

25CT 134mb
J# 0555008 # 2111 0555008 2111

OBTS Number		ARREST / NOTICE TO APPEAR Juvenile Referral Report		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1		Juvenile		N									
Agency ORI Number FLO 0500600		Agency Name PALM BEACH POLICE DEPARTMENT				Agency Report Number (N.T.A.'s only) 76-25-0000026															
Charge Type: Check as many as apply: ☐ 1. Felony ☐ 2. Traffic Felony ☒ 3. Misdemeanor ☒ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other		Weapon Seized / Type ☒ 1. Yes ☐ 2. No		Multiple Clearance Indicator UK																	
Location of Arrest (Including Name of Business) 399 Royal Poinciana Way, Palm Beach				Location of Offense (Business Name, Address) 399 Royal Poinciana Way, Palm Beach																	
Date of Arrest 01/05/2025		Time of Arrest 0246		Booking Date		Booking Time		Jail Date		Jail Time		Location of Vehicle									
Name (Last, First, Middle) Micheletti, Eric M												Alias (Name, DOB, Soc. Sec. #, Etc.) Light Ed									
Race W - White 1 - American Indian B - Black 0 - Oriental/Asian W		Sex M		Date of Birth 10/26/70		Height 600		Weight 180		Eye Color Brown		Hair Color brown		Complexion fair		Build med					
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)												Marital Status Divorced		Religion NONE		Indication of Alcohol Influence Drug Influence ☐ 1. City ☐ 2. County ☐ 3. Florida ☐ 4. Out of State ☐ 5. Juvenile					
Local Address (Street, Apt. Number) 1991 Presidentials Way				(City) West Palm Beach, FL				(State) FL				(Zip) 33411				Phone ()		Residence Type 1. City 2. County 3. Florida 4. Out of State 5. Juvenile			
Permanent Address (Street, Apt. Number)				(City)				(State)				(Zip)				Phone ()		Address Source Verbal			
Business Address (Name, Street)				(City)				(State)				(Zip)				Phone ()		Occupation			
DL Number, State M24321370305				Soc. Sec. Number				INS Number				Place of Birth (City, State) Bloomington, IL				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		Address (Street, Apt. Number) 1000 / ()										(City)		(State)		(Zip)		Residence Phone ()			
Notified by: (Name)		Date		Time		Juvenile Disposition 1. Handled/processed within Dept. and Released. 2. TOT HRS / DYS 3. Incarcerated															
Released To: (Name)		Relationship		Date		Time															
The above address provided by ☐ defendant and / or ☐ defendant's parents. The child and / or parent was told to keep the Juvenile Court Clerk (Phone 355-2528) informed of any change of address. ☐ Yes, by: (Name) ☐ No: (Reason)												School Attended		Grade							
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 O. Deliver E. Use		K. Dispense/ 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. Synthetics		U. Unknown Z. Other	
Charge Description Driving under the Influence		Counts 1		Domestic Violence ☐ Y ☒ N		Statute Violation Number 316.193(1)(a)		Violation of ORD #													
Drug Activity N/A		Drug Type N/A		Amount / Unit		Offense # 25-0000026		Warrant / Capias Number		Send											
Charge Description		Counts		Domestic Violence ☐ Y ☒ N		Statute Violation Number		Violation of ORD #													
Drug Activity		Drug Type		Amount / Unit		Offense #		Warrant / Capias Number		Send											
Charge Description		Counts		Domestic Violence ☐ Y ☒ N		Statute Violation Number		Violation of ORD #													
Drug Activity		Drug Type		Amount / Unit		Offense #		Warrant / Capias Number		Send											
Charge Description		Counts		Domestic Violence ☐ Y ☒ N		Statute Violation Number		Violation of ORD #													
Drug Activity		Drug Type		Amount / Unit		Offense #		Warrant / Capias Number		Send											
Location (Court, Room Number, Address) 3228 Gun Club Rd W PB												TO BE SET									
Court Date and Time Month 01 Day 30 Year 2025 Time 830 (AM) PM																					
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) 01/05/2025												Date Signed									
HOLD for other Agency Name		Signature of Arresting Officer Chris Machate				Name Verification (Printed by Arresting Officer) Chris Machate				Name Verification (Printed by Arresting Officer) Chris Machate											
☐ Dangerous ☐ Suicidal		☐ Resisted Arrest ☐ Other		Name of Arresting Officer (Print) Chris Machate				(PRINT) Chris Machate				PAGE 1 OF 1									
Initials Deputy G1 Honaleal 1206		I.D. # 9146		Pouch # P880		Transferring Officer Chris Machate				Witness here if subject signed with an "X"											

DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT (N.T.A.'s ONLY)

PS80 2148 REV. 2/97

OBTS Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	N
ADMIN	Agency ORI Number FLO 0500600		Agency Name PALM BEACH POLICE DEPARTMENT		Agency Report Number 76- 25-0000026				
	Charge Type: Check as many as apply:		1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor ☒ 5. Ordinance ☐ 6. Other ☐		Special Notes:				
DEF	Name (Last, First, Middle) Micheletti, Eric, Micheletti, Eric M				Alias		Race W	Sex M	Date of Birth 10/26/70
	Charge Description Driving under the Influence 316.193(1)				Charge Description				
CHARGES	Charge Description				Charge Description				
	Charge Description				Charge Description				
VICTIM	Victim's Name (Last, First, Middle)						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 _____ ☐ confessed to _____ that he/she saw the arrested person commit the below acts. ☒ admitting to the below facts. ☒ was found to have committed the below acts, resulting from my (described) investigation.									
On the <u>5th</u> day of <u>January</u> 20 <u>25</u> at <u>0246</u> ☒ A.M. ☐ P.M. (Specifically include facts constituting cause for arrest.)									
On 01/05/25, at approximately 0223 hrs, Sgt. Augustin observed a 2021 silver Nissan SUV bearing IL tag#DB24579 travel westbound on the 200 blk of Royal Poinciana in the eastbound lane. Sgt. Augustin positioned his patrol vehicle behind the Nissan, and conducted a traffic stop on the vehicle on the Flagler Memorial Bridge. Sgt. Augustin made contact with the driver, later identified via IL DL as Eric Micheletti W/M DOB 10/26/70. Sgt. Augustin informed Micheletti the reason for the stop, to which Micheletti informed Sgt. Augustin that he had just moved and was unfamiliar with the area. During Sgt. Augustin's interaction with Micheletti, Sgt. Augustin indicated that he smelled an unknown alcoholic beverage emanating from Micheletti's facial area. During the interaction, Micheletti informed Sgt. Augustin that he had previously consumed glasses of wine earlier in the evening. At this time, I arrived on scene to provide additional assistance. While speaking with Micheletti, he did have some slurred speech and an odor of an unknown alcoholic beverage emanating from his facial area as he spoke. Based on the following, Sgt. Augustin instructed Micheletti to exit the vehicle, to which he complied. I informed Micheletti that I was conducting a DUI investigation and requested that he submit to a group of standardized field sobriety tasks (SFTS) to which he initially agreed to complete. I then instructed Micheletti how to complete the walk and turn tasks. The tasks was displayed and explained to Micheletti to which he advised that he was refusing the task. After Micheletti refused to complete the walk and turn tasks. Sgt. Augustin advised Micheletti of his Taylor warnings, and that he was subject to arrest despite his refusal to complete the task which I had previously explained. Micheletti again refused to complete the tasks, at which time he was subsequently arrested at approximately 0246 hrs. Palm Beach Communications notified the BAT. Micheletti was transported to the BAT and was asked to provide breath samples, Micheletti agreed to provide the breath samples, but later refused. Micheletti was then transported to PBSO intake without further incident.									
ADMINISTRATIVE	STATE OF FLORIDA COUNTY OF PALM BEACH Ofc. Machate <i>[Signature]</i> (Signature of Arresting/Investigative Officer)								
	The foregoing instrument was sworn to or affirmed and subscribed before me this <u>5th</u> day of <u>January</u> 20 <u>25</u> by Ofc. Machate <i>[Signature]</i> (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. 117.10) 								
PAGE 1 of 1									

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 5th DAY OF January 20 25, AT 0246 ☒ AM ☐ PM
SUBJECT: Micheletti Eric Micheletti, Eric CASE NUMBER: 25-0000026
AGENCY: PALM BEACH POLICE DEPARTMENT ARRESTING OFFICER: Ofc. Machate

PERSONAL CONTACT

DRIVING PATTERN: ACTUAL PHYSICAL CONTROL (PHYSICAL EVIDENCE OR STATEMENTS PUTTING DEF. BEHIND WHEEL OF VEHICLE)

Driver was observed driving westbound in the eastbound only lanes over a bridge into oncoming traffic. Driver was in actual physical control when contact was made.

OBSERVATION OF DRIVER:

The driver appeared to be apologetic. The driver had an unknown alcoholic beverage coming from his breath and facial area.

DRIVER'S STATEMENTS:

The driver admitted to the initial officer, that he had consumed some glasses of wine earlier in the evening.

ODORS:

an unknown alcoholic beverage from his breath and facial area.

GENERAL OBSERVATIONS

SPEECH: initially slurred, apologetic

ATTITUDE: fair

CLOTHING: Sweater and jeans

MEDICAL/OTHER:

STATE OF FLORIDA
COUNTY OF PALM BEACH

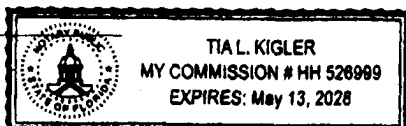
Ofc. Machate

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 5th day of January 20 25 by Ofc. Machate

(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. 117.10)



SUBJECT: Micheletti Eric CASE NUMBER 25-0000026

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:

Tasks not performed

WALK & TURN:

Tasks not performed,

ONE LEG STAND:

Tasks not performed

ROMBERG ALPHABET:

Tasks not performed

ROMBERG ALPHABET:

Tasks not performed

BREATH TEST RESULTS: 1) VNM 2) VNM 3) .115 4) R

STATE OF FLORIDA
COUNTY OF PALM BEACH

Ofc. Machate

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 5th day of January 2025 by Ofc. Machate

(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. 17.10)



WITNESS LIST

CASE NUMBER: 25-0000026

ARRESTING OFFICER: Ofc. Machate

ADDRESS: 345 South County Rd

PHONE NUMBERS (HOME): 561-838-5454 (WORK) _____

CAN TESTIFY TO: Arrest

NAME: Sgt. Augustin

ADDRESS: 345 South County Rd

PHONE NUMBERS (HOME) 561-838-5454 (WORK) _____

CAN TESTIFY TO: Driving pattern, driver observations, traffic stop, and arrest

NAME: _____

ADDRESS 345 South County Rd

PHONE NUMBERS (HOME) 561-838-5454 (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS 345 South County Rd

PHONE NUMBERS (HOME) 561-838-5454 (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS 345 South County Rd

PHONE NUMBERS (HOME) 561-838-5454 (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

TESTING FACILITY TASK REPORT

AGENCY: PBPD

SUBJECT: MICHELETTI, ERIC M CASE NUMBER: 24-022125

DATE: Jan 5, 2025 VIDEO DVD NUMBER: N/A

BEGINNING TIME: 03:50 ENDING TIME: 04:25

BREATH TESTS RESULTS: 1) VNM TIME 04:01 A.M. ☒ P.M. ☐ 2) VNM TIME 04:07 A.M. ☒ P.M. ☐

3) .115 TIME 04:14 A.M. ☒ P.M. ☐ 4) R TIME 04:18 A.M. ☒ P.M. ☐

BREATH OPERATOR: T. KIGLER #15177

MAINTENANCE TECHNICIAN: J. KARLECKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: NORMAL

ATTITUDE: CALM

CLOTHING: BLUE JEANS, GRAY SWEATER, WHITE SNEAKERS

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

COMMENTS:

ARRIVED AT DUI TESTING FACILITY AND A/O BEGAN THE 20 MINUTE OBSERVATION PERIOD AT 03:16 HRS

SUBJECT: REFUSED TO TAKE TEST

A/O: READ I.C

SUBJECT: STATED HE UNDERSTOOD I.C AND AGREED TO TAKE TEST

A/O: READ I.C DUE TO TWO VNM

SUBJECT: STATED HE UNDERSTOOD I.C

A/O: READ RIGHTS

SUBJECT: STATED HE UNDERSTOOD RIGHTS

TECH: READ TEST RESULTS

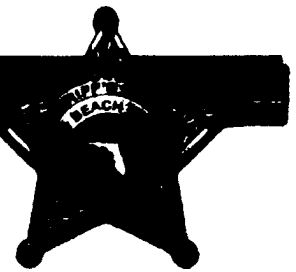
SUBJECT: STATED HE UNDERSTOOD RESULTS

A/O: CONDUCTED Q&A

SUBJECT: ANSWERED Q&A

**PALM BEACH COUNTY
SHERIFF'S OFFICE**

SHERIFF RIC L. BRADSHAW



DUI Breath Implied Consent

NOT APPLICABLE WITH VOLUNTARY CONSENT

DEFENDANT'S NAME: M. J. [illegible] CASE NO: _____

DATE OF ARREST: 1/1/12 TIME OF ARREST: 12:40

I am now requesting that you submit to a lawful test of your **BREATH** for the purpose of determining its alcohol content.

Will you take the test? YES _____ NO _____

NOTE: READ ONLY IF THE ANSWER TO THE ABOVE IS "NO"

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 _____ NO _____

Do you still refuse to submit to this test? YES _____ NO _____

NOTE: IF THE SUBJECT POSSESSES A COMMERCIAL DRIVER LICENSE (CDL), READ THE FOLLOWING, REGARDLESS OF WHETHER THE SUBJECT IS OPERATING A COMMERCIAL MOTOR VEHICLE (CMV)

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 _____ NO _____

Do you still refuse to submit to this test? YES _____ NO _____

Date read: _____ Time read: _____ Location read: _____

LAW ENFORCEMENT OFFICER NAME (printed): _____ ID: _____

LAW ENFORCEMENT OFFICER SIGNATURE: _____

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

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

Instrument Type: Intoxilyzer 8000
Instrument Registered To: PALM BEACH CSO
Instrument Serial Number: 80-006239 Software: 8100.27
Date of Test: 01/05/2025

Date of Last Agency Inspection: 12/06/2024

Observation Period Began: 03:16

Subject's Name: ERIC M MICHELETTI

DOB: 10/26/1970 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	03:57
	Air Blank	0.000	03:57
	Control Test	0.081	03:58
	Air Blank	0.000	03:58
	Subject Sample #1	VNM*	04:01
	Air Blank	0.000	04:02
	Air Blank	0.000	04:04
	Subject Sample #2	VNM**	04:07
	Air Blank	0.000	04:07
	Control Test	0.080	04:08
	Air Blank	0.000	04:08
	Diagnostics Check	OK	04:08

*Volume Not Met (0.104 - Breath Sample Not
Reliable to Determine Breath Alcohol Level)

**Volume Not Met (0.105 - Breath Sample Not
Reliable to Determine Breath Alcohol Level)

Cylinder Lot: 10124080A2
Exp: 06/05/2026

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 TIA L KIGLER, 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: Tia Kigler

Signature

Date: 01/05/25

Sworn to (or affirmed) before me this 5th day of January, 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.

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

Instrument Type: Intoxilyzer 8000
Instrument Registered To: PALM BEACH CSO
Instrument Serial Number: 80-006239 Software: 8100.27
Date of Test: 01/05/2025

Date of Last Agency Inspection: 12/06/2024

Observation Period Began: 03:16

Subject's Name: ERIC M MICHELETTI

DOB: 10/26/1970 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	04:11
	Air Blank	0.000	04:11
	Control Test	0.079	04:11
	Air Blank	0.000	04:12
	Subject Sample #1	0.115	04:14
	Air Blank	0.000	04:14
	Air Blank	0.000	04:16
	Subject Sample #2	REF*	04:18
	Air Blank	0.000	04:18
	Control Test	0.079	04:18
	Air Blank	0.000	04:19
	Diagnostics Check	OK	04:19

*Subject Test Refused

Cylinder Lot: 10124080A2
Exp: 06/05/2026

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 TIA L KIGLER, 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: Tia Kigler

Signature

Date: 01/05/25

Sworn to (or affirmed) before me this 5th day of January 2025

Signature of Notary Public-State of Florida Cde h

Printed Name of Notary Public-State of Florida OC C Macchate

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

am a member of Palm Beach PD, and I do swear
 (Name of law enforcement agency)

or affirm that on or about the 5th day of January, 20 25, at 0246 ☒ P.M. ☐ A.M.

DRIVER Eric Micheletti, Eric M Micheletti,
 (Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# M24321370305, state of Florida, was placed under lawful arrest for
 the offense of Driving under the Influence by Ofc. Machate and
 issued Citation # _____
 (Name of Arresting Officer)

That on or about the _____ day of _____, 20 _____, at _____ ☐ P.M. ☐ A.M.
 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



(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before

me this 5th day of January, 20 25.

by Ofc. Machate

who is personally known to me or who has produced

_____ as identification

Notary Public [Signature]

HSMV-BAR1001 (REV. 10/2016)

The foregoing instrument was sworn and subscribed before me:

[Signature]
 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.



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

PBSO CASE # 25-0000026 PBSO ZONE _____
AGENCY CASE # 25-000026 CRASH CASE # _____
TIME OF STOP/CRASH 0246 DATE 01/05/2025 DAY Sunday
SUBJECT'S NAME Micheletti Eric Michele RACE W SEX M
LAST FIRST MID
HGT 600 WGT 180 DOB 10/26/70
LOCATION 399 Royal Poinciana Way
ARRESTING OFFICER'S NAME & ID Ofc. Machate 9146 AGENCY Palm Beach PD
DIVISION: Patrol
NOTIFIED BY COMMO Yes
ARRIVAL AT FACILITY 03:16
ARREST TIME 0246

BREATH RESULTS:

1) Vnm

2) Vnm

3) .115

REFUSED

TESTING OFFICER'S ID 15177 PBSO VIDEOTAPE # n/a