


ARREST / NOTICE TO APPEAR

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

1 JUVENILE

23078619

AD M I N I S T R A T I O N	OBTS Number	Agency ORI Number <b>0501700</b>	Agency Name <b>Jupiter Police Department</b>	Agency Report Number (N.T.A.'s only) <b>5, 4   23-001959</b>
	Charge Type: Check as many as apply: <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other	If Weapon Seized Enter Type <b>UNARMED</b>		Multiple Clearance Indicator
	Location of Arrest (Including Name of Business) <b>1116 LOVE STREET, JUPITER FL 33477</b>		Location of Offense (Business Name, Address) <b>1116 LOVE ST, JUPITER, FL 33477</b>	
	Date of Arrest <b>05/11/2023</b>	Time of Arrest <b>23:27</b>	Booking Date	Booking Time
	Name (Last, First, Middle) <b>OHARA, BRENDAN JOSEPH</b> Alias: _____ Alias (Name, DOB, Soc. Sec. #, Etc.)			
	Race W - White 1 - American Indian B - Black 0 - Oriental/Asian <b>W</b>	Sex <b>M</b>	Date of Birth <b>11/21/1988</b>	Height <b>6'02</b>
	Weight <b>190</b>	Eye Color <b>BLUE</b>	Hair Color <b>BROWN</b>	Complexion <b>LIGHT</b>
	Build <b>Medium</b>		Marital Status <b>S</b>	Religion <b>CATHOLIC</b>
	Local Address (Street, Apt. Number) <b>11035 LEGACY BLVD 206, PALM BEACH GARDENS, FL 33410</b>		Phone	Indication of: Alcohol Influence Yes <input type="checkbox"/> No <input type="checkbox"/> Drug Influence Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk <input type="checkbox"/>
	Permanent Address (Street, Apt. Number) <b>11035 LEGACY BLVD 206, PALM BEACH GARDENS, FL 33410</b>		Phone	Residence Type: 1. City 3. Florida 2. County 4. Out of State <b>FL DL</b>
	Business Address (Name, Street) _____		Phone	Occupation
	D/L Number, State <b>0600070884210 / FL</b>	Soc. Sec. Number _____	INS Number	Place of Birth (City, State) <b>ROCKVILLE, NY</b>
	Citizenship <b>US</b>		Co-Defendant Name (Last, First, Middle) _____	
	Race		Sex	Date of Birth
	Co-Defendant Name (Last, First, Middle) _____		Race	Sex
	Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor	
	<input type="checkbox"/> Parents <input type="checkbox"/> Other: _____ Name (Last, First, Middle)		Residence Phone	
	<input type="checkbox"/> Legal Custodian		Business Phone	
	Address (Street, Apt. Number) _____ (City) _____ (State) _____ (Zip)			
	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 <input type="checkbox"/> defendant and/or <input type="checkbox"/> 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.		School Attended	Grade
	<input type="checkbox"/> Yes, by: _____ <input type="checkbox"/> No: _____		Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Description of Property
	Value of Property			
	Drug Activity N. N/A P. Possess	S. Sell B. Buy T. Traffic	R. Seize D. Deliver E. Use	K. Disperse/ 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/Derv.	P. Paraphernalia/ Equipment	S. Synthetic	U. Unknown Z. Other
	Charge Description <b>DUI - DAMAGE TO PERSON/PROPERTY</b>		Statute Violation Number <b>316.193(3)(C)(1)</b>	Violation of ORD #
	Drug Activity	Drug Type <b>N</b>	Amount / Unit	Offense #
	Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant / Capias Number	
	Bond			
	Charge Description		Statute Violation Number	Violation of ORD #
	Drug Activity	Drug Type	Amount / Unit	Offense #
	Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant / Capias Number	
	Bond			
	Health / Apparent Physical Condition of Defendant		Any knowledge of the following: <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries	
	Explain:			
	Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> T.O.T. County Jail <input type="checkbox"/> Posted Bond <input type="checkbox"/> South County Mental Health	PROPERTY - Received By	Released By	Released To
	Transported By	Date Transported	Time Transported	Other
	<input checked="" type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court <input type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.		Location (Court, Room) <b>North County PALM BEACH GARD</b>	 No Photo Available FILED PBC - GUN CLUB-- '23 MAY 12 AM 8:10
	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.		Court Date and Time <b>06/14/2023 08:30:00</b>	
	Signature of Defendant (or Juvenile and Parent/Custodian)		Date Signed	
	Signature of Arresting Officer <i>[Signature]</i>		Name Verification (Printed by Arrestee)	
	Name of Arresting Officer (Print) <b>NOBLE, RILEY</b>		I.D. # <b>1226</b>	
	Transporting Officer <b>Noble, Riley</b>		I.D. # <b>1226</b>	
	Agency <b>JPD</b>		PAGE <b>1 OF 1</b>	
	Witness here if subject signed with an "X".			

0540415

PH 3778

PROBABLE CAUSE AFFIDAVIT

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

1 JUVENILE

Agency ORI Number: FL 0501700 Agency Name: JUPITER POLICE DEPARTMENT Agency Report Number: 5 4 23-001959

Charge Type: 1. Felony 2. Traffic Felony 3. Misdemeanor 4. Traffic Misdemeanor 5. Ordinance 6. Other

Name (Last, First, Middle): OHARA, BRENDAN JOSEPH Race: W Sex: M Date of Birth: 11/21/1988

Charge Description: 316.193(3)(C)(1) DUI - DAMAGE TO PERSON/PROPERTY

Victim's Name (Last, First, Middle): DALY, JOHN F Race: W Sex: M Date of Birth: 06/05/1976

Local Address (Street, Apt. Number): 5272 VAN BUREN RD, DELRAY BEACH, FL 33484 Phone: (850) 384-7114

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... [X] committed the below acts in my presence. [ ] was observed by... who told... [ ] confessed to... admitting to the below facts. [X] was found to have committed the below acts, resulting from my (described) investigation. On the 12 day of May, 2023 at 01:57 (Specifically include facts constituting cause for arrest.)

On Thursday May 11th, 2023 at approximately 2244 hours, I responded to the parking lot of Lucky Shucks (1116 Love Street) in reference to a possibly intoxicated male wearing a white shirt in a white/silver truck who was trying to ram his vehicle into another vehicle that was blocking him in.

Upon arrival, I made contact with the same described male in a silver Nissan truck (bearing FL Tag# 70GTS). The male, who was identified as the registered owner, Brendan O'Hara (W/M 11/21/1988), was the sole occupant and sitting in the driver-seat. As I walked up to the truck, O'Hara turned the truck off and took the keys out of the ignition. O'Hara appeared disoriented, had blood-shot glassy eyes, and stated he was just sitting in his truck. While speaking with him, I immediately detected the odor of an unknown alcoholic beverage emanating from his breath that intensified as he spoke. I explained to O'Hara why we were there and asked him to standby with other officer on-scene while I went to speak with the witness/caller.

I made contact with the caller, Scott Reynolds (W/M 04/20/1983), who was standing on the sidewalk just past the parking lot. Reynolds stated he saw O'Hara ramming his truck into the vehicle parked behind him, which is a black Buick (FL Tag# Y78BMN). Reynolds not only explained but showed me video on his phone of O'Hara revving his motor and burning out his tires in an attempt to move the Buick blocking him into the parking space. O'Hara was also seen on video trying to possibly break the window and open the door of the Buick. There was clear marks on both vehicles where O'Hara had reversed and rammmed into the Buick as well as large piles of rust that had broken off of O'Hara's already rusted rear bumper. Reynolds finally stated he was afraid O'Hara would drive forward through the bushes and kill someone and was concerned O'Hara was intoxicated.

After making contact with the owner of the black Buick, John Daly (W/M 07/19/80), and other fellow co-workers of O'Hara, I was advised that they all worked for the restaurant

SWORN AND SUBSCRIBED BEFORE ME. Notary Public: MADELIN GONZALEZ, State of Florida, Comm# HH225716, Expires 2/7/2026. Signature of Arresting/Investigating Officer: NOBLE, RILEY (1226), NAME OF OFFICER (PLEASE PRINT), 05/12/2023, DATE. PAGE 1 OF 4

PROBABLE CAUSE AFFIDAVIT  
SUPPLEMENT

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

1 JUVENILE

Agency ORI Number <b>FL 0501700</b>	Agency Name <b>JUPITER POLICE DEPARTMENT</b>	Agency Report Number <b>5 4 23-001959</b>
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Name (Last, First, Middle) <b>OHARA, BRENDAN JOSEPH</b>	Alias	Race <b>W</b>	Sex <b>M</b>	Date of Birth <b>11/21/1988</b>
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Lucky Shucks and had all been drinking at a work party. I explained the situation to Daly and advised him O'Hara had backed into his vehicle multiple times and there was some minor dents/scratches on the rear of his vehicle. Daly was issued the drivers exchange with the report number.

I then went back over to O'Hara who was still sitting in the driver-seat of his vehicle. I asked O'Hara to exit the vehicle and I would speak to him about the incident further. As O'Hara exited the vehicle he appeared very uneasy on his feet and lethargic. I advised O'Hara I found him to have caused the accident and damage to Daly's vehicle and that there was an independent witness who took a video of the entire incident. O'Hara tried to argue that he was not driving and did not hit Daly's vehicle. I then advised O'Hara that I was changing hats from a civil crash investigation to a criminal DUI investigation and read him Miranda from a pre-printed card. Post Miranda, O'Hara admitted to having 4-5 beers earlier at his work function and stated he felt a "6.5" out of 10 on a scale of 1-10, 1 being stone cold sober, 10 being extremely intoxicated.

Based on the aforementioned events, I requested O'Hara participate in Standardized Field Sobriety Tasks. O'Hara stated he did not understand and asked if he had too. I advised O'Hara that the tasks are voluntary, however, if he refused to complete the tasks I have requested of him, it can be used against him in a court of law and I would have to make an arrest decision based off of the totality of circumstances. O'Hara subsequently agreed to participate.

I first began with the Horizontal Gaze Nystagmus task. I instructed O'Hara to stand with his feet touching (heel & toes) and to keep his arms down at his side. I demonstrated to O'Hara that he would be following my stimulus (red light) with his eyes and his eyes only and to keep his head still at all times. O'Hara stated he understood the instructions and was ready for me to continue. O'Hara eyes had no resting nystagmus in either eye and both eyes tracked together equally. I observed lack of smooth pursuit in both eyes, distinct and sustained nystagmus at maximum deviation in both eyes, and onset of nystagmus prior to 45 degrees in both eyes. He did not have vertical Nystagmus in either eye. Multiple times throughout this task O'Hara stopped following the stimulus with his eyes and was noticeably swaying back and forth.

The second task was the Walk & Turn task. I demonstrated and instructed O'Hara to stand on the bold black parking line across the flat parking lot and to place his left foot onto the line and his right foot touching his left foot heel-to-toe with his arms at his side. O'Hara got into the starting position and was unable to maintain it, almost falling over. I instructed/demonstrated O'Hara to take nine heel-to-toe steps down the line and take a series of small steps then return down the line heel-to-toe taking nine steps while making sure to count out loud, look at his feet at all times, do not use his arms for balance, and do not stop walking. He stated he did not have any questions and understood the directions and was told to begin when ready. O'Hara had to be reminded

SWORN AND SUBSCRIBED BEFORE ME	<i>Madelin Gonzalez</i> SIGNATURE OF ARRESTING / INVESTIGATING OFFICER
<i>[Signature]</i> NOTARY PUBLIC / CLERK OF COURT / OFFICER	MADELIN GONZALEZ
05/12/23 DATE	NOBLE, RILEY (1226) NAME OF OFFICER (PLEASE PRINT)
	Expire 2/7/2026
	05/12/2023 DATE

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<b>Name (Last, First, Middle)</b> <b>OHARA, BRENDAN JOSEPH</b>	<b>Race</b> <b>W</b>	<b>Sex</b> <b>M</b>	<b>Date of Birth</b> <b>11/21/1988</b>
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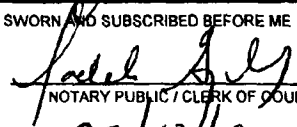


and shown again the starting position and the task even though he stated he understood. O'Hara took his first step and counted out loud "1", then took 6 more steps without counting, missed heel to toe and stepped off the line on each step. O'Hara turned around and said "7?", asking if he was only supposed to take 7 steps. O'Hara just stood there and stated "what's the point" when I asked him if he was refusing to continue with the tasks. After speaking with him and advising him again of his Taylor Warnings, he stated he would continue.

The third task was the One Leg Stand. I instructed O'Hara to stand with his feet touching (heel & toes) and to keep his arms down at his side, to which he struggled to keep his heels and toes touching without swaying around. I instructed/demonstrated to O'Hara that he would be raising the leg of his choice approximately 6 inches off the ground while keep his foot parallel to the ground and counting out loud until I told him to stop. I instructed O'Hara to not use his arms for balance, place his foot down, and make sure to look at his elevated foot while counting. After demonstrating he stated he understood. O'Hara did not raise his foot approximately 6 inches off the ground, placed his foot down on count 4 while swaying around and almost falling over. O'Hara then just stood there and stared at me.

The fourth task was the Finger to Nose. I instructed O'Hara to stand with his feet touching (heel & toes) and to keep his arms down at his side with his pointer fingers pointed outward. I instructed/demonstrated O'Hara that I would be calling left (L) or right (R), when I do, with his head tilted back and eyes closed, he would take the tip of the finger I called and touch it to the tip of his nose and was shown the difference between the tip/pad/nail. He stated he understood and did not have any questions. Before I could begin, O'Hara raised his right finger and touched his nose. I called out the fingers in the standardized order of L, R, L, R, R, and L. When I called "L" O'Hara placed the pad of his finger on the center of his nose. I called "R" O'Hara placed the side of his finger across the center of his nose. I called "L" O'Hara placed the pad of his finger to the center of his nose. For the remaining, R, R, L, O'Hara placed the whole side of his finger across the top of his nose.

The fifth and final task was the Romberg Alphabet. I instructed O'Hara to stand with his feet touching (heel & toes) and to keep his arms down at his side. He was instructed to tilt his head back and close his eyes while reciting the alphabet in a non-rhythmical manner. O'Hara did not incorrectly recite or rhyme the alphabet, however, did not keep his eyes closed or head tilted back the entire time and was noticeably swaying.

Based on my investigation, observations, and totality of circumstances, I had probable cause to believe that Brendan O'Hara was in actual physical control of a vehicle while under the influence of an alcoholic beverage, chemical, or controlled substance, to the point where his normal faculties were impaired, contrary to F.S 316.193. He was placed into handcuffs that were properly spaced and double-locked per department policy and

SWORN AND SUBSCRIBED BEFORE ME  NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S. 317.10) 05/12/23 DATE	 <p><b>MADELIN GONZALEZ</b>          Notary Public          State of Florida          Comm# HH225716          Expires 2/7/2026</p>	 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER <b>NOBLE, RILEY (1226)</b> NAME OF OFFICER (PLEASE PRINT) 05/12/2023 DATE
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Agency ORI Number **FL 0501700** Agency Name **JUPITER POLICE DEPARTMENT** Agency Report Number **5 | 4 | 23-001959**

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

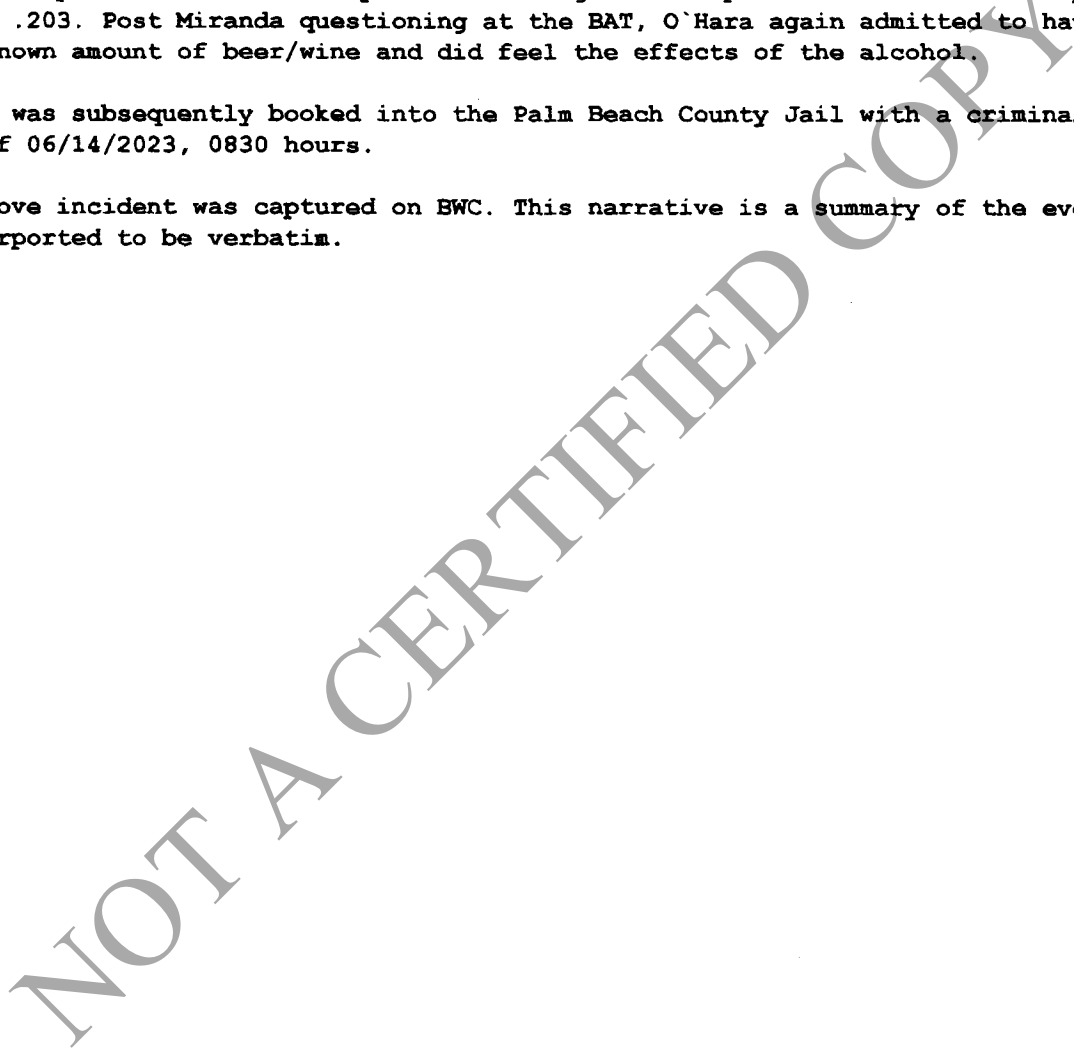
Name (Last, First, Middle) **OHARA, BRENDAN JOSEPH** Alias \_\_\_\_\_ Race **W** Sex **M** Date of Birth **11/21/1988**

secured in the rear of my patrol car at 2327 hours.

After medical clearance for the jail at the Jupiter Medical Center, I then transported O'Hara to the Palm Beach County Breath Alcohol Testing center, arriving at 0058 hours. I placed O'Hara under a 20 minute observation period, during which he neither consumed nor regurgitated anything. We then went on video with BAT technician Gonzalez#40577. I requested provide a breath sample which he agreed. He provided two breath samples of .210 & .203. Post Miranda questioning at the BAT, O'Hara again admitted to having drank an unknown amount of beer/wine and did feel the effects of the alcohol.

O'Hara was subsequently booked into the Palm Beach County Jail with a criminal court date of 06/14/2023, 0830 hours.

The above incident was captured on BWC. This narrative is a summary of the events and not purported to be verbatim.



SWORN AND SUBSCRIBED BEFORE ME  
 \_\_\_\_\_  
 NOTARY PUBLIC / CLERK OF COURT / OFFICER  
 05/12/23 DATE  
 \_\_\_\_\_  
 MADELIN GONZALEZ  
 Notary Public  
 State of Florida  
 Comm# HH225716  
 Expires 2/7/2026  
 \_\_\_\_\_  
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 NOBLE, RILEY (1226)  
 NAME OF OFFICER (PLEASE PRINT)  
 05/12/2023  
 DATE  
 PAGE 4 OF 4



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

PBSO CASE # 23 - 067117 PBSO ZONE 3-11

AGENCY CASE # 23001959 CRASH CASE # 23001959

TIME OF STOP/CRASH 2244 DATE 05/11/2023 DAY Thursday

SUBJECT'S NAME Ohara Brendan J RACE W SEX M  
LAST FIRST MID

HGT 602 WGT 190 DOB 11/21/1988

LOCATION 1116 Love Street, Jupiter FL 33477

ARRESTING OFFICER'S NAME & ID Riley Noble 1226 AGENCY Jupiter PD

DIVISION: \_\_\_\_\_

NOTIFIED BY COMMO Yes  
ARRIVAL AT FACILITY 0058  
ARREST TIME 2327

BREATH RESULTS:

- 1) .203
- 2) .210
- 3) N/A
- 4) N/A

TESTING OFFICER'S ID 40577 PBSO VIDEOTAPE # N/A

NOT A CERTIFIED COPY

# TESTING FACILITY TASK REPORT

AGENCY: JPD

SUBJECT: OHARA, BRENDAN J

DATE: May 12, 2023

BEGINNING TIME: 01:21

CASE NUMBER: 23-067117

VIDEO DVD NUMBER: N/A

ENDING TIME: 01:34

BREATH TESTS RESULTS: 1) .203 TIME 01:25 A.M.  P.M.  2) .210 TIME 01:28 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: M. GONZALEZ #40577

MAINTENANCE TECHNICAN: J. KARLECKE# 6467

## TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: CALM, QUIET

CLOTHING: GREY PANTS, WHITE SHIRT, BROWN SHOES

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

## OTHER:

EYES: GLASSY AND BLOODSHOT

## COMMENTS:

ARRIVED AT CENTER A/O BEGAN THE 20 MINUTE OBSERVATION PERIOD AT 00:58 HRS.

SUBJECT: AGREED TO TAKE TEST

A/O: READ RIGHTS

SUBJECT: STATED HE UNDERSTOOD RIGHTS.

TECH: READ TEST RESULTS

SUBJECT: STATED HE UNDERSTOOD TEST RESULTS.

A/O: CONDUCTED Q & A

SUBJECT: ANSWERED QUESTIONS



SUBJECT: \_\_\_\_\_

CASE NUMBER: \_\_\_\_\_

23001929

### 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: Officer Nade

SUBJECT: \_\_\_\_\_

CASE NUMBER: 100123

# **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) \_\_\_\_\_

WHITE: STATE ATTY.

YELLOW: DHSMV

PINK: CENTRAL RECORDS

GOLD: JAIL

# WITNESS LIST

CASE NUMBER: 23001959

ARRESTING OFFICER: Noble

ADDRESS: 196 Military Trl. Jupiter, FL 33458

PHONE NUMBERS (HOME): \_\_\_\_\_ (WORK) 561-746-6201

CAN TESTIFY TO: PC

NAME: Officer Tappin

ADDRESS: 196 Military Trl. Jupiter, FL 33458

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) 561-746-6201

CAN TESTIFY TO: back-up officer on-scene

NAME: Scott Reynolds

ADDRESS 11 TRADEWINDS CIR, JUPITER, FL 33469

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) 407-408-1057

CAN TESTIFY TO: caller/wheel witness

NAME: Officer Keilhofer

ADDRESS 196 Military Trl. Jupiter, FL 33458

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) 561-746-6201

CAN TESTIFY TO: back-up officer on-scene

NAME: \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) \_\_\_\_\_

CAN TESTIFY TO: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) \_\_\_\_\_

CAN TESTIFY TO: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) \_\_\_\_\_

CAN TESTIFY TO: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) \_\_\_\_\_

CAN TESTIFY TO: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) \_\_\_\_\_

CAN TESTIFY TO: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) \_\_\_\_\_

CAN TESTIFY TO: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) \_\_\_\_\_

CAN TESTIFY TO: \_\_\_\_\_



**Palm Beach County Sheriff's Office – Arrests Only**

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	<input type="checkbox"/>	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	<input type="checkbox"/>	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	<input type="checkbox"/>	119.071(4)(c)	Undercover personnel.	
	<input type="checkbox"/>	119.071(2)(f)	Confidential informants (CIs).	
	<input type="checkbox"/>	119.071(2)(e)	Confession.	
Public Info. Exemptions	<input type="checkbox"/>	985.04(1)	Juvenile offender records.	
	<input type="checkbox"/>	119.071(h)(i)	Assets of a crime victim.	
	<input type="checkbox"/>	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	<input type="checkbox"/>	394.4615(7)	Mental health information.	
	<input type="checkbox"/>	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)	<input checked="" type="checkbox"/>	(iii) 119.0714(1)(i)-(j), 2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	<input type="checkbox"/>	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	<input type="checkbox"/>	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	<input type="checkbox"/>	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
Other	<input checked="" type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2023012427	Date: 5/12/2023
	Specialist Name/ID: R.Castro/40259