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22CT 8127 NB

1636

OBTS Number		ARREST / NOTICE TO APPEAR		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1		Juvenile N	
Agency ORI Number FLO 5 0 2 6 0 0		Agency Name PALM BEACH GARDENS POLICE DEPARTMENT				Agency Report Number 78 - 22002551					
Charge Type: Check as many as apply.		☐ 1. Felony ☐ 2. Traffic Felony		☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor		☐ 5. Ordinance ☐ 6. Other		Weapon Seized / Type 2 1. Yes 2. No		Multiple Clearance Indicator	
Location of Arrest (Including Name of Business) 4045 CENTRAL GARDENS WAY, PALM BEACH GARDENS, FL, 33410						Location of Offense (Business Name, Address) CENTRAL BLVD/SAN MICHELLE DR, PALM BEACH GARDENS, FL, 33410					
Date of Arrest 05/22/2022		Time of Arrest 01:46		Booking Date		Booking Time		Jail Date		Jail Time	
Name (Last, First, Middle) AGUSTIN, ROBIN, OLONAN						Alias (Name, DOB, Soc. Sec. #, Etc.) NONE					
Race W - White I - American Indian B - Black O - Oriental/Asian		Sex M		Date of Birth 05/22/1984		Height 503		Weight 125		Eye Color BRO	
										Complexion BLK	
										Build SMALL	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) NONE						Marital Status SINGLE		Religion CHRISTIAN		Indication of Alcohol Influence Y ☒ N ☐ Unk. ☐	
Local Address (Street, Apt. Number) 8678 PIONEER RD, WEST PALM BEACH, FL 33411						Phone (561) 317-5227		Residence Type 1. City 2. County 3. Florida 4. Out of State		2	
Permanent Address (Street, Apt. Number) 8678 PIONEER RD, WEST PALM BEACH, FL 33411						Phone		Address Source FL DRIVER'S LICENSE			
Business Address (Name, Street) HOKKAIDO HIBACHI 1200 TOWN CENTER DR, #125, JUP, FL 33458						Phone		Occupation CHEF			
DL Number, State A-223-734-84-182-0 FL		Soc. Sec. Number		INS Number		Place of Birth (City, State) PHILIPPINES		Citizenship USA			
Co-Defendant Name (Last, First, Middle)						Race		Sex		Date of Birth	
Co-Defendant Name (Last, First, Middle)						Race		Sex		Date of Birth	
Parent Legal Custodian Other						Residence Phone					
Address (Street, Apt. Number) (City) (State) (Zip)						Business Phone					
Notified by (Name)						Date		Time		Juv. 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			
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 Description DUI - BREATH .08		Counts 1		Domestic Violence ☐ Y ☒ N		Statute Violation Number 316.193(1)(C)		Violation of ORD #			
Drug Activity N		Drug Type N		Amount / Unit N		Offense #		Warrant / Capias Number		Bond O R	
Charge Description		Counts		Domestic Violence ☐ Y ☒ N		Statute Violation Number		Violation of ORD #			
Drug Activity		Drug Type		Amount / Unit		Offense #		Warrant / Capias Number		Bond	
Charge Description		Counts		Domestic Violence ☐ Y ☒ N		Statute Violation Number		Violation of ORD #			
Drug Activity		Drug Type		Amount / Unit		Offense #		Warrant / Capias Number		Bond	
Charge Description		Counts		Domestic Violence ☐ Y ☒ N		Statute Violation Number		Violation of ORD #			
Drug Activity		Drug Type		Amount / Unit		Offense #		Warrant / Capias Number		Bond	
NORTH COUNTY COURTHOUSE, 3188 PGA BOULEVARD, PALM BEACH GARDENS, FL 33410 - PH: (561) 662-6700 Court Date and Time Month JUNE Day 22 Year 2022 Time 10:00 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 05/22/2022 Signature of Arresting Officer _____ #471 Name Verification (Printed by Arrestee) _____ (PRINT) Name of Arresting Officer (Print) OFC. CAMERON CARVER I.D. # 471 Intake Deputy SPAW 614 I.D. # _____ Pouch # _____ Transporting Officer OFC. C. CARVER ID # 471 Agency PBGPD Witness here if subject signed with an "X" _____ PAGE 1 OF 1											

OBTS Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	JUVENILE	
A D M I N I S T R A T I V E	Agency ORI Number	Agency Name		Agency Report Number						
	FL FL0502600	Palm Beach Gardens Police Department		7 8 22-002551						
	Charge Type: Check as many as apply. ☐ 1. Felony ☐ 3. Misdemeanor ☐ 5. Ordinance ☐ 2. Traffic Felony ☒ 4. Traffic Misdemeanor ☐ 6. Other			Special Notes:						
	Name (Last, First, Middle)				Race		Sex		Date of Birth	
	AGUSTIN, ROBIN OLONAN				A		M		05/22/1984	
C H A R G E S	Charge Description				Charge Description					
	316.193(1)(A) DUI - NORMAL FACULTIES IMPAIRED									
	Victim's Name (Last, First, Middle)				Race		Sex		Date of Birth	
V I C T I M	Local Address (Street, Apt. Number) (City) (State) (Zip)				Phone		Address Source			
	Business Address (Name, Street) (City) (State) (Zip)				Phone		Occupation			
The undersigned certifies and swears that he/she has just and reasonable 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. ☐ was observed by _____ who told _____ that he/she saw the arrested person commit the below acts. ☐ confessed to _____ ☐ admitting to the below facts. ☐ was found to have committed the below acts, resulting from my (described) investigation. On the <u>22</u> day of <u>May</u>, <u>2022</u> at <u>01:15</u> (Specifically include facts constituting cause for arrest.) On Sunday, May 22, 2022, at 01:15hrs, I, DUI Investigator Cameron Carver, was at Central Boulevard and San Michelle Drive, in the City of Palm Beach Gardens, within Palm Beach County, Florida on routine patrol. My department issued body worn camera and in-car dash camera was utilized in this investigation and subsequently uploaded to Evidence.com. I was running dual directional stationary radar in the median of Central Boulevard at San Michelle Drive when I observed a vehicle approaching from my rear, traveling southbound on Central Boulevard at a high rate of speed, estimating the speed to be 70mph in a 45mph zone. My Stalker DSR2X (SN: DB018975 Rear Antenna: KC191662) displayed a speed of 70mph with doppler tone. I got behind the red Tesla and saw it bared a Florida license plate Y29WAW (supposed to be IRR22) and activated my emergency equipment to order the driver to pull over for the speed violation. Upon approach to the Tesla, I observed an Asian male, later identified via Florida driver's license as Robin Olonan Agustin sitting in the driver's seat and the sole occupant of the Tesla. Upon contact with Agustin, I immediately detected the odor of alcohol coming from within the vehicle. When he spoke, this odor grew stronger. I also observed his eyes to be bloodshot and glassy. After identifying myself and explaining the reason for the stop, I asked Agustin to explain the reason for the speed. Agustin laughed and stated he could not justify it, then made a statement about his niece and a guy going in front of him. Agustin stated he had a glass of wine around midnight, for his birthday. Agustin stated he also had a "glass there," pointing out the red cup in the center console, which he stated was just ginger ale. I requested his license, registration, and insurance; he provided his license and struggled to access his insurance information on his phone. Agustin also struggled greatly to open the glovebox to retrieve his registration. Agustin's speech was slightly slurred and low; his focus was task specific/focused. I issued Agustin a traffic citation for the speed and asked him to exit the vehicle to										
SWORN AND SUBSCRIBED BEFORE ME <u>Joshua Bell #8656</u> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F-9-9-117-18) 05/22/2022 DATE SIGNATURE OF ARRESTING / INVESTIGATING OFFICER CARVER, CAMERON (471) NAME OF OFFICER (PLEASE PRINT) 05/22/2022 DATE JOSHUA BELL MY COMMISSION #GG348008 EXPIRES: JUN 18, 2023 Bonded through 1st State Insurance PAGE 1 OF 3										

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.

OBTS Number		PROBABLE CAUSE AFFIDAVIT SUPPLEMENT		1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	JUVENILE
A D M I N I S T R A T I V E	Agency ORI Number FL FL0502600	Agency Name Palm Beach Gardens Police Department	Agency Report Number 7 8 22-002551				
	Charge Type: Check as many as apply: ☐ 1. Felony ☐ 3. Misdemeanor ☐ 5. Ordinance ☐ 2. Traffic Felony ☒ 4. Traffic Misdemeanor ☐ 6. Other			Special Notes:			
Name (Last, First, Middle) AGUSTIN, ROBIN OLONAN		Alias	Race A	Sex M	Date of Birth 05/22/1984		
explain the citation. As he exited, he took a wide stance and swayed and bumped into me as he walked to my patrol vehicle, where I explained the citation. I asked Agustin to perform a series of Standardized Field Sobriety Tasks, which he agreed to perform. Agustin advised he had no medical conditions; had no issues with walking or keeping balance, however he did state he had an issue with his back due to an old crash injury; he had no conditions with his eyes that are not corrected by glasses. Agustin performed the tasks on a flat, dry surface that was well lit. Officer Keel #508 performed scene security. --STANDARDIZED FIELD SOBRIETY TASKS-- HORIZONTAL GAZE NYSTAGMUS I explained the instructions to Agustin, who stated he understood. I observed the following clues: Lack of smooth pursuit was present in both eyes. Distinct and sustained nystagmus at maximum deviation was present in both eyes. Onset of nystagmus prior to 45-degrees was present in both eyes. Vertical gaze nystagmus was not present. Agustin had a visible sway and continually squinted his eyes during the task. WALK AND TURN The instructions were explained and demonstrated to Agustin. He had difficulty getting into the starting position, having to step out to keep balance. After instructions were given and Agustin stating he understood, Agustin started on command and I observed the following clues: Agustin walked off the line. Agustin stopped during the task to regain balance. Agustin did not turn as instructed and demonstrated. On the return, Agustin missed heel-to-toe and walked off the line. During this task, I also observed Agustin look forward, not at his feet as instructed. ONE LEG STAND The instructions were explained and demonstrated to Agustin, who stated he understood. Upon the command to begin I observed the following clues: Agustin swayed while balancing. During this task, I also observed Agustin look forward, not at his feet as instructed. Agustin did not keep his foot elevated as instructed. RHOMBERG The instructions were explained to Agustin, who stated he understood. Upon the command to begin I observed the following clues: Agustin did not keep his eyes closed and had a visible sway. Agustin correctly recited the alphabet. FINGER TO NOSE The instructions were explained and demonstrated to Agustin, who stated he understood. Upon the command to begin I observed the following clues: On the first left, Agustin used the side of his finger and touched the tip of his nose; on the first right, used the side of his finger and touched the tip of his nose; on the second left, used the side of his finger and touched the tip of his nose; on the second right, used the pad of							
SWORN AND SUBSCRIBED BEFORE ME <i>Joshua Bell # 8656</i> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S. 117.10) 05/22/2022 DATE <i>[Signature]</i> SIGNATURE OF ARRESTING / INVESTIGATING OFFICER CARVER, CAMERON (471) NAME OF OFFICER (PLEASE PRINT) 05/22/2022 DATE  JOSHUA BELL MY COMMISSION #66346008 EXPIRES: JUN 18, 2023 Bonded through 1st State Insurance 05/22/2022 DATE							
PAGE 2 OF 3							

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STATE ATTORNEY

CENTRAL RECORDS

JAIL

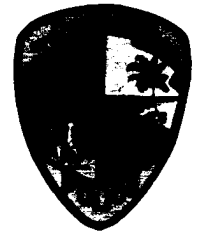
CRIME ANALYSIS

P. I. O.

OBTS Number		PROBABLE CAUSE AFFIDAVIT SUPPLEMENT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Copies		1	JUVENILE
A	Agency ORI Number	Agency Name	Agency Report Number						
	FL FL0502600	Palm Beach Gardens Police Department	7 8 22-002551						
D	Charge Type: Check as many as apply.		☐ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other		Special Notes:				
M	Name (Last, First, Middle)		Alias		Race	Sex	Date of Birth		
	AGUSTIN, ROBIN OLONAN				A	M	05/22/1984		
N	his finger and touched the tip of his nose; on the third right, initially raised his left hand and then corrected himself and used the pad of his finger and touched the side of his nose; and on the third left, used the side of his finger and touched the tip of his nose. Based on the totality of the circumstances stated above, I placed Agustin under arrest for DUI. Agustin was placed into handcuffs which were checked for proper fit and double locked. Agustin was searched incident to arrest. Agustin's property (\$300 cash, sentimental cloth bracelet, hat, credit cards and receipts) were placed back in his vehicle. Agustin was transported to the Palm Beach County Breath Alcohol Testing Center (BAT) without incident. Upon arrival at the BAT, Agustin was placed in seat and was observed for 20 minutes and did not ingest anything or vomit.								
P	At the end of the observation, I brought Agustin on camera and asked him to submit to the breath test and he agreed to my request. Agustin provided a breath sample to Palm Beach County Sheriff's Office Breathalyzer Technician Bell ID#8656, blowing a .080 BrAC at 02:53hrs and .077 BrAC at 02:56hrs. Agustin was read the results which he advised he understood. Agustin was read Miranda Warnings from a pre-printed document and agreed to answer interview questions. The question-and-answer sheet is attached to this report. Agustin was taken to intake without incident.								
R	Based on the totality of circumstances from my investigation, I find Robin Olonan Agustin drove a vehicle on the streets of Palm Beach Gardens, while under the influence, and was affected to the extent that his normal faculties were impaired, and provided a breath sample .08 or greater, in violation of Florida State Statute 316.193(1) (C) [AECS6BE]. Agustin was also issued a citation for his unlawful speed on the municipal roadway, in violation of Florida State Statute 316.189(1) [AECS6AE].								
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**PALM BEACH GARDENS POLICE DEPARTMENT
DUI TESTING FACILITY INFORMATION SHEET**



PBSO Case #: 22-069854

PBSO Zone: 3-13

Agency Case #: 22002551

Crash Case #: _____

Incident Information:

Time of Stop/Crash: 01:15 Date of Incident: 05/22/2022 Day: SUNDAY

Location of Incident: CENTRAL BLVD/SAN MICHELLE DR, PALM BEACH GARDENS, FL, 33410

Arrest Information:

Time of Arrest: 01:46 Date of Arrest: 05/22/2022 Day: SUNDAY

Location of Arrest: 4045 CENTRAL GARDENS WAY, PALM BEACH GARDENS, FL, 33410

Subject's Name: (L) AGUSTIN, (F) ROBIN, (M) OLONAN

DOB: 05/22/1984 Race: A Sex: M Height: 503 Weight: 125 Hair BLK Eye BRO

Address: 8678 PIONEER RD, WEST PALM BEACH, FL 33411 Phone: (561) 317-5227

Arresting Officer's Name: OFC. CAMERON CARVER

ID#: 471

Agency: PBGPD

Division: TRAFFIC UNIT

Breath Results

- 1) .080 at 02:53 hrs.
- 2) .077 at 02:56 hrs.
- 3) _____ at _____ hrs.
- 4) _____ at _____ hrs.

---BAT Use---

BAT Notified: YES

Arrival Time at BAT: 02:23

Subject Arrest Time: 01:46

Breath Test Operator: BELL 8656

PBSO

DUI WITNESS LIST

22002551

Arresting Officer: OFC. CAMERON CARVER 471 Email: ccarver@pbgfl.com

Agency Address: 10500 N Military Trail, Palm Beach Gardens, FL 33410 Phone: (561) 799-4445

Can Testify To: Facts of Case

Backup Officers: OFC. SHELDON KEEL #508

Agency Address: 10500 N Military Trail, Palm Beach Gardens, FL 33410 Phone: (561) 799-4445

Can Testify To: SCENE SAFETY

Crash Investigator: _____ Email: _____

Agency Address: 10500 N Military Trail, Palm Beach Gardens, FL 33410 Phone: (561) 799-4445

Breathalyzer Technician: BELL ID: 8656 Agency: PBSO

DRE: _____ ID# _____ Agency Case #: _____

Agency Address: _____ Phone: _____ Email: _____

Name: _____ Involvement: _____

Address: _____ Phone: _____

Can Testify To: _____ ☐ Wheel Witness

Name: _____ Involvement: _____

Address: _____ Phone: _____

Can Testify To: _____ ☐ Wheel Witness

Name: _____ Involvement: _____

Address: _____ Phone: _____

Can Testify To: _____ ☐ Wheel Witness

Name: _____ Involvement: _____

Address: _____ Phone: _____

Can Testify To: _____ ☐ Wheel Witness

Name: _____ Involvement: _____

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Can Testify To: _____ ☐ Wheel Witness

Name: _____ Involvement: _____

Address: _____ Phone: _____

Can Testify To: _____ ☐ Wheel Witness

TESTING FACILITY TASK REPORT

AGENCY: PBG

SUBJECT: AGUSTIN, ROBIN OLONAN

CASE NUMBER: 22-069854

DATE: May 22, 2022

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 0249

ENDING TIME: 0308

BREATH TESTS RESULTS: 1) .080 TIME 0253 A.M. ☒ P.M. ☐ 2) .077 TIME 0256 A.M. ☒ P.M. ☐
3) XX TIME XX A.M. ☐ P.M. ☐ 4) XX TIME XX A.M. ☐ P.M. ☐

BREATH OPERATOR: JOSHUA J BELL #8656

MAINTENANCE TECHNICAN: J. KARLECKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH:

ATTITUDE: COOPERATIVE

CLOTHING: GREY TEE SHIRT, BLACK PANTS, BLACK SHOES

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

EYES: BLOODSHOT, GLASSY

COMMENTS:

A/O ARRIVED AT DUI TESTING FACILITY AND BEGAN THE 20 MINUTE OBSERVATION AT 0223 HOURS

SUBJECT STATED HE WOULD TAKE BREATH TEST

TECH READ BREATH TEST RESULTS

SUBJECT STATED HE UNDERSTOOD BREATH TEST RESULTS

A/O READ RIGHTS

SUBJECT STATED HE UNDERSTOOD HIS RIGHTS

A/O CONDUCTED Q AND A

SUBJECT ANSWERED Q AND A

**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: 05/22/2022

Date of Last Agency Inspection: 05/13/2022

Observation Period Began: 02:23

Subject's Name: ROBIN O AGUSTIN

DOB: 05/22/1984 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	02:51
	Air Blank	0.000	02:51
	Control Test	0.080	02:52
	Air Blank	0.000	02:52
	Subject Sample #1	0.080	02:53
	Air Blank	0.000	02:54
	Air Blank	0.000	02:55
	Subject Sample #2	0.077	02:56
	Air Blank	0.000	02:56
	Control Test	0.079	02:57
	Air Blank	0.000	02:57
	Diagnostics Check	OK	02:57

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

State of Florida, County of Palm Beach,

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

I JOSHUA J BELL, 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: [Signature] Date: 05/22/22
Signature

Sworn to (or affirmed) before me this 22 day of May, 2022

Signature of Notary Public-State of Florida [Signature] Printed Name of Notary Public-State of Florida OFC. C. Carver # 471

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.

SUBJECT: Agustin, Robin Cleon

CASE NUMBER: 77002551

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) Read on camera

Subject: AGUSTIN, ROBIN, OLONAN

Case #: 22002551

DUI Questionnaire

Where were you going? GOING HOME

What roadway were you on? ON CENTRAL BOULEVARD

Direction of travel? SOUTHBOUND

Where were you coming from? ABACOA, JUPITER, FROM WORK (THEN STATED JJ MUGS)

What time did you leave? AROUND 01:00

How much do you weigh? APROX 125

When did you last eat? AROUND 23:20

What did you eat? COUPLE OF BITES OF RICE

What line of work are you in? COOK

When did you last work? 05/21/22

Do you have any physical defects or injuries? Y What are they? LOW BACK SOFT TISSUE INJURY

Do you limp? N Are you sick or injured? N What is wrong? _____

Did you receive a bump on your head recently? N Were you in a crash today? N Have you seen a doctor or dentist in the last 24 hours? N Who? _____ Why? _____

Are you taking any prescription medications? N

Name

Last Consumed

Do you have any of the following medical conditions?

Epilepsy ☐

Glass Eye ☐

False Teeth ☐

Ear Infection ☐

Inner Ear Trouble ☐

Diabetes ☐

Last Injection: _____

Do you have any problems with your eyes that are not corrected by glasses? N What? _____

Have you ever had a driver's license in any other state? N Where? _____

For the last three hours prior to law enforcement interaction, what were you doing? WORK; SAT W/COWORKERS
WENT TO JJ MUGS AND DRANK ALCOHOL, LEAVING AROUND 01:00HRS

Alcohol

What have you been drinking? CABERNET/ SHOT/ CORONA

How many drinks did you have? 1/1/1/2

With whom? COWORKERS

Where did you have the drink(s)? WORK & JJ MUGS

What time did you have your 1st drink? APRX 23:30

What time did you have your last drink? 00:15

Do you feel the effects of the alcohol? DID

Are you under the influence? N

If you/would you permit your child to get into a vehicle driven by someone who drank as much as you? N Why? _____

WOULD NOT PERMIT WITH ANY ALCOHOL OR AS TIRED AS HE WAS/IS.

Drugs

Have you taken any drugs or marijuana today? N What have you consumed? _____

How taken? (Smoked, eaten, pills, injection) _____ Do you remember the last 24 hours? _____

Did you blackout? _____ Do you have a prescription for the drugs? _____ Did you consume as prescribed? _____

Where did you procure the drugs? _____

Misc. questions/statements: _____



**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: 2022013299	Date: 5/23/2022
	Specialist Name/ID: C. Smith/39657