

0457449

2ACT16891 ASB

3058

ARREST / NOTICE TO APPEAR

- 1. Arrest (No Warrant)
- 2. N.T.A.
- 3. Request for Warrant
- 4. Request for Capias
- 5. Juvenile Referral

1 JUVENILE

ADMI NISTR ATION	OBTS Number		Agency ORI Number 0500200		Agency Name Boca Raton Police Department		Agency Report Number (N.T.A.'s only) 3 2 2024-010284		Multiple Clearance Indicator									
DEF END ANT	Charge Type: Check as many as apply		Location of Offense (Business Name, Address) 50 SE 1ST AVE, BOCA RATON, FL 33432		Location of Offense (Business Name, Address) 100 S DIXIE HWY, BOCA RATON, FL 33432		If Weapon Seized Enter Type UNARMED		Multiple Clearance Indicator									
	Date of Arrest 09/01/2024		Time of Arrest 20:57		Booking Date 09/01/2024		Booking Time 21:07		Jail Date 09/01/2024									
	Jail Time 21:06		Location of Vehicle TOWED		Alias (Name, DOB, Soc. Sec. #, Etc.)													
	Name (Last, First, Middle) DARMETTA, DANIELLE RENEE						Alias:											
C O D E F	Race		Sex		Date of Birth 03/18/1979		Height 5'06		Weight 145		Eye Color BROWN		Hair Color BLONDE		Complexion LIGHT		Build Small	
	Marital Status S		Religion NONE		Indication of Alcohol Influence Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk. <input type="checkbox"/>		Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)		Residence Type: 1. City 3. Florida 2. County 4. Out of State 13									
	Local Address (Street, Apt. Number) (City) (State) (Zip) 5841 RIVERSIDE DR 105, CORAL SPRINGS, FL 33067				Phone (954) 790-9464				Address Source FLDL									
	Permanent Address (Street, Apt. Number) (City) (State) (Zip) 5841 RIVERSIDE DR 105, CORAL SPRINGS, FL 33067				Phone (954) 790-9464				Occupation UNEMPLOYED									
	Business Address (Name, Street) (City) (State) (Zip) UNEMPLOYED				D/L Number, State D653176795980 / FL				Place of Birth (City, State) CINNCINATI, OH									
J U V E N I L E	Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		Citizenship US		Residence Phone							
	Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		Citizenship		Residence Phone							
	Name (Last, First, Middle)		Relationship		Date		Time		Residence Phone		Business Phone							
C H A R G E	Parent <input type="checkbox"/> Other <input type="checkbox"/>		Legal Custodian <input type="checkbox"/>		Address (Street, Apt. Number) (City) (State) (Zip)		Notified by: (Name) Date Time		JUVENTILE 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.		Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Description of Property		Value of Property		School Attended		Grade							
	Drug Activity		S. Sell		R. Smuggle		K. Disperse/Distribute		M. Manufacture/Produce/Cultivate		Z. Other							
	N. N/A		B. Buy		D. Deliver		E. Use		Drug Type		B. Barbiturate							
C H A R G E	Charge Description DRIVE UNDER INFLUENCE ALC		Statute Violation Number 316.193(1A)		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 1,500		Violation of ORD #							
	Charge Description REFUSE TO SUBMIT TO BAL TEST		Statute Violation Number 316.1939 (1)		Violation of ORD #		Drug Activity		Drug Type		Amount / Unit							
I N T E R V E W	Health / Apparent Physical Condition of Defendant GOOD		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"/> Injury		Explain:		PROPERTY - Received By ROSARIO		Released By ROSARIO		Released To RBCJ GUN CLUB							
	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		Transported By ROSARIO		Date Transported 09/01/2024		Time Transported 21:06		Other FILED TOG		24 SEP 2 AM 6:18							
	<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) South County 200 W Atlantic Ave Delray Beach, FL 33444		Court Date and Time 09/30/2024 08:30:00		No Photo Available									
A D M I N	HOLD for Other Agency		Signature of Arresting Officer		Name Verification (Printed by Arrestee)		Signature of Defendant (or Juvenile and Parent/Custodian)		Date Signed									
	<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest		Name of Arresting Officer (Print) ROSARIO, J. G.		(PRINT) SEP 1 11:17		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.		Witness here if subject signed with an "X".		PAGE 1 OF 1							
	<input type="checkbox"/> Suicidal <input type="checkbox"/> Other		Transferring Officer ROSARIO		I.D.# 862		Agency BOCA											

PROBABLE CAUSE AFFIDAVIT

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

1

JUVENILE

OBTS Number	Agency ORI Number FL FLO500200		Agency Name BOCA RATON POLICE DEPARTMENT		Agency Report Number 3 2 2024-010284	
Charge Type: Check as many as apply						Special Notes
<input type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other						

Name (Last, First, Middle) DARMETTA, DANIELLE RENEE	Alias	Race W	Sex F	Date of Birth 03/18/1979
---	-------	------------------	-----------------	------------------------------------

Charge Description 316.193(1A) DUI	Charge Description 316.1939 REFUSE TO SUBMIT TO BAL TEST
--	--

Victim's Name (Last, First, Middle) STATE OF FLORIDA,	Race U	Sex U	Date of Birth
Local Address (Street, Apt. Number) 100 NW 2ND AVE, BOCA RATON, FL 33432	Phone (561) 338-1234	Address Source	
Business Address (Name, Street) 100 NW 2ND AVE, BOCA RATON, FL 33432	Phone (561) 338-1234	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 1 day of September, 2024 at 21:12 (Specifically include facts constituting cause for arrest.)

On 09/01/2024 at 1824 hours, I arrived at 99 S Dixie Hwy regarding BRPD case number 24-10284. The following incident occurred in the City of Boca Raton, County of Palm Beach.

Upon arrival, Ofc. Crowe was in the process of conducting a traffic accident investigation involving Danielle Darmetta who was sitting in the driver seat of her black Volkswagen Tiguan (FL tag HHRR10) which was stationary on SE 1st St. After Ofc. Crowe concluded his traffic crash investigation, I advised Danielle that I would be conducting a criminal investigation into her driving under the influence of alcohol, after smelling an overwhelming odor of alcohol emanating from her breath. Additionally, I heard audibly slurred speech while she was speaking. I read Danielle her constitutional warnings from a pre-printed card. She advised that she understood her rights and wanted to speak with me.

She stated that she was previously at a friend's house and had consumed two Sake drinks within the last two hours. I asked Danielle if she wanted to participate in Field Sobriety Exercises (FSEs), and she agreed. It should be noted that it was later determined that she was at a sushi bar in Delray Beach called Yama Sushi.

After repositioning my BRPD marked unit (478), I had Danielle stand at the front of my vehicle before beginning. Prior to performing the tasks, Danielle advised she is healthy, does not suffer from any medical conditions at this point in her life, and was not diabetic. The roadway was wet and there was a slight drizzle.

The first exercise I conducted was the Horizontal Gaze Nystagmus (HGN). Danielle identified the stimulus as red. She had equal pupil size and equal tracking in both eyes. Her eyes continued to jump as she attempted to follow the stimulus. In conducting the exercise, I was able to observe a Lack of Smooth Pursuit, Distinct and Sustained

SWORN AND SUBSCRIBED BEFORE ME

KENISTON, ADAM CRAIG

NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

09/01/2024
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

ROSARIO, JONATHAN GLENN (862)
NAME OF OFFICER (PLEASE PRINT)

09/01/2024
DATE

PAGE
1 OF 2

PROBABLE CAUSE AFFIDAVIT
SUPPLEMENT

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

1 JUVENILE

OBTS Number	Agency ORI Number FL FLO500200		Agency Name BOCA RATON POLICE DEPARTMENT	Agency Report Number 3 2 2024-010284
Charge Type: Check as many as apply <input type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other				Special Notes:

Name (Last, First, Middle) DARMETTA, DANIELLE RENEE	Alias	Race W	Sex F	Date of Birth 03/18/1979
---	-------	------------------	-----------------	------------------------------------

Nystagmus at Maximum Deviation, and the onset of Nystagmus before 45 degrees. While giving the instructions Danielle continued to sway.

The second exercise that I conducted was the walk and turn. The surface was flat, and hard, and Danielle conducted the exercise without shoes. The line used was a painted white line. I made sure Danielle knew the line she would be using and the color of that line. I began the exercise by instructing and demonstrating to her how to complete the exercise. Danielle began the exercise before being told to do so. Upon beginning the exercise, she failed to take the required number of steps counting every other step up to 10 after turning to walk back, she counted every other step taking 16 steps. She additionally failed to maintain her balance.


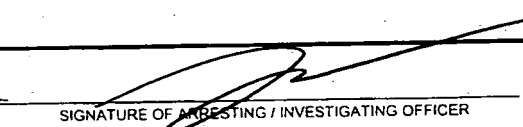
The next exercise that I conducted was the one-leg stand. The surface was hard and flat, and Danielle conducted the exercise without shoes. I began the exercise by instructing and demonstrating to her how to complete the exercise. Danielle began the exercise by lifting her left leg. During the exercise, Danielle used her left leg and was able to maintain her balance counting to 24. It should be noted that she stayed intently looking at the ground and once she looked up was unable to maintain her balance.

The next exercise was Finger to Nose. The surface was hard and flat, and Danielle conducted the exercise without shoes. I began the exercise by instructing and demonstrating to her how to complete the exercise. Danielle performed the exercise in the sequence Left, Right, Left, Right, Right, Left. When giving the fifth command of "Right" the female began to lift her "Left". Additionally, I observed her swaying.

The final exercise that I conducted was to have Danielle estimate 30 seconds. The surface was hard and flat, and Danielle performed the exercise without shoes. I began the exercise by instructing and demonstrating to her how to complete the training. After starting the exercise, she estimated the 30 seconds to be 27 seconds.

Danielle was placed into custody and transported to the Boca Raton Police Department (100 NW 2nd Ave) where Ofc. Coon conducted a 20-minute observation and was the Breath Test Operator. It should be noted that during the 20-minute observation, she spontaneously uttered multiple times that she should have fled from the crash she was involved in after rear-ending another driver. Danielle refused to provide a breath sample and was read her implied consent.

As a result of my investigation, she was found to be in violation of F.S.S. 316.193(1A), Driving Under the Influence, after she was found to be impaired while driving following a crash investigation. Additionally, she was charged in violation of F.S.S. 316.1939, Refusal to submit to a lawful test for Breath, Urine, or Blood second offense. She was TOT PBCJ after obtaining medical clearance at Boca Raton Regional Hospital.

SWORN AND SUBSCRIBED BEFORE ME	SIGNATURE OF ARRESTING / INVESTIGATING OFFICER
	
KENISTON, ADAM CRAIG NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)	ROSARIO, JONATHAN GLENN (862) NAME OF OFFICER (PLEASE PRINT)
09/01/2024 DATE	09/01/2024 DATE

2024010284

10-15-1905

20MIN-1929

DARMETTA, DANIELLE R.

DUI INFLUENCE REPORT



BOCA RATON POLICE SERVICES DEPARTMENT

100 NW 2nd Avenue

Boca Raton, FL 33432



BOCA RATON POLICE SERVICES DEPARTMENT
DUI INFLUENCE REPORT - PART I

On the _____ day of _____, at _____ AM/PM.

Subject: _____ Case Number: _____

PERSONAL CONTACT

Driving Pattern: _____

Observation of Driver: _____

Driver's Statement: _____

Odors: _____

GENERAL OBSERVATIONS

Speech: _____

Attitude: _____

Clothing: _____

Medical Problems: _____

Medications: _____

Other: _____

Horizontal Gaze Nystagmus:

- | | |
|--|---|
| <input type="checkbox"/> Left eye does not follow smoothly | <input type="checkbox"/> Right eye does not follow smoothly |
| <input type="checkbox"/> Left eye jerks at 45 degrees angle or less | <input type="checkbox"/> Right eye jerks at 45 degrees angle or less |
| <input type="checkbox"/> Distinct jerking left eye maximum deviation | <input type="checkbox"/> Distinct jerking right eye maximum deviation |

Can not do, Why? _____

Walk and turn: _____

Can not do, Why? _____

One leg stand: _____

Can not do, Why? _____

Finger to nose: _____

Can not do, Why? _____

Alphabet (speech pattern): _____

Can not do, Why? _____

Breath/Blood test results: _____

State of Florida, County of Palm Beach,
Sworn and subscribed before me this _____ (date) by _____

Notary/Clerk of Court/ Officer (FSS 117.10) Date

Signature of Arresting Officer Name of Officer (print)

ARRESTING OFFICER: OFF. ROSARIO

Name: OFF. ROSARIO Phone # 5613686201 Work # _____

Address: 100 NW 2ND AVE, BOCA RATON, FL, 33432

Can testify to: DUI INVESTIGATION

Name: OFF. CROWE Phone # 5613686201 Work # _____

Address: 100 NW 2ND AVE, BOCA RATON, FL, 33432

Can testify to: CRASH INVESTIGATION

Name: OFF. COSEN Phone # 5613686201 Work # _____

Address: 100 NW 2ND AVE, BOCA RATON, FL, 33432

Can testify to: BREATH TEST OPERATOR

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____



BOCA RATON POLICE SERVICES DEPARTMENT
DUI INFLUENCE REPORT - PART II

To be filled out at testing facility

Agency Case # 2024010284

I. INTRODUCTION (Instrument Operator faces video camera)

A. The day is SUNDAY, SEPTEMBER, 01, 2024.
(day) (month) (date) (year)

B. The time is now approximately 1954 AM/PM.

C. The following is in reference to case number 2024010284.

D. Present at this time is OFF. ROSARIO & OFF. COUN of the Boca Raton Police Department.
(Officer's Name)

E. Officer ROSARIO, have you arrested DARMETTA, DANIELLE in violation of
Florida State Statute 316.193? (Defendant's name)

F. Did this violation occur within the City of Boca Raton, Palm Beach County, Florida? YES

G. Mr./Mrs./Ms. DARMETTA, I am required to inform you these
proceedings are being video recorded.

Operator Note: *Video record breath request, breath sample, and interview.*

NOT A CERTIFIED COPY

II. AT THIS TIME THE ARRESTING OFFICER WILL REQUEST A BREATH SAMPLE.

Note: Read only the paragraph applicable to the type of test you are requesting.

- A. I am now requesting that you submit to a lawful test of your **BREATH** for the purpose of determining its alcohol content.
- B. 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.
- C. I am now requesting that you submit to a lawful test of your **BLOOD** for the purpose of determining its alcohol content and the presence of chemical or controlled substances.

IMPLIED CONSENT WARNINGS

Note: Read only if the subject does not comply with your request.

I am OFF. ROSARIO of the BOCA RATON PD.

If you fail to submit to the test I have requested of you, your privilege to operate a motor vehicle will be suspended for a period of one (1) year for a first refusal, or eighteen (18) months if your privilege has been previously suspended as a result of a refusal to submit to a lawful test of your breath, urine, or blood. Additionally, if you refuse to submit to the test I have requested of you and if your driving privilege has been previously suspended for a prior refusal to submit to a lawful test of your breath, urine, or blood, you will be committing a misdemeanor. Refusal to submit to the test I have requested of you is admissible into evidence in any criminal proceeding.

Subject Signature: SEE VIDEO

Note: Also read for CDL holders:

IN ADDITION, your refusal to submit will result in the loss of your commercial privileges for one year from today. If this is your SECOND REFUSAL, you will be permanently disqualified from operating a commercial motor vehicle.

Note: After reading the implied consent warning, the arresting officer must request a breath sample again.

(IF REFUSAL THEN)

At this time Mr./Mrs./Ms. DARMETTA has refused to submit to a breath test.

The date is SEPTEMBER 01, 2024, and the time is 2000 AM/PM.

(month) (day) (year)

A refusal form will be completed by the arresting officer.



BOCA RATON POLICE SERVICES DEPARTMENT
JUVENILE CONSTITUTIONAL WARNINGS

Rights of suspects prior to custodial questioning.
Identify yourself and state:

I am required to warn you before you make any statement that you have the following Constitutional rights:

- (1) You have the right to remain silent and not answer any questions. *Tell me in your own words what you think this means.*
(You do not have to talk to me or answer any questions about this offense. You can be quiet if you want.)
- (2) Any statement you make must be freely and voluntarily given. *Tell me in your own words what you think this means.*
(If you do talk to me it has to be because you want to and not because anyone is forcing you to speak.)
- (3) You have a right to the presence and representation of a lawyer of your choice before you make any statement and during any questioning. *Tell me in your own words what you think this means.*
(You can talk to a lawyer before we ask you any questions and you can have him/her with you now, during our questioning.)
- (4) If you cannot afford a lawyer, you are entitled to the presence and representation of a court appointed lawyer before you make any statement and during any questioning. *Tell me in your own words what you think this means*
(If you do not have money for a lawyer and you want one, a lawyer will be given to you for free.)
- (5) If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent. *Tell me in your own words what you think this means.*
(If you decide to talk to me then change your mind, you can stop answering my questions at any time.)
- (6) I can make no threats or promises to induce you to make a statement. This must be of your own free will. *Tell me in your own words what you think this means*
(I am not allowed to threaten you or make you any promises to get you to talk to me. If you decide to talk, it must be because you want to.)
- (7) Any statement can be and will be used against you in a court of law. *Tell me in your own words what you think this means*
(Anything you say to me can and will be told to the judge or a jury in court. A judge is a person who decides if you have done something wrong. Sometimes a group of people called a jury decide this, but the Judge is the person who decides what punishment you get.)
- (8) Do you understand these rights as I have read them to you, and do you wish to speak to me?

Signed: _____ Date: _____ Time: _____



BOCA RATON POLICE SERVICES DEPARTMENT
TESTING FACILITY TASK REPORT

SUBJECT: DARMETTA, DANIELLE

CASE #: 2024010284 DATE: 09/01/24

BREATH TEST RESULTS

1) TIME _____ AM/PM 2) TIME _____ AM/PM
3) TIME _____ AM/PM 4) TIME _____ AM/PM

BREATH OPERATOR: OFC COON

MAINTENANCE TECHNICIAN: OFC. CRAWFORD

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED, REPETITIVE

ATTITUDE: COOPERATIVE

CLOTHING: RED DRESS

MEDICAL CONDITION: _____

OTHER: CONTINUALLY STATED THAT SHE SHOULD
HAVE LEFT THE SCENE OF THE CRASH.

COMMENTS: _____

Identify yourself and state:

I am required to warn you before you make any statement that you have the following Constitutional rights:

- (1) You have the right to remain silent and not answer any questions.
- (2) Any statement you make must be freely and voluntarily given.
- (3) You have a right to the presence and representation 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 and representation of a court appointed lawyer before you make any statement 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 be and will be used against you in a court of law.
- (8) Do you understand these rights as I have read them to you, and do you wish to speak to me?

Signed: READ ON SCENE Date: _____ Time: _____

QUESTIONS AND ANSWERS

Were you operating a motor vehicle at the time of the accident/stop? _____

Where were you going? _____

What street or highway were you on? _____

Direction of travel? _____

Where did you start driving from? _____

What city (county) were you stopped in? _____

What time did you start? _____ AM/PM What time is it now? _____

What is today's date? _____ What day of the week is it? _____

When did you last eat? _____ What did you eat? _____

What have you been doing the past three hours prior to this stop/accident? _____

How much do you weigh? _____ Have you been drinking? _____ What were you drinking? _____

How much? _____ Where? _____ With whom were you drinking? _____

When did you have your first drink? _____ AM/PM When did you stop drinking? _____ AM/PM

How did you consume your last two drinks? _____

Are you under the influence of alcohol now? Yes No

Can you feel the effects of alcohol? Yes No

Have you consumed alcohol since the accident? Yes No

Can you feel the effects of alcohol? Yes No

Have you consumed alcohol since the accident? Yes No How much? _____

What? _____ Where? _____

What line of work are you in? _____

When did you last work? _____

Do you have any physical defects or injuries? Yes No If yes, explain: _____

Are you sick or injured? Yes No If yes, explain: _____

Do you limp? Yes No Did you get a bump on the head? Yes No

Were you in an accident today? _____

Have you taken any drugs or smoked marijuana today? _____

What? _____ When? _____

Have you seen a doctor or dentist today? Yes No Who? _____

Are you taking any prescription medications? Yes No What? _____ When? _____

Do you have: Epilepsy? Yes No Inner ear trouble? Yes No

Glass eye? Yes No Ear infection? Yes No

False teeth? Yes No Diabetes? Yes No

Any problems not correctable by glasses or contact lenses? _____

Do you take insulin? Yes No If yes, when was your last injection? _____

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

I am now ending this video recording. The time is now approximately 2:00 AM/PM.

The date is SEPTEMBER, 01, 2024.
(month) (day) (year)

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

Instrument Type: Intoxilyzer 8000
Instrument Registered To: BOCA RATON PD
Instrument Serial Number: 80-006622 Software: 8100.27
Date of Test: 09/01/2024

Date of Last Agency Inspection: 08/15/2024

Observation Period Began: 19:29

Subject's Name: DANIELLE R DARMETTA

DOB: 03/18/1979 Sex: F

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	19:58
	Air Blank	0.000	19:59
	Control Test	0.079	19:59
	Air Blank	0.000	20:00
	Subject Sample #1	REF*	20:00
	Air Blank	0.000	20:00
	Control Test	0.078	20:00
	Air Blank	0.000	20:01
	Diagnostics Check	OK	20:01

*Subject Test Refused

Cylinder Lot: 08223080A3
Exp: 06/05/2025

State of Florida, County of PAUM 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 REBECCA L COON, 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: 09/01/24

Sworn to (or affirmed) before me this 01 day of SEPTEMBER 2024

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.

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

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

am a member of Boca Raton Police Services Department, and I do swear
(Name of law enforcement agency)

or affirm that on or about the 01 day of SEPTEMBER, 2024, at 1905 P.M. A.M.

DRIVER DANIELLE RENKE DARMETTA,
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# D653176795980, state of FLORIDA, was placed under lawful arrest for

the offense of DUI by OFC. ROSARIO and
(Name of Arresting Officer)

issued Citation # ATVGPSE

That on or about the 01 day of SEPTEMBER, 2024, at 2000 P.M. A.M.

in PAVING 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:

[Signature] #7941
Signature of Attesting Officer

Title OFFICER

Date 09/01/24

(AFFIX SEAL)
The foregoing instrument was sworn and subscribed before
me this _____ day of _____, 20____,
by _____,
who is personally known to me or who has produced
_____ as identification
Notary Public _____

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.



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"/>			
	<input type="checkbox"/>			
Other	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			

REVIEW COMPLETED BY

Booking Number: 2024023657	Date: 9/2/2024
	Specialist Name/ID#: T. Howard/7185