

0551554

24 OCT 16 192 SPB

1794

ARREST NOTICE TO APPEAR

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

1 JUVENILE

| | | | | | | |
|---|---|---|--|--|--|---|
| OBTS Number | Agency ORJ Number 0500400 | | Agency Name Delray Beach Police Department | | Agency Report Number (N.T.A.'s only) 4 0 24-011120 | |
| Charge Type Check as many as apply | <input type="checkbox"/> 1 Felony | <input checked="" type="checkbox"/> 3 Misdemeanor | <input type="checkbox"/> 5 Ordinance | If Weapon Seized Enter Type: UNARMED | | Multiple Clearance Indicator 1 |
| Location of Arrest (Including Name of Business) W ATL AVE/S CONGRESS AVE, DEL BCH FL 334 | | | | Location of Offense (Business Name, Address) 1999 W ATLANTIC AVE/S CONGRESS AVE, DELRAY BEACH, | | |
| Date of Arrest 08/22/2024 | Time of Arrest 23:11 | Booking Date 08/23/2024 | Booking Time 00:29 | Jail Date 08/23/2024 | Jail Time 00:20 | Location of Vehicle |
| Name (Last, First, Middle) ROGERS ZELAYA, CONSTANCE ASHLEIGH | | | Alias: | | | |
| Race W - White B - Black | I - American Indian O - Oriental/Asian | Sex F | Date of Birth 09/01/1981 | Height 5'08 | Weight 150 | Eye Color GREEN |
| Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) | | | Marital Status U | Religion | Complexion LIGHT | Build MEDIUM |
| Local Address (Street, Apt. Number) 218 VIA D'ESTE 1305, DELRAY BEACH, FL 33445 | | | Phone (561) 460-4886 | Residence Type 1 City 2 County 3 Florida 4 Out of State | | |
| Permanent Address (Street, Apt. Number) 218 VIA D'ESTE 1305, DELRAY BEACH, FL 33445 | | | Phone (561) 460-4886 | Address Source | | |
| Business Address (Name, Street) | | | Phone | Occupation | | |
| D/L Number, State R262101818210 / FL | Soc. Sec. Number | INS Number | Place of Birth (City, State) Italy, NY | Citizenship US | | |
| 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 |
| 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 |
| Name (Last, First, Middle) | | | | | | Residence Phone |
| <input type="checkbox"/> Parent <input type="checkbox"/> Other | | | | | | Business Phone |
| Address (Street, Apt. Number) | | | | | | |
| 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. | | | | | | Grade |
| 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 Smuggle D Deliver E Use | K Disperses/ Distribute | M Manufacture/ Produce/ Cultivate |
| Drug Type N | | | Amount / Unit | Offense # | Counts | Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N |
| Charge Description DRIVING WHILE UNDER INFLUENCE | | | | | Statute Violation Number 316.193(1)A | Violation of ORD # |
| Charge Description | | | | | Statute Violation Number | Violation of ORD # |
| Charge Description | | | | | Statute Violation Number | Violation of ORD # |
| Charge Description | | | | | Statute Violation Number | Violation of ORD # |
| 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 | |
| Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input checked="" type="checkbox"/> T.O.T. County Jail | | | | | PROPERTY - Received By | Released By |
| Transported By STROUD | | | | | Date Transported 08/23/2024 | Time Transported 00:20 |
| <input checked="" type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court | | | | | Location (Court, Room) South County 200 W Atlantic Ave Delray Beach, FL 33444 | |
| <input type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court | | | | | Court Date and Time 09/12/2024 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 CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED. | | | | | No Photo Available | |
| Signature of Defendant (or Juvenile and Parent/Custodian) | | | | | Date Signed 08/22/2024 | |
| Signature of Arresting Officer | | | | | Name Verification (Printed by Arrestee) AUG 23 AM 1:47 | |
| Name of Arresting Officer (Print) STROUD, ELIZABETH | | | | | ID # 1191 | PAGE 1 OF 1 |
| Intake Deputy STROUD | | | | | ID # 1191 | Agency DBPD |
| Witness here if subject is not a juvenile | | | | | 4-IF ED PBC - GUN CLUB 24 AUG 23 AM 6:54 | |

COURT STATE ATTORNEY AGENCY CENTRAL RECORDS JAIL CRIME ANALYSIS P.I. DEFENDANT

SCANNED

AUG 23 2024

1794

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 22nd DAY OF August, 2024 AT 22:52 AM PM
IN THE CITY OF DELRAY BEACH, COUNTY OF PALM BEACH, STATE OF FLORIDA

Case No: 24011120 Defendant: Constance Rogers Zelaya
Agency: Delray Beach Police Department Arresting Ofc: OFC. ELIZABETH STROUD

PERSONAL CONTACT/DRIVING PATTERN/OBSERVATIONS OF DRIVER:

On August 22nd, 2024, Officer Garcia was stopped northbound on S Congress Ave, in the left turn lane, due to a steady red traffic signal at the intersection of W Atlantic Ave. Officer Garcia was stopped behind a red Corvette (FL Tag:17ESJ). The Corvette began moving forward into the intersection, while the light to turn westbound was still red, and continued through the intersection until it completed the maneuver. Seeing this Officer Garcia conducted a traffic stop on the vehicle. He made contact with the driver (Constance Rogers Zelaya) and noticed that her eyes were red and glossy. After talking with her, he noticed that her speech was slurred.

Officer Garcia called me to the scene to conduct a DUI Investigation. Upon my arrival, I made contact with Zelaya initially from the passenger side and switched over to the driver side. I asked Zelaya where she had been coming from and she advised Boca Raton. I noticed a smell of alcohol emanating from her breathe when she answered. Zelaya's movements in the car were slow (slow dexterity). I asked her more questions and noticed that she would not look at me. I asked Zelaya if she could look at me, but she would not. I asked Zelaya to step out of the vehicle. I opened the door for her and as she was getting out, she stumbled. I asked her to move over to the sidewalk and noticed that she was unsteady on her feet at first. I notified Zelaya of who I was and that I would be conducting a DUI Investigation. I asked her again where she was coming from and she advised Crazy Uncle Mike's. I noticed Zelaya's her eyes were glossy. I asked if she would like to participate in roadside tasks and she refused. I notified her of her Taylor Warnings, and she refused. During our conversation outside of the vehicle, she further admitted to running the red light.

Based on the above I placed Zelaya under arrest and placed her in the back of my patrol vehicle.

The foregoing instrument was sworn to before me this 22nd day of August, 2024
by Officer OFC. ELIZABETH STROUD

[Signature]
Arresting Officer
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AUG 23 2024

[Signature]
Notary/Police Officer



ROADSIDE TASKS

Case No: 24011120 Defendant: Constance Rogers Zelaya

HORIZONTAL GAZE NYSTAGMUS:

0 of 6 clues

Left Eye:

- Lack of smooth pursuit
Distinct & sustained nystagmus at maximum deviation
Onset prior to 45 degrees

Right Eye:

- Lack of smooth pursuit
Distinct & sustained nystagmus at maximum deviation
Onset prior to 45 degrees

Notes:

Refused

WALK AND TURN: 0 of 8 clues

Refused

ONE LEG STAND: 0 of 4 clues

Refused

FINGER TO NOSE: 0 of 4 clues

Refused

ROMBERG/ALPHABET: 0 of 4 clues

Refused

I then transported the defendant to the Breath Alcohol Testing Facility at the Palm Beach County Jail. Upon my arrival at 23:38 hours, I completed the required 20-minute observation. I later requested the defendant provide a sample of her breath for the purpose of determining the alcohol content. The defendant refused. When it was time to leave the breath test room, Zalaya refused. I asked her several times to exit and warned her that I would have to take her out by force. She still refused. I then grabbed her by her arm and attempted to escort her out. She dropped to the floor, and I had to pick her up from behind and carry her out.

Based on the above facts, probable cause does exist to charge defendant with one count of DUI pursuant to FSS 316.193(1). Further she was issued the following citation: Ran Red Light.

Upon completion of the booking process, defendant was turned over to Palm Beach County Jail.

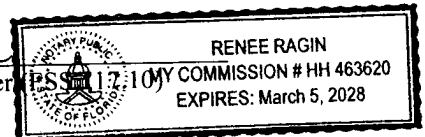
The foregoing instrument was sworn to before me this 22nd day of August, 2024 by Officer OFC. ELIZABETH STROUD

Arresting Officer [Signature]

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AUG 23 2024

Notary/Police Officer [Signature]



WITNESS LIST

Case No: 24011120 Defendant: Constance Rogers Zelaya

Arresting Officer: OFC. ELIZABETH STROUD
Address: Delray Beach Police Department
Phone Numbers: Home: 561-243-7800 Work: _____

Name: OFC Kevin Garcia
Address: Delray Beach Police Department
Phone Numbers: Home: 561-243-7800 Work: _____
Can testify to: Driving Pattern

Name: OFC Kevin Davalos
Address: Delray Beach Police Department
Phone Numbers: Home: 561-243-7800 Work: _____
Can testify to: Back up

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: _____

SCANNED

AUG 23 2024

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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AUG 23 2024

WHITE: STATE ATTY.

YELLOW: DHSMV

PINK: CENTRAL RECORDS

GOLD: JAIL

*Original

SUBJECT: Proctor, Zolva - 11, June 11. 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 _____

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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

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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) _____

SCANNED

AUG 23 2024

WHITE: STATE ATTY.

YELLOW: DHSMV

PINK: CENTRAL RECORDS

GOLD: JAIL

*Dark Copy

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? | _____ |

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AUG 23 2024

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

COPY

*Original

SUBJECT: Mar 21, 2024 CASE NUMBER: 1

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

COPY

Dark Copy

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AUG 23 2024



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

PBSO CASE #: 24-291966 PBSO ZONE: _____

AGENCY CASE #: 24011120 DHSMV CRASH #: _____

TIME OF CRASH/STOP: 22:52 DATE: 08/22/2024 DAY: Thursday

DEFENDANT: Constance Rogers Zelaya RACE: W SEX: F

HGT: 508 WGT: 170 DOB: 09/01/1981

LOCATION: W Atlantic Ave/S Congress Ave

ARRESTING OFC: OFC. ELIZABETH STROH ID: 1191 AGENCY: Delray Beach Police

DIVISION: Patrol

NOTIFIED BY COMM: V

ARRIVAL AT FACILITY: 23:38

TIME OF ARREST: 23:11

BREATH RESULTS:

- 1.
- 2.
- 3.

REFUSED

TESTING OFC. ID: 16877

PBSO VIDEOTAPE #: N/C

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AUG 23 2024

TESTING FACILITY TASK REPORT

AGENCY: DBPD

SUBJECT: Rogers Zelaya, Constance A.

CASE NUMBER: 24-091966

DATE: Aug 23, 2024

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 00:03

ENDING TIME: 00:09

BREATH TESTS RESULTS: 1) Refused TIME 00:08 A.M. P.M. 2) N/A TIME _____ A.M. P.M.

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

BREATH OPERATOR: R. Ragin #16877

MAINTENANCE TECHNICAN: Jason Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: Slurred

ATTITUDE: Agitated, uncooperative, rude, slow

CLOTHING: Blue pants, blue & white tank shirt, blue shoes

MEDICAL CONDITIONS: None of your business

MEDICATIONS: My lawyer

OTHER:

Eyes are glassy & red

COMMENTS:

Arrived at center A/O started 20 minute observation period at 23:38 hrs.

Subject refused to perform breath test.

A/O read I/C and explained I/C.

Subject talking over A/O.

A/O called refusal.

A/O read rights.

Subject invoked the right to counsel.

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AUG 23 2024

**STATE OF FLORIDA
DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES
AFFIDAVIT OF REFUSAL TO SUBMIT TO
BREATH AND/OR URINE TEST**

I, OFC. ELIZABETH STROUD, a duly certified Law Enforcement Officer or Correctional Officer,
(Name of Officer reading Implied Consent Warning)

am a member of Delray Beach Police Department, and I do swear
(Name of Law Enforcement Agency)

or affirm that on or about the 22nd day of August, 2024 at 23:11 AM PM

driver Constance Rogers Zelava
(First Name) (Middle or Maiden Name) (Last Name)

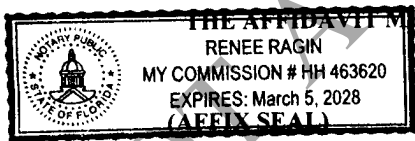
DL # R262101818210, state of Florida, was placed under arrest for
the offense of Driving Under the Influence FSS 316 by OFC. ELIZABETH STROUD and
(Name of Arresting Officer)

Issued citation # _____

That on or about the 22nd day of August, 2024 at _____ AM PM
in Palm Beach County,

I requested that the driver submit to a **breath and/or** **urine** test to determine his or her blood alcohol level and/or the presence of chemical or controlled substances. I informed the driver that the refusal to submit to such test(s) would result in the suspension of his or her driving privilege for a period of one (1) year for a first refusal, or for a period of eighteen (18) months if his or her driving privilege had been previously suspended for refusing to submit to a breath, urine or blood test. I also informed the driver that he or she commits a misdemeanor by refusing to submit to a lawful test as requested above if his or her driving privilege has been previously suspended for refusal to submit to a lawful test of his or her breath, urine, or blood. Additionally, I informed the driver that if he or she holds a CDL, or was operating a CMV, refusal will result in the disqualification of the Commercial Driver's License/driving privilege for a period of one (1) year in the case of a first refusal or permanently if he or she has previously been disqualified as a result of a refusal to submit to any such lawful test. Nonetheless, the driver refused to submit to the test(s) requested.

[Signature]
Signature of Law Enforcement Officer or Correctional Officer



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

The foregoing instrument was sworn and subscribed before me:

The foregoing instrument was sworn and subscribed before
me this 22nd day of August, 2024
by OFC. ELIZABETH STROUD
who is personally known to me or who has produced
[Signature] as identification.

(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.

SCANNED

AIIG 23 2024

Florida

DRIVER LICENSE



USA

R262-101-81-821-0

CLASS E



1a DL#
**ROGERS ZELAYA
2 CONSTANCE ASHLEIGH
3 218 VIA D ESTE APT 1305
4 DELRAY BEACH, FL 33445**

5 DOB: **09/01/1981** 6 SEX **F**
7a EXP: **09/01/2024** 8 HGT **5'-08"**
9a REST **B** 9b END **A**

DONOR

SAFE DRIVER

4a SS **08/27/2015**

5DD X652311091638

REPLACED **11/09/2023**

Operation of a motor vehicle constitutes consent to any sobriety test required by law.



NOT A CERTIFIED COPY

SCANNED

AUG 23 2024



Palm Beach County Sheriff's Office

Florida State Statute Exemption Sheet

| | X | Florida State Statute | Description | Page Number(s) |
|--|-------------------------------------|--------------------------------------|--|----------------|
| L/E Exemptions | <input type="checkbox"/> | 119.071(4)(c) | Undercover personnel | |
| | <input type="checkbox"/> | 119.071(2)(e) | Confession | |
| Public Info. Exemptions | <input type="checkbox"/> | FL Const. Art. I, s. 16(b)(5) | Marsy's Law – victim information shall be redacted. The term "victim" also includes the victim's lawful representative, the parent or guardian of a minor, or the next of kin of a homicide victim. The term "victim" does not include the accused (ref. page 99 of the CRTM for additional information) | |
| | <input type="checkbox"/> | 119.071(2)(j) | Home/employment telephone number, home/employment address, or personal assets of a person who has been the victim of sexual battery, aggravated child abuse, aggravated stalking, harassment, aggravated battery or domestic violence | |
| | <input type="checkbox"/> | 119.0712(2) | Personal information contained in a motor vehicle record | |
| | <input type="checkbox"/> | 316.650(11) | Driver information contained in a uniform traffic citation | |
| | <input type="checkbox"/> | 119.071(4)(d)2.a. | Home addresses, telephone numbers, dates of birth, and photographs of active/former LE personnel, spouses, and children | |
| Florida Rules of Judicial Administration 2.420 | <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"/> | (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"/> | | | |
| Other | <input type="checkbox"/> | | | |
| | <input type="checkbox"/> | | | |
| | <input type="checkbox"/> | | | |
| | <input type="checkbox"/> | | | |

REVIEW COMPLETED BY

| | |
|----------------------------|---------------------------------------|
| Booking Number: 2024022749 | Date: 8/23/2024 |
| | Specialist Name/ID#: Joe Kovach 44820 |

SCANNED

AUG 23 2024