22CT - 20180 ASB

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: 0500400
Agency Name: Delray Beach Police Department
Agency Report Number (N.T.A.'s only): 4 0 22-015387

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: 1

Location of Arrest (Including Name of Business): 4500 W ATLANTIC AVE, DELRAY BEACH, FL
Location of Offense (Business Name, Address): 4500 W ATLANTIC AVE, DELRAY BEACH, FL 33445

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
12/03/2022	03:46	12/03/2022	03:56	12/03/2022	06:09	4500 W ATLANTIC AVE

DEFENDANT

Name (Last, First, Middle): FEINSTEIN, NOAH R
Alias (Name, DOB, Soc. Sec #, Etc.): Alias:

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	03/05/2000	5'09	165	BLUE	BROWN	FAIR	MEDIUM

Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description):
Marital Status: S
Religion: JEWISH
Indication of: Alcohol Influence Yes ☒ No ☐ Unk. ☐ Drug Influence ☒

Local Address (Street, Apt. Number) (City) (State) (Zip): 65 KETTLE CREEK RD, FREEHOLD, NJ 07728
Phone: (732) 995-7486
Residence Type: 1. City 2. County 3. Florida 4. Out of State: 4

Permanent Address (Street, Apt. Number) (City) (State) (Zip): 65 KETTLE CREEK RD, FREEHOLD, NJ 07728
Phone: (732) 995-7486
Address Source: NJ DL

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

DrL Number, State	Soc Sec Number	INS Number	Place of Birth (City, State)	Citizenship
F22925947903004 / NJ			LONGBRANCH, NJ,	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): 1-O-R- 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:

CODES

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 BREATH ALCOHOL .08 OR MORE PER 210L	316.193(1)(C)	

Drug Activity	Drug Type	Amount / Unit	Offense #	County	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): South County 200 W Atlantic Ave Delray Beach, FL 33444
Court Date and Time: 12/29/2022 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.

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

No Photo Available

ADMIN

HOLD for Other Agency: ☐ Dangerous ☐ Suicidal ☐ Resisted Arrest ☐ Other
Signature of Arresting Officer:
Name Verification (Printed by Arrestee) (PRINT):
Name of Arresting Officer (Print): WINDSOR, NICHOLAS I.D. # 1029
Intake Deputy: Krishi I.D. # 9383 Pouch #:
Transporting Officer: WINDSOR I.D. # 1029 Agency: DBPD
Witness here if subject signed with an "X":

PAGE 1 OF 1

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0536411

SCANNED DEC 05 2022

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 3rd DAY OF December 20 22, AT 0307 ☑AM ☐PM

SUBJECT: Feinstein, Noah R. CASE NUMBER: 22-15387

AGENCY: Delray Beach Police Department ARRESTING OFFICER: Windsor #1029

PERSONAL CONTACT

DRIVING PATTERN: ACTUAL PHYSICAL CONTROL (PHYSICAL EVIDENCE OR STATEMENTS PUTTING DEF. BEHIND WHEEL OF VEHICLE)

The following occurred in the City of Delray Beach, County of Palm Beach, FL.
On 12/03/22 at 0307hrs I observed a white Volkswagen Jetta (NJ Tag #R99MMT) traveling westbound in the 4500 block of W. Atlantic Ave. I visually estimated the Volkswagen's speed to be 80mph and established a pace of speed at 83mph in my marked DBPD patrol vehicle. I activated my emergency lights of my patrol vehicle to conduct a traffic stop. I met with the white male driver and identified him by his NJ DL as Noah R. Feinstein. Feinstein was sitting in the driver seat with the engine running and he had the vehicle key fob in his possession. Feinstein was the only person inside the Volkswagen.

OBSERVATION OF DRIVER:

I smelled an odor of an unknown alcoholic beverage coming from Feinstein. Feinstein's eyes were red and had a glassy appearance. Feinstein's speech was slurred and thick. Feinstein's pupils were dilated and slow to react to changes in light. After exiting the Volkswagen, Feinstein was unsteady on his feet and swayed in a circular motion while standing still. Feinstein had slow dexterity.

DRIVER'S STATEMENTS:

Feinstein stated he was driving home when he was stopped by the police. Feinstein stated he started to driver from downtown Delray Beach. Feinstein denied having any medical conditions or consuming any prescription medications that would affect his ability to operate a motor vehicle. Feinstein denied consuming any illegal drugs including marijuana prior to driving. Feinstein denied consuming any alcoholic beverages prior to driving. Feinstein gave no reason on why he was driving 83mph. Feinstein denied having any medical conditions with his eyes that would not be corrected by eyeglasses. Feinstein later stated one of his contact lenses was not the right prescription and it would affect his balance. Feinstein stated the wrong contact lens did not affect his ability to operate a motor vehicle. I requested Feinstein perform roadside tasks and he asked if he had to perform the roadsides. I advised Feinstein of Taylor Warning and Feinstein sated he understood Taylor Warning and agreed to perform the roadside tasks.

ODORS:

I smelled an odor of an unknown alcoholic beverage coming from Feinstein.

GENERAL OBSERVATIONS

SPEECH: Slurred and Thick

ATTITUDE: Polite

CLOTHING: Gray Shirt, Blue Jeans and Black Shoes

MEDICAL/OTHER: None Stated

STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 3rd day of December 20 22 by Ofc. Windsor #1029

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced Personally Known

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

Notary Public State of Florida
Renee Ragin
My Commission GG 966418
Expires 03/05/2024

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SCANNED
DEC 05 2022

SUBJECT: Feinstein, Noah R. CASE NUMBER 22-15387

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- [x] LT EYE-LACK OF SMOOTH PURSUIT
- [x] RT EYE-LACK OF SMOOTH PURSUIT
- [x] LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
- [x] RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX DEVIATION
- [x] LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES
- [x] RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

Other Observations:

WALK & TURN:

Feinstein used his arms for balance. Feinstein did not count out loud as instructed. Feinstein did not touch heel to toe on several steps. Feinstein stepped off the line during the roadside.

ONE LEG STAND:

Was not performed due to Feinstein stating his balance would be affected too much by wearing the wrong contact lens.

FINGER TO NOSE:

Feinstein missed the tip of his nose on several attempts. Feinstein raised the wrong hand once. Feinstein had to be instructed several times on how to perform this roadside.

ROMBERG ALPHABET:

Feinstein went inaudible in the middle of reciting the alphabet. Feinstein paused after reciting the letter "Y".

Feinstein performed a modified Romberg roadside task. Feinstein stated 30 seconds had elapsed when one minute and five seconds had actually elapsed.

BREATH TEST RESULTS: 1) .156 | 2) .156 | 3) | 4)

STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 3rd day of December 20 22 by Ofc. Windsor #129

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced Personally Known

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

Notary Public State of Florida
Renee Ragin
My Commission GG 966418
Expires 03/05/2024

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SCANNED
DEC 05 2022

WITNESS LIST

CASE NUMBER: 22-15387

ARRESTING OFFICER: OFC. WINDSOR #1029 DBPD

ADDRESS: 300 W ATLANTIC AVE, DELRAY BEACH, FL 33444

PHONE NUMBER (WORK): (PHONE) 561-243-7800

CHARGE(S): TRAFFIC STOP AND DUI PC

NAME:

ADDRESS:

NAME (HOME): (PHONE)

CAN TESTIFY TO:

NAME:

ADDRESS:

PHONE NUMBER (HOME): (PHONE)

CAN TESTIFY TO:

NAME:

ADDRESS:

PHONE NUMBER (HOME): (PHONE)

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CAN TESTIFY TO:

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SCANNED
DEC 05 2022

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

PBSO CASE # 22-135517 PBSO ZONE 4-11

AGENCY CASE # 22-15387 CRASH CASE # N/A

TIME OF STOP/CRASH 0307 DATE 12/03/22 DAY SATURDAY

SUBJECT'S NAME FEINSTEIN, NOAH R. RACE W SEX M

HGT 5'09" WGT 170 DOB 03/05/2000

LOCATION 4500 BLOCK W ATLANTIC AVE, DELRAY BEACH, FL

ARRESTING OFFICER'S NAME & ID WINDSOR 1029 AGENCY DELRAY BEACH

DIVISION: CRD

NOTIFIED BY COMMO YES

ARRIVAL AT FACILITY 0410

BREATH RESULTS: Arrest Time 0346

1. .156
2. .156
3. N/A
4. N/A

TESTING OFFICER'S ID 19183

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SCANNED
DEC 05 2022

FLORIDA DEPARTMENT OF LAW ENFORCEMENT
ALCOHOL TESTING PROGRAM
BREATH ALCOHOL TEST AFFIDAVIT

Instrument Type: Intoxilyzer 8000
Instrument Registered To: PALM BEACH CO SO
Instrument Serial Number: 80-006238 Software: 8100.27
Date of Test: 12/03/2022

Date of Last Agency Inspection: 11/18/2022
Observation Period Began: 04:10
Subject's Name: NOAH R FEINSTEIN DOB: 03/05/2000 Sex: M

The subject was observed for at least twenty-minutes prior to the administration of the breath test to ensure that the subject did not take anything orally and did not regurgitate.

Results:

Test	g/210L	Time
Diagnostics Check	OK	04:38
Air Blank	0.000	04:39
Control Test	0.079	04:39
Air Blank	0.000	04:40
Subject Sample #1	0.156	04:40
Air Blank	0.000	04:41
Air Blank	0.000	04:43
Subject Sample #2	0.156	04:44
Air Blank	0.000	04:44
Control Test	0.079	04:45
Air Blank	0.000	04:45
Diagnostics Check	OK	04:45

Cylinder Lot: 29821080A4
Exp: 12/05/2023

State of Florida, County of Palm Beach.

Personally appeared before me the undersigned authority, who (4) is personally known to me or (__) produced _____ as identification, and who after being placed under oath, states:

I THOMAS H LEAHEY, hold a valid Breath Test Operator permit issued by the Florida Department of Law Enforcement, I administered the above breath test to the subject named above in accordance with Chapter 11D-8, Florida Administrative Code, and this form is a true and accurate report of that breath test.

Breath Test Operator: _____ Date: 12/03/2022
Signature

Sworn to (or affirmed) before me this 03 day of December, 2022

_____ Ofc N Windsor #1029
Signature of Notary Public-State of Florida Printed Name of Notary Public-State of Florida

Note: Pursuant to section 117.10, Florida Statutes, law enforcement officers, correctional officers, traffic accident investigation officers and traffic infraction enforcement officers are notaries public when engaged in the performance of official duties. In accordance with section 316.1934(5), F.S., this completed form is admissible without further authentication and is presumptive proof of the results herein. To be used in accordance with Section 316.1934(5), F.S., and in administrative proceedings pursuant to 322.2615, F.S.

FDLE/ATP FORM 38 - MARCH 2004, Ref. 11D-8.007

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DEC 05 2022

TESTING FACILITY TASK REPORT

AGENCY: DBPD

SUBJECT: Feinstein, Noah

CASE NUMBER: 22-135517

DATE: Dec 3, 2022

VIDEO DVD NUMBER: n/a

BEGINNING TIME: 0433

ENDING TIME: 0446

BREATH TESTS RESULTS: 1) .156 TIME 0440 A.M. ☒ P.M. ☐ 2) .156 TIME 0444 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: thick

ATTITUDE: cooperative

CLOTHING: blue jeans, gray t-shirt, black sneakers

MEDICAL CONDITIONS: none

MEDICATIONS: none

OTHER:

eyes were glassy & bloodshot
odor of unknown alcoholic beverage on breath

COMMENTS:

arrived at center A/O conducted 20 observation period at 0410 hrs

subject refused to perform breath test - I want to consult an attorney

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

subject agreed to perform breath test

subject completed breath test

A/O read rights & subject understood rights

tech read breath test results & subject understood breath test results

A/O attempted Q&A

subject invoked right to counsel

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DEC 05 2022

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)_____

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SCANNED
DEC 05 2022

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

SUBJECT: _____ CASE NUMBER: 22-10381

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: _____

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

NOT A CERTIFIED COPY

SCANNED
DEC 05 2022