

J# 0561503 25CT15222 SB 1112

☐ Mays's Law CVI FL Const. Art. 1 § 16(b)		ARREST / NOTICE TO APPEAR		☐ Check if Supplement is Attached	
1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias		1		Juv. 1	
Agency ORI Number 0500400		Agency Name Delray Beach Police Department		Agency Report Number (N.T.A.'s only) 40 25-010575	
Charge Type: ☐ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other		If Weapon Seized		Multiple Clearance Indicator 1	
Enter Type UNARMED					
Location of Arrest (Including Name of Business) 101 W ATLANTIC AVE, DELRAY BEACH FL		Location of Offense (Business Name, Address) 101 W ATLANTIC AVE, DELRAY BEACH, FL 33444			
Date of Arrest 09/19/2025	Time of Arrest 01:45	Booking Date 09/19/2025	Booking Time 01:55	Jail Date // : :	Jail Time
Location of Vehicle					
Name (Last, First, Middle) GROBLER, DEVON					
Alias:					
Race W - White I - American Indian B - Black O - Oriental/Asian	Sex W M	Date of Birth 01/05/2000	Height 5'07	Weight 200	Eye Color BLUE
Hair Color BROWN	Complexion LIGHT	Build HEAVY			
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)			Mental Status S	Religion NOT INDICA	Indication of Alcohol Influence Drug Influence
Local Address (Street, Apt. Number) 7031 VENTURA CT, PARKLAND, FL 33445			(City)	(State)	(Zip)
Permanent Address (Street, Apt. Number) 7031 VENTURA CT, PARKLAND, FL 33445			(City)	(State)	(Zip)
Business Address (Name, Street)			(City)	(State)	(Zip)
D/L Number, State 0614160000050 / FL		Soc. Sec. Number		INS Number	Place of Birth (City, State) GAUTENG, South Africa
Citizenship US					
Co-Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth	☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile
Co-Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth	☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile
☐ Parent ☐ Legal Custodian ☐ Other		Name (Last) (First) (Middle)		Residence Phone	
Address (Street, Apt. Number)		(City) (State) (Zip)		Business Phone	
Notified by: (Name)		Date	Time	Juvenile Disposition 1. Handed/Processed within Dept. and Released 2. TOT HRS/DYS 3. Incarcerated	
Released To: (Name)		Relationship		Date	Time
The above address was provided by ☐ defendant and/or ☐ defendant's parents. The child and/or parent was told to keep the Juvenile Court Clerk's Office (Phone (561) 355-8511) informed of any change of address.				School Attended Grade	
☐ Yes, by: (Name) ☐ No (Reason)		Property Crime? ☐ Yes ☐ No		Description of Property PALM TREE / STREET SIGN Value of Property \$10,000	
Drug Activity ☐ N. N/A ☐ S. Sell ☐ R. Smuggle ☐ K. Disperse/ Distribute ☐ M. Manufacture/ Produce/ Cultivate ☐ Z. Other		Drug Type N. N/A A. Amphetamine B. Barbiturate C. Cocaine E. Heroin H. Hallucinogen I. Marijuana O. Opium/Derv. P. Paraphernalia/ Equipment S. Synthetic U. Unknown Z. Other		Statute Violation Number 316.193 & C. 316.193 (C.)	
Charge Description DWI/DUI (ALCOHOL & DRUGS)		Counts 1	Domestic Violence ☐ Y ☐ N	Violation of ORD #	
Drug Activity Drug Type Amount / Unit		Offense #		Warrant / Capias Number	
Charge Description		Counts	Domestic Violence ☐ Y ☐ N	Statute Violation Number	
Drug Activity Drug Type Amount / Unit		Offense #		Warrant / Capias Number	
Charge Description		Counts	Domestic Violence ☐ Y ☐ N	Statute Violation Number	
Drug Activity Drug Type Amount / Unit		Offense #		Warrant / Capias Number	
Charge Description		Counts	Domestic Violence ☐ Y ☐ N	Statute Violation Number	
Drug Activity Drug Type Amount / Unit		Offense #		Warrant / Capias Number	
Location (Court, Room Number, Address) 200 W Atlantic Ave DELRAY BEACH					
Court Date and Time Month October Day 15 Year 2025 Time 8:30 (A.M.) P.M.					
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					
I understand that standard text message rates may apply, and that I may revoke my consent via the text message system if I choose.					
Signature of Arresting Officer HCS		Name Verification (Printed by Arrestee)		Date Signed	
Name of Arresting Officer (Print) GREEN, TRAVIS		ID # 1155		Agency DBPD	
Transporting Officer GREEN		ID # 1155		Agency DBPD	
Witness here if subject signed with an "X"		1 of 1			

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 19 DAY OF SEPTEMBER 20 25 AT 0108 AM PM
SUBJECT: GROBLER DEVON CASE NUMBER: 25-010575
AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: GREEN

PERSONAL CONTACT

DRIVING PATTERN: ACTUAL PHYSICAL CONTROL (PHYSICAL EVIDENCE OR STATEMENTS PUTTING DEF. BEHIND WHEEL OF VEHICLE)
ON SEPTEMBER 19, 2025, I WAS DISPATCHED TO 101 W ATLANTIC AVE, REGARDING A SINGLE VEHICLE CAR CRASH VS. TREE. THE DEFENDANT WAS STANDING OUTSIDE OF HIS VEHICLE UPON MY ARRIVAL. THE DEFENDANT STATED THE FOLLOWING: HE WAS LEAVING TIN ROOF BAR AFTER WATCHING A FOOTBALL GAME. WHILE DRIVING WESTBOUND ON W ATLANTIC AVE, ANOTHER VEHICLE CHALLENGED HIM TO RACE AND HE ACCEPTED. WHILE RACING HE LOST CONTROL OF HIS VEHICLE AND CRASHED INTO A TREE AND A STREET SIGN. WHILE AT TIN ROOF HE HAD HIS LAST BEER AT APPROXIMATELY 2000 HRS.

OBSERVATION OF DRIVER:

WHILE SPEAKING WITH THE DEFENDANT, IT WAS APPARENT THAT HE MAY HAVE BEEN UNDER THE INFLUENCE OF AN UNKNOWN ALCOHOL SUBSTANCE. THE DEFENDANT HAD THE ODOR OF ALCOHOL OF AN UNKNOWN ALCOHOLIC BEVERAGE COMING FROM HER BREATH. THE DEFENDANT HAD SLURRED SPEECH, GLOSSY EYES AND A FLUSH FACE.

DRIVER'S STATEMENTS:

THE DEFENDANT STATED THE FOLLOWING: HE WAS LEAVING TIN ROOF BAR AFTER WATCHING A FOOTBALL GAME. WHILE DRIVING WESTBOUND ON W ATLANTIC AVE, ANOTHER VEHICLE CHALLENGED HIM TO RACE AND HE ACCEPTED. WHILE RACING HE LOST CONTROL OF HIS VEHICLE AND CRASHED INTO A TREE AND A STREET SIGN. WHILE AT TIN ROOF HE HAD HIS LAST BEER AT APPROXIMATELY 2000 HRS.

ODORS:

UNKNOWN ODOR OF ALCOHOL FROM HER BREATH.

GENERAL OBSERVATIONS

SPEECH: SLURRED,

ATTITUDE: COOPERATIVE

CLOTHING: MIAMI DOLPHINS JERSEY, BLUE JEANS, AND TENNIS SHOES

MEDICAL/OTHER: NONE

STATE OF FLORIDA
COUNTY OF PALM BEACH

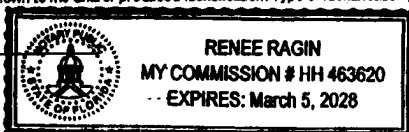
GREEN

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to, affirmed and subscribed before me this 19 day of SEPTEMBER 20 25 by GREEN

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

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



SUBJECT GROBLER

DEVON

CASE NUMBER 25-010575

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

☐

LT EYE-LACK OF SMOOTH PURSUIT

☐

RT EYE-LACK OF SMOOTH PURSUIT

☐

LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION

☐

RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION

☐

LT EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

☐

RT EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

Other Observations:

NONE

WALK & TURN:

DEFENDANT REFUSED SFST.

ONE LEG STAND:

DEFENDANT REFUSED SFST.

FINGER TO NOSE:

DEFENDANT REFUSED SFST.

ROMBERG ALPHABET:

DEFENDANT REFUSED SFST.

BREATH TEST RESULTS:

0.151

0.151

N/A

N/A

STATE OF FLORIDA
COUNTY OF PALM BEACH

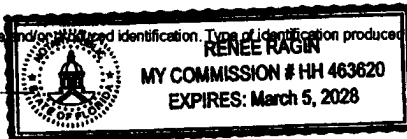
GREEN

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 19 day of SEPTEMBER, 2025, by GREEN

(Print name of Arresting/Investigative Officer, who is personally known to me and on whom I received identification. Type of identification produced)

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





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

PBSO CASE # 25-098341 PBSO ZONE 4-11

AGENCY CASE # 25-010575 CRASH CASE # _____

TIME OF STOP/CRASH 108 DATE 09/19/2025 DAY Friday

SUBJECT'S NAME GROBLER DEVON
LAST FIRST MID

DOB 01/05/2000 HGT 507 WGT 215 RACE WHITE SEX MALE

LOCATION 101 W ATLANTIC AVE, DELRAY BEACH, FL 33444 DELRAY BEACH

ARRESTING OFFICER'S NAME & ID GREEN 1155 DELRAY BEACH POLICE DEPARTMENT
AGENCY

NOTIFIED BY COMMO N

BREATH RESULTS:

ARRIVAL AT FACILITY 0220

ARREST TIME 0108

1)	.151
2)	.151
3)	
4)	

Renee Ragin #16877
BAT TECH. OFFICER NAME & ID

TESTING FACILITY TASK REPORT

AGENCY: DBPD

SUBJECT: Grobler, Devon

CASE NUMBER: 25-098341

DATE: Sep 19, 2025

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 02:55

ENDING TIME: 03:08

BREATH TESTS RESULTS: 1) .151 TIME 03:01 A.M. ☒ P.M. ☐ 2) .151 TIME 03:05 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 TECHNICIAN: Jason Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: Slurred

ATTITUDE: Calm, cooperative

CLOTHING: Blue jeans, white & green shirt, black & white sneakers

MEDICAL CONDITIONS: ADHD

MEDICATIONS: Amphetamine

OTHER:

Eyes are glassy & bloodshot
Odor of unknown alcoholic beverage on breath

COMMENTS:

Arrived at center A/O started 20 minute observation period at 02:20 hrs.

Subject agreed to perform breath test and stated what are his options.

A/O read I/C and subject stated he understood I/C.

Subject agreed to take test.

A/O read rights.
Subject stated he understood rights.

A/O attempted Q&A.
Subject refused to answer Q&A.

Tech read breath test results.
Subject stated he understood breath test results.

A/O ask if he was going to sign the DUI citation.
Subject agreed.

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

Instrument Type: Intoxilyzer 8000
Instrument Registered To: PALM BEACH COUNTY SO
Instrument Serial Number: 80-006476 Software: 8100.27
Date of Test: 09/19/2025

Date of Last Agency Inspection: 09/12/2025

Observation Period Began: 02:20

Subject's Name: DEVON GROBLER

DOB: 01/05/2000 Sex: M

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

Results:	Test	g/210L	Time
	Diagnostics Check	OK	02:59
	Air Blank	0.000	03:00
	Control Test	0.080	03:00
	Air Blank	0.000	03:01
	Subject Sample #1	0.151	03:01
	Air Blank	0.000	03:02
	Air Blank	0.000	03:04
	Subject Sample #2	0.151	03:05
	Air Blank	0.000	03:06
	Control Test	0.079	03:06
	Air Blank	0.000	03:07
	Diagnostics Check	OK	03:07

Cylinder Lot: 32324080A2
Exp: 12/05/2026

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 RENEE M RAGIN, 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: 09/19/25

Sworn to (or affirmed) before me this 19 day of Sept., 2025

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.

SHERIFF RIC L. BRADSHAW



NOT APPLICABLE WITH VOLUNTARY CONSENT

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? _____

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



Palm Beach County Sheriff's Office

Florida State Statute Exemption Sheet

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	☐	119.071(4)(c)	Undercover personnel	
	☐	119.071(2)(e)	Confession	
Public Info. Exemptions	☐	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 110 of the CRTM for additional information)	
	☐	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	
	☐	119.0712(2)	Personal information contained in a motor vehicle record	
	☐	316.650(11)	Driver information contained in a uniform traffic citation	
	☐	119.071(4)(d)2.a.	Home addresses, telephone numbers, dates of birth, and photographs of active/former LE personnel, spouses, and children	
	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers	2
Florida Rules of Judicial Administration 2.420	☐	(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	☐			
	☐			
	☐			
	☐			

REVIEW COMPLETED BY

Booking Number: 2025025187	Date: 9/20/2025
	Specialist Name/ID#: Angela Pinkney/7796