

0548539

24CT6828NB

2967

AD M I N I S T R A T I O N		OBTs Number		ARREST / NOTICE TO APPEAR		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1		JUVENILE	
Agency ORI Number		0501700		Agency Name		Jupiter Police Department		Agency Report Number (N.T.A.'s only)		514		24-001489	
Charge Type:		Check as many as apply		1. Felony 2. Traffic Felony		3. Misdemeanor 4. Traffic Misdemeanor		5. Ordinance 6. Other		If Weapon Seized		Multiple Clearance Indicator	
Location of Arrest (Including Name of Business)		MAPLEWOOD DR/INDIAN CREEK PKWY		Location of Offense (Business Name, Address)		1999 MAPLEWOOD DR/INDIAN CREEK PKWY, JUPITER, FL		Ester Type		UNARMED			
Date of Arrest		04/13/2024		Time of Arrest		02:22		Booking Date		Booking Time		Jail Date	
Name (Last, First, Middle)		SICA, GIULIANO		Alias:		Alias (Name, DOB, Soc. Sec. #, Etc.)							
Race		W - White B - Black O - Oriental/Asian		Sex		M		Date of Birth		12/09/1993		Height	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)				Marital Status		S		Religion		CATHOLIC		Indication of Alcohol Influence Drug Influence	
Local Address (Street, Apt. Number)		(City)		(State)		(Zip)		Phone		(786) 327-1082		Residence Type:	
Permanent Address (Street, Apt. Number)		(City)		(State)		(Zip)		Phone		(786) 327-1082		1. City 2. County 3. Florida 4. Out of State	
Business Address (Name, Street)		(City)		(State)		(Zip)		Phone				Address Source VERBAL	
D/L Number, State		S200280934490 / FL		Soc. Sec. Number				INS Number				Place of Birth (City, State)	
Co-Defendant Name (Last, First, Middle)				Race				Sex				Date of Birth	
Co-Defendant Name (Last, First, Middle)				Race				Sex				Date of Birth	
Parent		Other		Name (Last, First, Middle)				Residence Phone					
Legal Custodian				Address (Street, Apt. Number)		(City)		(State)		(Zip)		Business Phone	
Notified by: (Name)				Date				Time				JUVENILE DISPOSITION	
Released To: (Name)				Relationship				Date				1. Handled/Processed within Department and Released 2. TOT JAC 3. Incarcerated	
The above address was provided by		defendant and/or		defendant's parents.				School Attended				Grade	
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?		Description of Property		Value of Property	
Yes, by:		No:											
Drug Activity		S. Sell		R. Smuggle		K. Disperse/Distribute		M. Manufacture/Produce/Cultivate		Z. Other		B. Bacteriate	
N. N/A		B. Buy		D. Deliver								H. Hallucinogen	
P. Possess		T. Traffic		E. Use								M. Marijuana	
												P. Paraphernalia/Equipment	
												U. Unknown	
												Z. Other	
Charge Description		DUI - CAUSING PROPERTY DAMAGE/PERSONAL INJURY		Statute Violation Number		316.193(3)(C)1		Violation of ORD #					
Drug Activity		N		Amount / Unit		Offense #		Counts		Domestic Violence		Warrant / Capias Number	
Charge Description				Statute Violation Number				Violation of ORD #					
Drug Activity				Amount / Unit		Offense #		Counts		Domestic Violence		Warrant / Capias Number	
Charge Description				Statute Violation Number				Violation of ORD #					
Drug Activity				Amount / Unit		Offense #		Counts		Domestic Violence		Warrant / Capias Number	
Health / Apparent Physical Condition of Defendant				Any knowledge of the following:		Mental		Escape Risk		Medication		Deformities	
Check which applies:		Released O.R.		Released to Parent/Guardian		T.O.T. County Jail		PROPERTY - Received By		Released By		Released To	
Transported By				Date Transported		Time Transported		Other					
INSTRUCTION NO. 1 - Mandatory appearance in court				Location (Court, Room)		North County		PALM BEACH GARD					
INSTRUCTION NO. 2 - You need not appear in Court				Court Date and Time		05/15/2024 08:30:00							
I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED BY THIS NOTICE TO APPEAR, THAT I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED				Signature of Defendant (or Juvenile and Parent/Custodian)		Date Signed						No Photo Available	
HOLD for Other Agency				Signature of Arresting Officer		1263		Name Verification (Printed by Arrestee)		APR 13 AM 7:02			
Dangerous		Resisted Arrest		Name of Arresting Officer (Print)		MALDONADO, WILLIAM		I.D. #		1263		PAGE	
Intake Deputy		J. D. N. 366-2		Transporting Officer		Maldonado		I.D. #		1263		1 OF 1	

FILED
JUL 14 2024
JULIUS & COUNTY COURTS
(CRIMINAL DIV.)

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 13th DAY OF April 20 24, AT 0128 [✓]AM PM
SUBJECT: Sica Giuliano CASE NUMBER: 24-001489
AGENCY: JUPITER POLICE DEPARTMENT ARRESTING OFFICER: Ofc. Maldonado/ 1263

PERSONAL CONTACT

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

A caller, contacted the Jupiter Police Department in reference to a vehicle collision she had heard but hadn't seen. The caller advised north communications it sounded bad and it had occurred near the area of Maplewood Drive and Indian Creek Parkway. I responded to the incident and observed a vehicle, a 2018 Audi bearing Florida tag: BV58RB turned on its side. I observed two males - the driver, Giuliano Sica, sitting on the sidewalk, and passenger, Chrisworder Francois, sitting on the sidewalk next to him. Both males completed sworn statements to myself and identified Giuliano Sica as the driver in this incident.

OBSERVATION OF DRIVER:

Sica's watery eyes. I could smell a strong odor of an unknown alcoholic beverage on Sica's breath.

DRIVER'S STATEMENTS:

Sica stated at first that he'd consumed, "one gin and tonic." Further, he immediately asked "am I going to jail." and assumed he was.

ODORS:

Strong odor of unknown alcoholic beverage on breath.

GENERAL OBSERVATIONS

SPEECH: sometimes mumbled

ATTITUDE: Polite, cooperative throughout.

CLOTHING: white dress shirt, black jeans

MEDICAL/OTHER: None

STATE OF FLORIDA
COUNTY OF PALM BEACH

Ofc. Maldonado/ 1263

(signature of Arresting/Investigative Officer)

I, the foregoing instrument was sworn to or affirmed and subscribed before me this 13 day of April 20 24 by Ofc. Maldonado/ 1263

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

SUBJECT Sica

Giuliano

CASE NUMBER 24-001489

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:

WALK & TURN:

Sica lost his balance in the starting position.
Sica raised his hands from his sides
Sica took more than 9 steps and did not follow instructions

ONE LEG STAND:

Sica was swaying throughout the one leg stand
Sica continuously moved his foot from the pointed position
Sica used his arms to balance one time

FINGER TO NOSE:

L1: Sica touched his nose as instructed L2. Sica touched his nose as instructed L3. Sica touched his nose as instructed L4. Sica touched his nose as instructed L5 Sica touched his nose as instructed L6. Sica touched his nose as instructed

ROMBERG ALPHABET:

Sica could not recite the alphabet due to a language barrier

BREATH TEST RESULTS: (1) (2) (3) (4)

STATE OF FLORIDA
COUNTY OF PALM BEACH

Ofc. Maldonado/ 1263

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 13 day of April, 2024 by Ofc. Maldonado/ 1263

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

WITNESS LIST

CASE NUMBER: 24-001489

ARRESTING OFFICER: Ofc. Maldonado/ 1263

ADDRESS: 196 Military Trail, Jupiter Fl 33458

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

CAN TESTIFY TO: PC

NAME: Sgt Burrows

ADDRESS: 196 Military Trl, Jupiter, FL, 33458

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

CAN TESTIFY TO: PC

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: _____

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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: _____

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 detecting the presence of chemical or controlled substances.

-OR-

I am now requesting that you submit to a lawful test of your BLOOD for the purpose of detecting its alcohol content and the presence of chemical or controlled substances.

NOTE: READ ONLY IF THE SUBJECT DOES NOT COMPLY WITH YOUR REQUEST

I am **Ofc. Maldonado/ 1263** of the **Jupiter Police Department**

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'S SIGNATURE: _____ **Sica, Giuliano,**

CONSTITUTIONAL WARNINGS**I AM REQUIRED TO WARN YOU BEFORE YOU MAKE ANY STATEMENTS THAT YOU HAVE THE FOLLOWING RIGHTS:**

You have the right to remain silent and not answer any questions.

Any statement must be freely and voluntarily given.

You have the right to the presence of a lawyer of your choice before you make any statement and during any questioning.

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.

If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent.

I can make no threats or promises to induce you to make a statement. This must be of your own free will.

Any statement can and will be used against you in a court of law.

SUSPECT'S SIGNATURE: _____ **Sica, Giuliano,**

STATE OF FLORIDA
DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES
AFFIDAVIT OF REFUSAL TO SUBMIT TO
BLOOD TEST

I, Ofc. Maldonado/ 1263, a duly certified Law Enforcement Officer or Correctional Officer,

(Name of Officer reading Implied Consent Warning)

am a member of Jupiter Police Department, and I do swear

(Name of law enforcement agency)

or affirm that on or about the 04 day of April, 20 24, at 0222 ☐ P.M. ☒ A.M.

DRIVER Giuliano Sica

(Type or Print)

FIRST NAME

MIDDLE OR MAIDEN NAME

LAST NAME

DL# M-235-673-85-176-0, state of Florida, appeared for treatment at a hospital,

clinic, or other medical facility pursuant to s. 316.1932(1)(c), Florida Statutes, and a breath or urine test was impossible or impractical.

That on or about the 04 day of APRIL, 20 24, at 0521 ☐ P.M. ☒ A.M.

in PALM BEACH County,

I requested that the driver submit to a **blood test** to determine his or her blood alcohol level and/or the presence of chemical or controlled substances in his or her blood. I informed the driver that refusal to submit to a blood 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 for refusing to submit to a breath, urine or blood test. I also informed the driver that if he or she holds a CDL, or was operating a CMV, refusal would 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 had been previously disqualified as a result of a refusal to submit to a breath, urine or blood test. The driver nonetheless refused to submit to a blood test.

[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:

(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before

me this 13 day of April, 20 24,

by Ofc. Maldonado/ 1263,

who is personally known to me or who has produced

_____ as identification

Notary Public _____

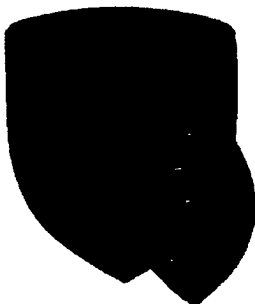
HSMV-BAR1002 (REV. 10/16)

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.



TOWN OF JUPITER

POLICE DEPARTMENT

Important Post DUI Arrest Information

Mr. Guiliano Sica

You have been arrested for DUI by the Jupiter Police Department, case # 24-001489.
Your vehicle has been towed by Kauffs. Their phone number can
be found in the yellow pages or with an internet search.

You have a court date of 05/15/2024 at 8:30am at the North County
Courthouse located at 3188 PGA Blvd., Palm Beach Gardens, FL.

- ☐ Your copy of the DUI Citation is your driving permit for the next TEN days. If you would like to request a formal hearing with the DHSMV in reference to your driver's license, you may contact their office at 1299 W. Lantana Blvd, Lantana, FL 33462 or call 561-540-1190.
- ☐ Your copy of the DUI citation is NOT a permit to drive, as you current license is under suspension.
- ☐ Your driver's license is not suspended at this time; however, you may be notified to surrender your driver's license once toxicology results are completed.

If you need further information, the arresting officer, Ofc. Maldonado, W.
can be reached by calling the Jupiter Police Department and leaving a message, or by email at
1263 @jupiter.fl.us. The arresting officer will attempt to contact you during the
next working shift after your call/email has been received.



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

PBSO CASE # _____ PBSO ZONE _____

AGENCY CASE # 24-001489 CRASH CASE # 26089915

TIME OF STOP/CRASH 0128 DATE 04/13/2024 DAY Friday

SUBJECT'S NAME Sica Giuliano RACE W SEX M
LAST FIRST MID

HGT 510 WGT 165 DOB 12/09/1993

LOCATION Maplewood Dr/ Indian Creek Parkway

ARRESTING OFFICER'S NAME & ID Ofc. Maldonado/ 1263 AGENCY Jupiter Police Department

DIVISION: Patrol

NOTIFIED BY COMMO _____

ARRIVAL AT FACILITY 0506

ARREST TIME 0222

BREATH RESULTS:

1)	
2)	
3)	
4)	

TESTING OFFICER'S ID _____ PBSO VIDEOTAPE # _____



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 99 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	
Florida Rules of Judicial Administration 2.420	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers	2
	☐	(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: 2024009976	Date: 4/14/2024
	Specialist Name/ID#: J. Gaines/ 44177