

C-163560

23CT 11417 NB

581

ARREST / NOTICE TO APPEAR

AD M I N I S T R A T I O N	OBTS Number	Agency ORI Number 0501700		Agency Name Jupiter Police Department		Agency Report Number (N.T.A.'s only) 5 4 23-002617		1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias 1		JUVENILE																																							
D E F E N D A N T	Charge Type: Check as many as apply ☐ 1. Felony ☐ 2. Traffic Felony ☒ 3. Misdemeanor ☒ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other		If Weapon Seized Enter Type UNARMED		Multiple Clearance Indicator																																												
	Location of Arrest (Including Name of Business) 6751 W INDIANTOWN RD JUPITER FL 33458					Location of Offense (Business Name, Address) 300 N CENTRAL BLVD/W INDIANTOWN RD, JUPITER, FL																																											
	Date of Arrest 06/28/2023	Time of Arrest 01:21	Booking Date 06/28/2023	Booking Time 01:31	Jail Date	Jail Time	Location of Vehicle TOWED																																										
	Name (Last, First, Middle) TURNER, DOUGLAS ELTON										Alias (Name, DOB, Soc. Sec. #, Etc.)																																						
C O D E F	Race W - White B - Black O - Oriental/Asian W		Sex M	Date of Birth 11/23/1980	Height 5'08	Weight 205	Eye Color BLUE	Hair Color RED /	Complexion LIGHT	Build Medium																																							
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)					Marital Status M	Religion OTHER	Indication of: Alcohol Influence Yes ☒ No ☐ Unk. ☐ Drug Influence Yes ☐ No ☐ Unk. ☐																																									
	Local Address (Street, Apt. Number) (City) (State) (Zip) 12142 175TH RD N, JUPITER, FL 33478					Phone (561) 797-8305		Residence Type: 1. City 3. Florida 2. County 4. Out of State 1																																									
	Permanent Address (Street, Apt. Number) (City) (State) (Zip) 12142 175TH RD N, JUPITER, FL 33478					Phone (561) 797-8305		Address Source FL DL																																									
J U V E N I L E	Business Address (Name, Street) (City) (State) (Zip)					Phone		Occupation																																									
	D/L Number, State T656165804230 / FL		Sec. Sec. Number		INS Number		Place of Birth (City, State) JACKSONVILLE, FL		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																																								
C H A R G E	☐ Parent ☐ Other _____ Name (Last, First, Middle) ☐ Legal Custodian										Residence Phone																																						
	Address (Street, Apt. Number) (City) (State) (Zip)										Business Phone																																						
	Notified by: (Name)		Date		Time		JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT IAC 3. Incarcerated																																										
	Released To: (Name)		Relationship		Date		Time																																										
N O T I C E	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 355-2526) informed of any change of address.										School Attended		Grade																																				
	☐ Yes, by: ☐ No:		Property Crime? ☐ Yes ☒ No		Description of Property					Value of Property																																							
	Drug Activity N. N/A P. Possess										S. Sell B. Buy T. Traffic		R. Smuggle D. Deliver E. Use		K. 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/Deriv.		P. Paraphernalia/ Equipment S. Synthetic		U. Unknown Z. Other																				
	Charge Description DUI - NORMAL FACULTIES IMPAIRED										Statute Violation Number 316.193(1)(A)					Violation of ORD #																																	
I N T A K E	Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence ☐ Y ☒ N		Warrant / Capias Number		Bond																																		
	Charge Description										Statute Violation Number					Violation of ORD #																																	
	Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence ☐ Y ☐ N		Warrant / Capias Number		Bond																																		
	Charge Description										Statute Violation Number					Violation of ORD #																																	
N O T I C E	Health / Apparent Physical Condition of Defendant										Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries Explain:																																						
	Check which applies: ☐ Released O.R. ☐ Released to Parent/Guardian ☒ T.O.T. County Jail ☐ Posted Bond ☐ South County Mental Health										PROPERTY - Received By					Released By					Released To																												
	Transported By										Date Transported					Time Transported					Other																												
	INSTRUCTION NO. 1 - Mandatory appearance in court ☐ INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.										Location (Court, Room) North County PALM BEACH GARD					Court Date and Time 07/26/2023 08:30:00					No Photo Available																												
A D M I N I S T R A T I O N	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) [Signature]												Date Signed																										
	MOLD for Other Agency										Signature of Arresting Officer [Signature]					Name Verification (Printed by Arrestee)																																	
	☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other										Name of Arresting Officer (Print) SEIER, BRADLEY					ID # 1243					(PRINT)																												
	Intake Deputy [Signature]										Pouch #					Transporting Officer SEIER					ID # 1243					Agency JPD					Witness here if subject signed with an "X".																		
STATE ATTORNEY										AGENCY										CENTRAL RECORDS										JAIL										CRIME ANALYSIS									

FILED PBC - GUN CLUB--
23 JUN 28 AM 7:46

OBT Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	JUVENILE
A	D	M	I	N	D	E	F	C	H
Agency ORI Number FL 0501700		Agency Name JUPITER POLICE DEPARTMENT			Agency Report Number 5 4 23-002617				
Charge Type: Check as many as apply. ☐ 1. Felony ☐ 3. Misdemeanor ☐ 5. Ordinance ☐ 2. Traffic Felony ☒ 4. Traffic Misdemeanor ☐ 6. Other					Special Notes:				
Name (Last, First, Middle) TURNER, DOUGLAS ELTON						Race W		Sex M	
						Date of Birth 11/23/1980			
Charge Description 316.193(1)(A) DUI - NORMAL FACULTIES IMPAIRED					Charge Description				
Charge Description					Charge Description				
Victim's Name (Last, First, Middle) State Of Florida						Race		Sex	
						Date of Birth			
Local Address (Street, Apt. Number) (City) (State) (Zip)				Phone		Address Source			
Business Address (Name, Street) (City) (State) (Zip)				Phone		Occupation			
The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe that the above named Defendant committed the following violation of law. The Person taken into custody ... ☒ committed the below acts in my presence. ☐ was observed by _____ who told _____ that he/she saw the arrested person commit the below acts. ☒ confessed to OFC SEIER admitting to the below facts. ☒ was found to have committed the below acts, resulting from my (described) investigation. On the <u>28</u> day of <u>June</u>, <u>2023</u> at <u>01:21</u> (Specifically include facts constituting cause for arrest.)									
On June 28, 2023 at approximately 0045 hours, I was on routine patrol in my marked Jupiter Police vehicle driving south bound on N Central Blvd passing Palm Beach County Fire Station 19 (322 N Central Blvd). I saw a black Genesis SUV, FL Tag 07AGNQ, leave the Jupiter West Plaza and begin to drive south bound on N Central Blvd without illuminated taillights in the hours of darkness. The vehicle made a right turn from N Central Blvd and W Indiantown Rd while continuing to drive without any illuminated taillights in the hours of darkness. I initiated a traffic stop on the vehicle that time, and the vehicle approached the red light at W Indiantown Rd 67th Ave N. The vehicle stopped in the right hand lane at the red light, paused, and then proceeded to stop in at the Shell gas station in the Jupiter West Plaza, located at 6751 W Indiantown Rd. I approached the driver side of the vehicle and made contact with the driver/sole occupant of the vehicle, who I ultimately identified as Douglas Turner (W/M, DOB: 11/23/1980) by his FL driver's license. I explained to Turner the reason for the stop and how he was driving at night without lights, and I also informed him that his gas cap was open. I asked Turner for his driver's license, registration and insurance. While speaking with Turner, I could smell the strong odor of an unknown alcoholic beverage coming from his breath, person and inside of the vehicle. Turner handed me his FL driver's license, but no other documents. I asked Turner for his vehicle registration, and in slow, lethargic movements he began to look around the front compartment of his vehicles while fumbling through papers, and eventually found his registration. I had to remind Turner again for his vehicle insurance. Turner stated in a slow, slurred speech that his insurance was on his phone and began to look for his cellphone, which was in the cup holder right next to him. Turner eventually saw his cellphone and begin to look for his auto insurance. I also observed that Turner had red, watery bloodshot eyes, flushed cheeks, and spoke with a slow, slurred speech.									
SWORN AND SUBSCRIBED BEFORE ME <i>[Signature]</i> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S. 90.17.10) 06/28/2023 DATE <i>[Signature]</i> SHARIL L. O'NEAL Notary Public - State of Florida My Commission Expires JUN 25, 2024 SEIER, BRADLEY (1243) NAME OF OFFICER (PLEASE PRINT) 06/28/2023 DATE									
COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P.I.O.									

OBT Number		PROBABLE CAUSE AFFIDAVIT SUPPLEMENT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	JUVENILE
Agency ORI Number	Agency Name	Agency Report Number							
FL 0501700	JUPITER POLICE DEPARTMENT	5 4 23-002617							
Charge Type: Check as many as apply. ☐ 1. Felony ☐ 3. Misdemeanor ☐ 5. Ordinance ☐ 2. Traffic Felony ☒ 4. Traffic Misdemeanor ☐ 6. Other				Special Notes:					
Name (Last, First, Middle)				Alias		Race	Sex	Date of Birth	
TURNER, DOUGLAS ELTON						W	M	11/23/1980	
I asked Turner where he was coming from, and he stated "Uncle Micks". I asked turner if he had consumed any alcoholic beverage tonight, and he stated "no." I briefly returned to my patrol vehicle to run Turner via Northcom. Upon returning to the driver side of the vehicle, Turner had a freshly lit cigarette in his mouth that he was now smoking. I requested Turned put out the cigarette, in which he complied. I explained to Turner that I could smell the strong odor of an unknown alcoholic beverage coming from his breath, person, and inside of the vehicle and asked him to explain where the odor was coming from since he was the occupant in the vehicle. Turner stated again that he does not drink. Based on Turner's driving pattern and his objective symptoms of being under the influence of an alcoholic beverage, I requested Turner to step out of the vehicle. Turner initially did not step out of the vehicle and continually asked why I stopped him and repeated that his lights were on. I informed Turner several times the reason for the stop and why I was asking him to exit the vehicle. Turner still did not comply and attempted to turn the lights on for the vehicle, but subsequently turned on the rear windshield wiper. Due to Turner not exiting the vehicle, Officer Dasilva and Sgt. Brandt boxed in Turner's vehicle so he could not drive away from the scene. Turner was still refusing to exit the vehicle and continually asked why I stopped him, and told me his vehicle lights were "auto." I again informed him that his lights were not on and told him to get out of the vehicle. At one point while talking with Turner, he informed me that he did not want to get arrested and that he was nervous. At that time, I opened Turner's door and told him to get out, in which he complied. I had Turned walk to the rear of my patrol car. I saw that Turner was unsteady on his feet and walked with an unsteady gait. I asked Turner if he would consent to completing the Standard Field Sobriety Tasks (SFST), and he stated what happens if I say no. I advised Turner of his Taylor Warnings, and he stated he did not understand. I advised Turner of his Taylor Warnings a second and third time, and Turner ultimately told me he understood and that he would complete the SFST's. Turner stated he did not have any preexisting medical conditions or injuries that would prevent him from completing the tasks. The SFST's were performed on the level sidewalk and asphalt at the location of the traffic stop. I conducted the SFST's in the following fashion: HORIZONTAL GAZE NYSTAGMUS (HGN): I conducted the HGN task. While Turner was in the starting position, he swayed back and forth and side to side. Upon starting the task, Turner began to move his head while following my pen. I reminded Turner of the instructions and asked if he understood, in which he said he did. While continuing the task, Turner did not follow the tip of the pen with his eyes. I reminded Turner to follow the pen with his eyes. I continued the task, but Turner was either unable or unwilling to follow the pen with his eyes. I attempted to get Turner to follow the pen with his eyes, but he was still unable or unwilling to complete the task.									
SWORN AND SUBSCRIBED BEFORE ME <i>[Signature]</i> NOTARY PUBLIC / CLERK OF COURT / OFFICER (E.S.S. 117.10) 06/28/2023 DATE <i>[Signature]</i> SIGNATURE OF ARRESTING / INVESTIGATING OFFICER SEIER, BRADLEY (1243) NAME OF OFFICER (PLEASE PRINT) 06/28/2023 DATE									

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.

OBT Number		PROBABLE CAUSE AFFIDAVIT SUPPLEMENT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	JUVENILE
Agency ORI Number	Agency Name		Agency Report Number						
FL 0501700	JUPITER POLICE DEPARTMENT		5 4 23-002617						
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)			Alias			Race	Sex	Date of Birth	
TURNER, DOUGLAS ELTON						W	M	11/23/1980	
WALK AND TURN: I conducted the Walk and Turn task. While explaining and demonstrating the starting position to Turner, he was unsteady on his feet and lost his balance. During the walk and turn, Turner missed his first step and at the second step, stopped on his own accord and asked me to explain the task again. I had Turner get into the starting position and explained and demonstrated the task for a second time. Turner stated he understood again. While doing the first nine, Turner walked in a slow, unsteady fashion and missed the 3rd step and did an improper turn. Turner walked back in a slow, unsteady fashion and missed step 2, 3 and 8. ONE LEG STAND: I conducted the one leg stand. Turner stated he understood the instructions. Turner lifted his foot off the ground approximately 3 inches. Turner used his arms for balance during the task. Turner counted 1,2,3,4,5,6,5,7,8,9,10,11,12,13,14..then lost his balance and began to hop around on one foot. Turner did this until he counted to 17 where I stopped the test. Turner estimated 30 seconds for approximately 17 seconds. FINGER TO NOSE: I conducted the finger to nose task. Turner missed the first left, the first right, and lifted his left hand on the third right, and missed the third left. Turned also started before being instructed and had to be informed of the instructions twice. ROMBERG ALPHABET: I conducted the Romberg Alphabet. When Turner got to "X", he recited the alphabet in the following fashion: X,Y,R,W,X,Y,Z. Turner was also swaying back and forth and side to side and did not tilt his head back. Based on the above investigation findings, I placed Turner under arrest for driving under the influence at approximately 0121 hours. I placed Turner in handcuffs, properly adjusting and double locking them. Kauffs towing towed the vehicle from the scene. I transported Turner to the Palm Beach County Jail Breath Alcohol Testing Center. Turner was placed under observation for 20 minutes, which began at 0150 hours. After the observation period, Turner refused to provide a breath sample. I read Turner implied consent in which he stated he refused and did not understand. I read implied consent again, and Turner still refused to provide a breath sample. I read Turner his constitutional Miranda warnings and he refused to speak with me. Turner was issued a citation for driving at night without lights and DUI citation AHDGOCE. Turner was booked in the Palm Beach County Jail pursuant to F.S.S. 316.193(1) (A) DUI - Normal Faculties Impaired. Turner was given a court date of 07/26/2023, 0830 hours at North County Court in PBG. BWC was utilized.									
SWORN AND SUBSCRIBED BEFORE ME <i>[Signature]</i> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 177.06) 06/28/2023 DATE <i>[Signature]</i> SIGNATURE OF ARRESTING / INVESTIGATING OFFICER SEIER, BRADLEY (1243) NAME OF OFFICER (PLEASE PRINT) 06/28/2023 DATE									
SHARI L. O'NEAL Notary Public - State of Florida Commission # GG 973080 My Comm. Expires JUN 25, 2024 Bonded through National Notary Assn. PAGE 3 OF 3									

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P.I.O.

WITNESS LIST

CASE NUMBER: 23002617

ARRESTING OFFICER: B Seier 1243 JPD

ADDRESS: 196 Military Trl. Jupiter, FL 33458

PHONE NUMBERS (HOME): _____ (WORK) (561) 746-6201

CAN TESTIFY TO: PC

NAME: Ofc. Dasilva

ADDRESS: 196 Military Trl. Jupiter, FL 33458

PHONE NUMBERS (HOME) _____ (WORK) (561) 746-6201

CAN TESTIFY TO: Investigation

NAME: Sgt Brandt

ADDRESS 196 Military Trl. Jupiter, FL 33458

PHONE NUMBERS (HOME) _____ (WORK) (561) 746-6201

CAN TESTIFY TO: Investigation

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

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CAN TESTIFY TO: _____

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ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

TESTING FACILITY TASK REPORT

AGENCY: JPD OFC. SEIER #1243

SUBJECT: TURNER, DOUGLAS E.

CASE NUMBER: 23-083375

DATE: 06-28-23

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 02:10 HRS

ENDING TIME: 02:15 HRS

BREATH TESTS RESULTS: 1) R TIME 02:14 A.M. ☒ P.M. ☐ 2) TIME A.M. ☐ P.M. ☐
3) TIME A.M. ☐ P.M. ☐ 4) TIME A.M. ☐ P.M. ☐

BREATH OPERATOR: S. O'NEAL #6212

MAINTENANCE TECHNICIAN: J. KARLECKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLUR

ATTITUDE: CALM, COOPERATIVE

CLOTHING: SHIRT-DRK PURPLE SHORTS-GRAY

MEDICAL CONDITIONS: ANXIETY

MEDICATIONS: ALPRAZOLAM

OTHER:

EYES: RED, GLASSY

FACE: FLUSHED

COMMENTS:

20 MIN. OBSERVATION CONDUCTED BY A/O SEIER #1243

A/O REQUESTED THE BREATH TEST.

D REFUSED THE BREATH REQUEST.

A/O READ THE IMPLIED CONSENT ON CAMERA TO THE D.

IMPLIED CONSENT BROKEN DOWN TO THE D.

D STILL REFUSED TO SUBMIT AFTER THE I/C WAS READ AND BROKEN DOWN TO HIM.

C/W READ ON CAMERA, D REFUSED THE Q&A.

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) _____

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: _____



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

PBSO CASE # 23-083315 PBSO ZONE 3-14

AGENCY CASE # 23002617 CRASH CASE # N/A

TIME OF STOP/CRASH 0045 DATE 06/28/2023 DAY WEDNESDAY

SUBJECT'S NAME TURNER, DOUGLAS, E RACE W SEX M
LAST FIRST MID

HGT 5'8" WGT 205 DOB 11/23/1980

LOCATION N CENTRAL BLVD / W INDIANTOWN RD, JUPITER FL 33458

ARRESTING OFFICER'S NAME & ID B. SEIER 1243 AGENCY JUPITER PD

DIVISION: PATROL

NOTIFIED BY COMMO YES

ARRIVAL AT FACILITY 0150

ARREST TIME 0121

BREATH RESULTS:

1)

2)

3)

4)

REFUSED

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

STATE OF FLORIDA
AFFIDAVIT OF REFUSAL TO SUBMIT TO
BREATH TEST (Commercial Driver's License)

I, Officer B Seier 1243, a duly certified Law Enforcement or Correctional Officer, am a
 (Name of Officer reading Implied Consent Warning)

member of Jupiter Police Department, and I do swear
 (Name of Law Enforcement Agency)

or affirm that on or about the 28 day of June, 20 23, at 0121 ☐ P.M. ☒ A.M.

DRIVER Douglas Elton Turner
 FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL # T-656-165-80-423-0, state of Florida, was placed under lawful arrest for

the offense of DUI by Officer B Seier 1243 and
 (Name of Arresting Officer)
 issued citation # AHDGOCE.

That on or about the 28 day of June, 20 23, at 0214 ☐ P.M. ☒ A.M.

in Palm Beach County,

I requested that the driver submit to a **BREATH** test for the purpose of determining its alcohol content. I informed the driver that the refusal to submit to such test 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, or if he or she had been previously fined under s. 327.35215, F.S., 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, or if he or she has been previously fined under s. 327.35215, F.S., 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 Commercial Driver's License (CDL), or was operating a commercial motor vehicle, refusal will result in the disqualification of the CDL 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 requested.

[Signature]
 Signature of Law Enforcement Officer or Correctional Officer



(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before me this 28 day of June, 20 23, by Officer, who is personally known to me or who has produced Personally Known as identification.
 Notary Public [Signature]

The foregoing instrument was sworn and subscribed before me:

Signature of Attesting Officer

Title

Date 06/28/2023

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

Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	☐	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	☐	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	☐	119.071(4)(c)	Undercover personnel.	
	☐	119.071(2)(f)	Confidential informants (CIs).	
	☐	119.071(2)(e)	Confession.	
Public Info. Exemptions	☐	985.04(1)	Juvenile offender records.	
	☐	119.071(h)(i)	Assets of a crime victim.	
	☐	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	☐	394.4615(7)	Mental health information.	
	☐	119.071(4)(d)(2)(a)	Home address, telephone, Social Security number, date of birth, or photos of active/former LE personnel, spouses, and children.	
Florida Rules of Judicial Administration 2.420 (Rule of 23)	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	☐	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	☐			
	☐			
	☐			
	☐			
	☐			
	☐			
Other	☐		Other:	
	☐		Other:	

REVIEW COMPLETED BY

Booking Number: 2023016802

Date: 6/28/2023

Specialist Name/ID: Chantel Daniels/30347