50-2022-CT-011527-ANB

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

OBTS Number:

ADMINISTRATIVE

Agency ORI Number	Agency Name	Agency Report Number
FLO 5 0 2 6 0 0	PALM BEACH GARDENS POLICE DEPARTMENT	78 - 22003471

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:

Location of Arrest (Including Name of Business): 353 US HWY 1, JUPITER FL
Location of Offense (Business Name, Address): 353 US HWY 1, JUPITER FL

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
07/17/2022	02:46					KAUFF'S TOWING AND RECOVERY 4701 EAST AVENUE, WPB, FL 33407

DEFENDANT

Name (Last, First, Middle): DE MARTINO, NINA,
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	F	12/03/1984	6'0	210	BLUE	BROWN	LIGHT	MEDIUM

Scars, Marks, Tatoos, Unique Physcal Features (Location, Type, Description):
Marital Status: S
Religion: NONE
Indication of: Alcohol Influence Y ☒ N ☐ Unk. ☐; Drug Influence Y ☒ N ☐ Unk. ☐

Local Address (Street, Apt. Number): 1605 S US HIGHWAY 1 apt E206 (City) JUPITER (State) FL (Zip) 33477
Phone: (401) 585-4917
Residence Type (1. City 2. County 3. Florida 4. Out of State): 2

Permanent Address (Street, Apt. Number): 1605 US HIGHWAY 1 APT E206 (City) JUPITER (State) FL (Zip) 33477
Phone:
Address Source: LICENSE

Business Address (Name, Street) (City) (State) (Zip)
Phone:
Occupation: WORKS AT HOME

D/L Number, State		Soc. Sec.	INS Number	Place of Birth (City, State)	Citizenship
d563620849430	FL	[redacted]		PROVIDENCE RI	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
				☐ 1. Arrested ☐ 2. At Large	☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile

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 ☐ 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

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
DRIVING UNDER THE INFLUENCE	1	☐Y ☒N	316.193(1)(a)	

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

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): NORTH COUNTY COURTHOUSE, 3188 PGA BOULEVARD, PALM BEACH GARDENS, FL 33410 - PH: (561) 662-6700

Court Date and Time: Month AUGUST Day 17 Year 2022 Time 10:00 AM X 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: 07/17/2022

ADMIN

HOLD for other Agency Name:
☐ Dangerous ☐ Suicidal ☐ Related Arrest ☐ Other:

Signature of Arresting Officer: X

Name of Arresting Officer (Print)	I.D. #
W. BUTZBACH	507

Name Verification (Printed by Arrestee): (PRINT)

Intake Deputy	I.D. #	Pouch #	Transporting Officer	ID #	Agency
Benitti	1E342		W. BUTZBACH	507	PBGPD

Witness here if subject signed with an "X"

PAGE 1 OF 1

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D.U.I. PROBABLE CAUSE AFFIDAVIT

On the 17 day of AUGUST 2022 at 0120 ☑ AM ☐ PM

Subject: DE MARTINO, NINA, Case Number: 22003471

Agency: PALM BEACH GARDENS POLICE DEPARTMENT Arresting Officer: W. BUTZBACH 507

PERSONAL CONTACT

DRIVING PATTERN: (Actual Physical Control; Physical Evidence or Statements Putting Defendant Behind Wheel of Vehicle)

I observed a black SUV bearing FL tag 56AGPA traveling north on US Highway 1, Jupiter, Florida. The vehicle was in the right lane and was unable to maintain its lane of travel, it crossed over the solid white line to the right of the lane of travel. While following the vehicle, it pulled into the parking lot of Twisted Tuna and parked in a parking spot. Twisted Tuna is a closed business with no cars in the parking lot. I initiated a traffic stop by activating my emergency lights. My department issued body-worn camera was used for the entire investigation.

OBSERVATION OF DRIVER:

Upon walking up to the driver's door, I made contact with the driver and only occupant who identified herself via Florida driver's license as Nina De Martino (defendant). I asked the defendant why she pulled into an empty parking lot, and she said to call a friend. I asked the defendant for her license, registration, and insurance. She was able to provide me with the documents. While talking to the defendant, her eyes were red and watery, her speech was slurred, and there was an odor of an unknown alcoholic beverage emanating off her person.

DRIVER STATEMENTS:

I asked the defendant how much she had to drink tonight, and she advised two drinks. I asked the defendant if she would be willing to perform a few task (Standardized Field Sobriety Task) to make sure she was able to drive, she said she would participate and the following was the results:

ODORS: unknown alcoholic beverage

GENERAL OBSERVATIONS

SPEECH: slurred

ATTITUDE: mood swings

CLOTHING: normal

MEDICAL/OTHER: back problems

STATE OF FLORIDA
COUNTY OF PALM BEACH

SIGNATURE OF ATTESTING OFFICER

The forgoing instrument was sworn to or affirmed and subscribed before me this 17 day of JULY 2022 by W. BUTZBACH 507 who is ☑ personally known to me or ☐ produced _____.

Notary Public, Clerk of Court, Officer (FSS 117.10)

Notary Public State of Florida
Thomas H Leahey
My Commission GG 347108
Expires 06/20/2023

STAMP

D.U.I. PROBABLE CAUSE AFFIDAVIT Cont.

Subject: DE MARTINO, NINA, Case Number: 22003471

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

LEFT EYE	*RIGHT EYE*
☑ Lack of Smooth Pursuit	☑ Lack of Smooth Pursuit
☑ Distinct & Sust. Nystag. at Max. Deviation	☑ Distinct & Sust. Nystag. at Max. Deviation
☑ Onset of Nystagmus Prior to 45 Degrees	☑ Onset of Nystagmus Prior to 45 Degrees

Other Observations:

orbital sway

Walk and Turn

The defendant started without being told to start and had a hard time maintaining balance during the instruction phase. On the first set of steps the defendant took 10 steps, most were not heel to toe. The defendant took 10 steps back and were not all heel to toe. The defendant used her arms for balance and stepped off the line multiple times.

One Leg Stand

The defendant started before being told to start. she used her arms for balance, hopped, and put her foot down without being told to, she stopped and then picked up the opposite foot after I told her to keep going.

Rhomberg

The defendant advised she understood the instructions and estimated the passage of 30 seconds in 41 seconds.

BREATH RESULTS: 1) refused @ _____ 2) refused @ _____ 3) _____ @ _____ 4) _____ @ _____

STATE OF FLORIDA
COUNTY OF PALM BEACH

SIGNATURE OF ATTESTING OFFICER

The forgoing instrument was sworn to or affirmed and subscribed before me this 17 day of JULY 20 22 by W. BUTZBACH 507 who is ☑ personally known to me or ☐ produced _____.

Notary Public, Clerk of Court, Officer (FSS 117.10)

Notary Public State of Florida
Thomas H Leahey
My Commission GG 347108
Expires 06/20/2023

STAMP

PALM BEACH GARDENS POLICE DEPARTMENT
DUI TESTING FACILITY INFORMATION SHEET

PBSO Case #: 22-088705 PBSO Zone: 3-13

Agency Case #: 22003471 Crash Case #: _____

Incident Information:

Time of Stop/Crash: 0120 Date of Incident: 07/17/2022 Day: sunday

Location of Incident: 353 US HWY 1, JUPITER FL

Arrest Information:

Time of Arrest: 01:39 Date of Arrest: 07/17/2022 Day: SUNDAY

Location of Arrest: 353 US HWY 1, JUPITER FL

Subject's Name: (L) DE MARTINO, (F) NINA, (M) _____

DOB: 12/03/1984 Race: W Sex: F Height: 6'0 Weight: 210 Hair bro Eye _____

Address: 1605 S US HIGHWAY 1 apt E206 Phone: (401) 585-4917

Arresting Officer's Name: W. BUTZBACH ID#: 507

Agency: PBGPD Division: TRAFFIC DIVISION

Breath Results

REFUSED

1) _____ at 0246 hrs.
2) _____ at _____ hrs.
3) _____ at _____ hrs.
4) _____ at _____ hrs.

---BAT Use---

BAT Notified: YES

Arrival Time at BAT: 02:20

Subject Arrest Time: 01:39

Breath Test Operator: 19183
PBSO

22003471

STATE OF FLORIDA
AFFIDAVIT OF REFUSAL TO SUBMIT TO
BREATH TEST

I, W. BUTZBACH, 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 17 day of JULY, 2022, at 02:46 ☐P.M. ☑A.M.

DRIVER NINA DE MARTINO,
FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL # d563620849430, state of FL, was placed under lawful arrest for

the offense of DRIVING UNDER THE INFLUENCE by W. BUTZBACH and
(Name of Arresting Officer)

issued citation # _____.

That on or about the 17 day of JULY, 2022, at 02:46 ☐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.

Signature of Law Enforcement Officer or Correctional Officer

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

Notary Public State of Florida
Thomas H Leahey
My Commission GG 347108
Expires 08/20/2023
(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before me this 17 day of JULY, 2022, by W. BUTZBACH, who is personally known to me or who has produced _____ 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.

EFFECTIVE OCTOBER 1, 2021

TESTING FACILITY TASK REPORT

AGENCY: PBG

SUBJECT: DeMartino, Nina

CASE NUMBER: 22-088705

DATE: Jul 17, 2022

VIDEO DVD NUMBER: n/a

BEGINNING TIME: 0243

ENDING TIME: 0249

BREATH TESTS RESULTS: 1) R TIME 0246 A.M. ☒ P.M. ☐ 2) .000 TIME 0101 A.M. ☒ P.M. ☐

3) n/a TIME 0 A.M. ☐ P.M. ☐ 4) n/a TIME 0 A.M. ☐ P.M. ☐

BREATH OPERATOR: Thomas H Leahey #19183

MAINTENANCE TECHNICAN: Jason Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: slurred

ATTITUDE: upset, crying

CLOTHING: blue jean skirt, black shirt, black shoes

MEDICAL CONDITIONS: Yes

MEDICATIONS: did not want to tell

OTHER:

eyes were glassy & bloodshot
odor of unknown alcoholic beverage on breath
subject stated she drank 2 vodka/soda drinks - Q&A

REFUSED

COMMENTS:

arrived at center A/O conducted 20 observation period at 0220 hrs

subject refused to perform breath test

REFUSED

A/O read I/C 2X & subject understood I/C

subject refused to perform breath test

A/O called refusal @ 0246

A/O read rights subject understood rights

A/O conducted Q&A

subject answered questions

SUBJECT: _____ 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: _____

SUBJECT:_____ 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 _____ 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)_____

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)_____

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: 2022018357	**Date:** 07/18/2022
	Specialist Name/ID: C. Smith/39657