBJECT: STATED HE UNDERSTOOD RIGHTS

A/O: ATTEMPTED Q&A

SUBJECT: REFUSED QUESTIONS

REFUSED

SUBJECT: Michael Jason E CASE NUMBER: 22-09317

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 _____ of the _____

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 and Consent

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) Read and Consent

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

SUBJECT: N_____ 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: _____

STATE OF FLORIDA **22092217**

DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES

AFFIDAVIT OF REFUSAL TO SUBMIT TO

BREATH AND/OR URINE TEST

I, **Jose A Claudio 7022**, a duly certified Law Enforcement Officer or Correctional Officer,

(Name of Officer reading Implied Consent Warning)

am a member of **Palm Beach County Sheriff's Office**, and I do swear

(Name of law enforcement agency)

or affirm that on or about the **27** day of **July**, 20 **22**, at **1457** ☑ P.M. ☐ A.M.

DRIVER **JOSEPH** **UGENE III** **MELCHIORI**,

(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# **M426485724210 FL DL**, state of **Florida**, was placed under lawful arrest for

the offense of **DUI** by **Jose A Claudio 7022** and

(Name of Arresting Officer)

issued Citation # **AF10C5E**

That on or about the **27** day of **July**, 20 **22**, at **5:11** ☑ P.M. ☐ A.M.

in **Palm Beach** County,

I requested that the driver submit to a ☐ **breath and/or** ☐ **urine** test to determine his or her blood alcohol level and/or the presence of chemical or controlled substances. I informed the driver that the refusal to submit to such test(s) 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 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 for refusal to submit to a lawful test of his or her breath, urine, or blood. Additionally, I informed the driver that if he or she holds a CDL, or was operating a CMV, refusal will result in the disqualification of the Commercial Driver's License/driving privilege for a period of one (1) year in the case of a first refusal or permanently if he or she has previously been disqualified as a result of a refusal to submit to any such lawful test. Nonetheless, the driver refused to submit to the test(s) requested.

Signature of Law Enforcement Officer or Correctional Officer 7022

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

PARIS POUND
MY COMMISSION # HH 202850
EXPIRES: March 25, 2026
Bonded Thru Notary Public Underwriters

The foregoing instrument was sworn and subscribed before me this 27 day of July, 20 22, by **Jose A Claudio 7022**, who is personally known to me or who has produced **KNOWN** as identification

Notary Public

The foregoing instrument was sworn and subscribed before me:

Signature of Attesting Officer

Title

Date

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.

HSMV-BAR1001 (REV. 10/2016)

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: 2022019384	**Date:** 7/28/2022
	Specialist Name/ID: M. Tooks #8557