0542391

Arrest Report

2634

23CT 13883 NB

FLORIDA HIGHWAY PATROL
P.O. BOX 540007, GREENACRES, FL 33454

Report Date / Time	Report Number	Case Number/Cad Number	Reporting Officer Name
8/5/2023 05:06 AM	FHP99ARR872039	FHP23ON0407742 / RCC23IN0608704	ZIMMERMAN, JONATHAN

Originating Agency ORI	Occur Date Time Range	Jurisdiction
FL0509000	08/05/2023 03:37:32 -	

OBTS Number	Other Number	Clearance

Location of Occurrence

County	Location Type	Location Description
PALM BEACH	PUBLIC PLACE	SB I95 (SR9) JNOF BELVEDERE RD

Street Number	Street	Apt/Lot/Bldg	City	State	Zip Code
	SB I-95		WEST PALM BEACH	FL	33401

Defendant

First Name	Middle Name	Last Name	Suffix	Race	Sex	Height	Weight	Hair	Eyes
JARED	LEIGH	SMART		WHITE	MALE	511	165	BRO	BRO

MNI #	SSN	Date of Birth	Age	ID Type	Drivers License or other ID	State	OCA / Agency ID
	[redacted]	02/22/2002	21	E	S563432020620	FL	

Place of Birth:	BOCA RATON FL USA

Address
* RESIDENCE / 998 NW 7TH CT , BOYNTON BEACH, FL 33426 /

Arrest

Arrest Date/Time	Arrest Location Type	Arrest Location Description
8/5/2023 4:42:25 AM	PUBLIC PLACE	SB I95 (SR9) JNOF BELVEDERE RD

Street Number	Street	Apt/Lot/Bldg	County	City	State	Zip Code
	SB I-95		PALM BEACH	WEST PALM BEACH	FL	33401

Charge : S

Counts	Charge	Bond Amount	
1	316.193.1a	$0.00	☐ No Bond

Charge Degree	Charge Level
S	MISDEMEANOR

General Offense Code	Arrest Offense Code
	DUI-UNLAW BLD ALCH

Charge Description
DUI INFLUENCE OF ALCOHOL OR DRUGS

Administrative Code - Description
-

1- OR

OR 1242
FILED PBC - GUN CLUB
'23 AUG 6 AM 7:56

NOT A CERTIFIED COPY

vehicle were being medically evaluated. Neither the driver nor the occupants were transported or treated for serious injury. The second involved vehicle with heavy rear end damage was located just south of us, on Interstate 95 at Belvedere Road on the outside shoulder. Both vehicles were totaled and required a tow truck to be removed (see attached crash report for more in-depth synopsis of the crash).

The Silver Honda CRV (V01) with the attached Florida tag# KNHU57 was ran through NCIC/FCIC and revealed a silver 2005 Honda CRV registered to Janice A Benitz. The second vehicle (V02) with the attached Florida tag# BP95IZ was also ran through NCIC/FCIC and revealed a grey 2012 BMW X5 SUV registered to Ruel Everton Tulloch. I identified the driver of V01 by his Florida Driver License as Jared Leigh Smart (DL: S563-432-02-062-0, W/M, DOB: 2/22/2002).

After finishing the crash investigation and paper work, Sergeant Kingery (Badge# 2002) advised me that while speaking with Mr. Smart, he could smell the odor of an unknown alcoholic beverage emanating from Mr. Smart's breath. He also advised that while Mr. Smart rummaged through the rear of the vehicle in order to grab his things, he could hear that Mr. Smart had slurred speech. It is important to notate that while initially speaking with Mr. Smart, I did observe that his eyes appeared to be watery and glassy. Sgt. Kingery and I conferred and agreed that a DUI investigation should be completed, and that one would be completed after the initial crash investigation (see Sgt. Kingery's attached supplemental report).

After completing my crash investigation, I advised Mr. Smart that I was done with the crash investigation and would now be moving onto a criminal investigation reference driving under the influence. I asked Mr. Smart if he would be willing to participate in Voluntary Standardized Field Sobriety Exercises so that I could better determine his level of intoxication and he agreed. I advised Mr. Smart to stand in front of my patrol vehicle. I advised him to stand in the starting position with his feet together and hands down at his sides. I then informed him that he needed to maintain this position while I asked him a few questions and evaluated his eyes. I asked Mr. Smart if he had any medical injuries or if he currently took any medications and he stated no. I asked him if he had any sort of medical defects or injuries that would affect his ability to walk in a straight line or complete the exercises, he stated no. I asked Mr. Smart if he wore contacts or glasses, he stated no. The summary below is not intended to be a verbatim account of all the events that took place during the administration of the standardized field sobriety exercises (see dashcam footage).

NOT A CERTIFIED COPY

Horizontal Gaze Nystagmus Exercise

A black ball point pen with a black tip was used as a contrasting stimulus. Mr. Smart stated that he could clearly see the tip of the stimulus as well as the tip of my finger. The exercise was explained, an Mr. Smart stated that he understood the directions. Note: It became apparent to me at this time that M Smart demonstrated a clear and distinct orbital sway.

-I checked for resting nystagmus which was not observed in either eye.
-I checked for equal pupil size and equal tracking; Both pupils were equal in size, but both eyes did not track the stimulus equally.
-I observed a lack of smooth pursuit in both eyes.
-I observed horizontal gaze nystagmus at maximum deviation in both eyes.
-I observed horizontal gaze nystagmus prior to 45 degrees in both eyes.
-I did not observed vertical gaze nystagmus in both eyes.

Walk and Turn Exercise

A white parking space line was used in front of my patrol vehicle. Mr. Smart stated that he agreed that the ground surface was level and that he could perform the exercise. The exercise was explained and demonstrated. Mr. Smart stated that he understood the directions. Mr. Smart did not maintain the starting position. He also made an incorrect turn. Note: While performing this exercise, Mr. Smart did not keep his hands directly on his hips at all times.

-Unable to maintain starting position.
-Improper turn.

One Leg Stand Exercise

The exercise was explained and demonstrated. Mr. Smart stated that he understood the directions. Mr. Smart was shaking towards the end of the 30 second period and at one point almost lost his balance to his right rear side.

-Swayed.
-Hopped.

After Sgt. Kingery and I observed the exercises, we conferred together in our observations and agreed that based upon the performance of the above exercises and the totality of the circumstances, I determined that there was probable cause to believe that Jared Leigh Smart committed the offense of driving under the influence by being in actual physical control/operating a motor vehicle while under the influence of alcoholic beverages, any chemical substance per Florida State Statute 316.193, or any controlled substance per Chapter 893, while their normal faculties were impaired. He was placed under arrest at approximately 04:42 hours for the above offense. He was handcuffed behind his back in the front of my patrol vehicle and placed in the rear right seat. A search of Mr. Smart's person was conducted prior to him being placed in my patrol vehicle which yielded an unopened, 3.4oz bottle of Fire Ball in his front right pants pocket.

NOT A CERTIFIED COPY

Report Date / Time	Report Number	Case Number/Cad Number	Reporting Officer Name
8/5/2023 05:06 AM	FHP99ARR872039	FHP23ON0407742 / RCC23IN0608704	ZIMMERMAN, JONATHAN

Originating Agency ORI	Occur Date Time Range	Jurisdiction
FL0509000	08/05/2023 03:37:32 -	

OBTS Number	Other Number	Clearance

Mr. Smart was transported to the Palm Beach County Breath Alcohol Testing (BAT) facility with no further incidents. Mr. Smart underwent a 20-minute observation period at approximately 05:00 hours where he did not ingest anything by mouth or regurgitate. At approximately 05:22 hours, Mr. Smart consented to providing two breath samples. The first breath sample provided yielded a result of 0.120. The second breath sample provided had a result of 0.123. It is important to note that just after receiving the second breath sample from Mr. Smart, it was observed by the breath tech operator that he had a piece of chewing gum in his mouth. I did observe Mr. Smart prior to and during the evaluation and I did not observe him to be chewing anything during that time, which is indicative of him attempting to conceal the gum. He was then advised to spit out the gum. A new observation period was conducted at 05:35 hours. (Mr. Smart's mouth was confirmed to be empty before and after. He did not eat, drink or regurgitate prior). At approximately 05:57 hours, Mr. Smart consented to providing two more breath samples. The first breath sample provided yielded a result of 0.104. The second breathe sample provided had a result of 0.102.

Mr. Smart was then read his Florida Miranda Warning and he agreed to answer questions. Note: Mr. Smart did admit to driving the Honda SUV at the time of the crash. (See BAT video footage for a complete account of the question and answering segment). At approximately 06:12 hours, Mr. Smart was transported to Good Samaritan Medical Center located on Okeechobee Boulevard and Haverhill Road in order to be medically cleared for booking. He was then booked into the Palm Beach County Jail with no further incident.

All events occurred in Palm Beach County, State of Florida.

NOT A CERTIFIED COPY

Jail Booking Facility

Booking Date/Time	Booking County	Booking Facility	Booking Facility Phone
	PALM BEACH	PALM BEACH COUNTY CORRECTIONS	(561) 688-4400

Booking Facility Location	Booking Number
3228 GUN CLUB ROAD WEST PALM BEACH, FLORIDA 33406	

Booking Comments

Court

Court County	Court Location
PALM BEACH	3188 PGA BLVD. PALM BEACH GARDENS, FL 33410

Court	Court Phone	Court Appereance Date / Time	Court Fine
PALM BEACH NORTH COUNTY COURTHOUSE	561-624-6608	09/06/2023 830AM	

Comments

Report Date / Time	Report Number	Case Number/Cad Number	Reporting Officer Name
8/5/2023 05:06 AM	FHP99ARR872039	FHP23ON0407742 / RCC23IN0608704	ZIMMERMAN, JONATHAN

Originating Agency ORI	Occur Date Time Range	Jurisdiction
FL0509000	08/05/2023 03:37:32 -	

OBTS Number	Other Number	Clearance

Officer Name Rank / ID #	Involvement On Report / Reporting Role	Officer Agency Org/Unit
ZIMMERMAN, JONATHAN TPR 5061	REPORTING OFFICER	FLORIDA HIGHWAY PATROL FHPL\LWRCC\PALM BEACH\BROW LN TO SR804
T.R. KINGERY SGT 2002		FLORIDA HIGHWAY PATROL FHPL\LWRCC\PALM BEACH\LANTANA SUPERVISR

The undersigned certifies and swears that he/she has just and reasonable grounds to believe that the above named Defendant, committed violation(s), of law, on the below date(s) and time(s), as listed in the probable cause associated with this report:

Reporting Officer

Officer Name	Office Rank	Officer ID No
ZIMMERMAN, JONATHAN	TPR	5061

Officer Agency
FLORIDA HIGHWAY PATROL

Officer Signature

Sworn and subscribed before me, the undersigned authority
This the 5th day of Aug, 2023
DEPUTY OF THE COURT, NOTARY OR LAW ENFORCEMENT

X STVI 8-5-23

○ No Bill / Petition ○ Issue Warrant ○ Prosecution Approved

Signature of Assistant State Attorney Date

NOT A CERTIFIED COPY

FLORIDA TRAFFIC CRASH DRIVER INFORMATION EXCHANGE

This Traffic Crash Report can be purchased online at:
www.FloridaCrashPortal.gov

Crash Number	Reporting Agency		
89680191	FLORIDA HIGHWAY PATROL		

CRASH IDENTIFIERS

County of Crash	City or Place of Crash	☑ City Limits	Crash Date/Time	Reported Date/Time
PALM BEACH	WEST PALM BEACH		08/05/2023 03:27 AM	08/05/2023 03:37 AM

Roadway Description for Location of Occurrence: SB INTERSTATE 95 (STATE ROAD 9)

VEHICLE

V01	Year	Make	Model	Color	State	License Number	Registration Expires	☐ Permanent Registration	VIN
	2005	HOND	CRV	SIL	FL	KNHU57	6/19/2024		SHSRD78885U333417

Owner First Name	Owner Middle Name	Owner Last Name	Owner Suffix	Owner Business (if not Person)
JANICE	A	BENITEZ		

Address	Address Other	City	State	Zip Code
3722 COCO LAKE DR!VE		COCONUT CREEK	FL	33073-0000

Owner Phone Number	Owner Phone Number (other)	Insurance Company	Insurance Policy Number
	954-448-1150	STATE FARM	G890199594

	License Number	State	Reg. Expires	Permanent Reg.	VIN	Year	Make	Length	Axles
Trailer One				NO					
Trailer Two				NO					

VEHICLE

V02	Year	Make	Model	Color	State	License Number	Registration Expires	☐ Permanent Registration	VIN
	2012	BMW	X5	GRY	FL	BP95IZ	1/31/2024		5UXZV4C5XCL755519

Owner First Name	Owner Middle Name	Owner Last Name	Owner Suffix	Owner Business (if not Person)
RUEL	EVERTON	TULLOCH		

Address	Address Other	City	State	Zip Code
407 WEDGEWOOD PLAZA DR		RIVIERA BEACH	FL	33404-1938

Owner Phone Number	Owner Phone Number (other)	Insurance Company	Insurance Policy Number
	561-255-0491	STATE FARM	K499292A0659D

	License Number	State	Reg. Expires	Permanent Reg.	VIN	Year	Make	Length	Axles
Trailer One				NO					
Trailer Two				NO					

PERSON RECORD

Person Type	NM#	Vehicle#	First Name	Middle Name	Last Name	Suffix
DRIVER		V01	JARED	LEIGH	SMART	

Address	Address Other	City	State	Zip Code
998 NW 7TH CT		BOYNTON BEACH	FL	33426

Phone Number	Phone Number (other)	Other Comments (Write In)
561-305-9064		

PERSON RECORD

Person Type	NM#	Vehicle#	First Name	Middle Name	Last Name	Suffix
PASSENGER		V01	JOHN	JARROD	BENITEZ	

Address	Address Other	City	State	Zip Code
3722 COCO LAKE DR		COCONUT CREEK	FL	33073

Phone Number	Phone Number (other)	Other Comments (Write In)

PERSON RECORD

Person Type	NM#	Vehicle#	First Name	Middle Name	Last Name	Suffix
PASSENGER		V01	LEROY	WILLIAM	GLAUM	4

Address	Address Other	City	State	Zip Code
104 WOODEN MILL TERRACE		JUPITER	FL	33458

Phone Number	Phone Number (other)	Other Comments (Write In)

PERSON RECORD

Person Type	NM#	Vehicle#	First Name	Middle Name	Last Name	Suffix
DRIVER		V02	RUEL	EVERTON	TULLOCH	

Address	Address Other	City	State	Zip Code
407 WEDGEWOOD PLAZA DR		RIVIERA BEACH	FL	33404

Phone Number	Phone Number (other)	Other Comments (Write In)
561-255-0491		

REPORTING OFFICER

ID Number	Rank	Name	Troop / Post	Officer Agency	Phone Number
5061	TPR	ZIMMERMAN, JONATHAN	L	FLORIDA HIGHWAY PATROL	561-357- 4040

NOT A CERTIFIED COPY

RECIPIENT COPY

FLORIDA HIGHWAY PATROL
Vehicle Tow

CASE NUMBER: FHP23ON0407742

DATE / TIME	COUNTY	CITY	OTHER NUMBER	CITATION / REPORT
8/5/2023 4:15:31 AM	PALM BEACH	WEST PALM BEACH		89680191

NO HOLD - MAY BE RELEASED

OWNER

NAME (FIRST MIDDLE LAST SUFFIX) / BUSINESS NAME: JANICE A BENITEZ
ADDRESS: 3722 COCO LAKE DRIVE
CITY: COCONUT CREEK
STATE: FL
ZIP CODE: 33073-0000
TELEPHONE:
☐ OWNER PRESENT OR ☐ OWNER NOTIFICATION ATTEMPTED
OWNER NOTIFICATION ATTEMPTS.
☐ OWNER NOTIFICATION SUCCESSFUL

DRIVER

NAME FIRST	NAME MIDDLE	LAST NAME	SUFFIX NAME
JARED	LEIGH	SMART	

ADDRESS: 998 NW 7TH CT
CITY: BOYNTON BEACH
STATE: FL
ZIP CODE: 33426
TELEPHONE: 561-305-9064

CMV

CARRIER NAME:
ADDRESS:
CITY:
STATE:
ZIP CODE:
TELEPHONE:

VEHICLE / TRAILERS

YEAR	MAKE	MODEL	VEHICLE STYLE	VEHICLE COLOR	TAG STATE / NUMBER	VIN	ODOMETER
2005	HOND	CRV	UT	SIL	FL KNHU57	SHSRD78885U333417	

CIC ENTRY: RED TAG DATE / TIME: ID NUMBER: NAME:

REASON VEHICLE TOWED: CRASH

	MAKE	YEAR	COLOR	UNIT NO.	VEHICLE IDENTIFICATION NO.	TAG NO.	STATE	EXP. DATE
POWER UNIT								
TRAILER 1								
TRAILER 2								

TOW

TOW SELECTION TYPE: ROTATION WRECKER
LOCATION VEHICLE INVENTORIED / TOWED FROM: SB INTERSTATE 95 (STATE ROAD 9)
TOWING SERVICE: SISTER'S TOWING
DAY TELEPHONE: 561-687-0820
NIGHT TELEPHONE:
ADDRESS: 6907 SOUTHERN BLVD. W.P.B. FLA
CITY / STATE / ZIP:

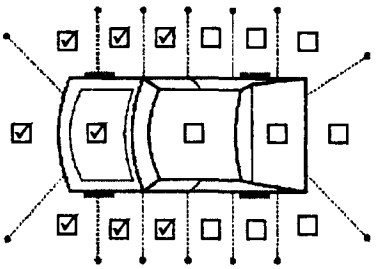
STORAGE

VEHICLE STORAGE LOCATION: SISTER'S TOWING
DAY TELEPHONE: 561-687-0820
NIGHT TELEPHONE:
ADDRESS: 6907 SOUTHERN BLVD. W.P.B. FLA
CITY / STATE / ZIP:

VEHICLE INVENTORY & DAMAGE

☐ CELLULAR PHONE (MAKE/MODEL)
☐ RADAR DETECTOR (MAKE/MODEL)
☐ STEREO SYSTEM (RADIO / CD / TAPE, ETC).
☐ CB RADIO / 2 WAY RADIO
☐ TRAILER HITCH
☐ WHEEL COVERS QTY
☐ CUSTOM RIMS QTY
NUMBER OF TIRES (INCLUDE SPARE)
☐ TRUNK ACCESSIBLE
☐ REAR SPOILER

INDICATE VEHICLE DAMAGE



☐ NO DAMAGE

MARK AREA OF DAMAGE
☐ UNDERCARRIAGE
☐ OVERTURN
☐ WINDSHIELD
☐ FIRE
☐ TRAILER

PROPERTY IN VEHICLE
MISC PERSONAL ITEMS CLOTHES, PAPERS, SHOES, ETC/ ALL PERSONAL ITEMS OF VALUE REMOVED BY DRIVER/OWNER AND OCCUPANTS

OFFICER COMMENTS
CRASH REPORT 89680191-01

NO HOLD - MAY BE RELEASED

WE THE UNDERSIGNED OFFICER(S) AND TOW DRIVER, HEREBY CERTIFY THAT THE ABOVE LISTED JOINT PROPERTY INVENTORY IS CORRECT TO THE BEST OF OUR KNOWLEDGE.

SIGNATURE OF TOW TRUCK DRIVER
DATE
SIGNATURE OF OFFICER
PRINTED NAME OF TOW TRUCK DRIVER
RANK AND NAME OF OFFICER: TPR ZIMMERMAN, JONAT L
ORG / UNIT
I.D. NUMBER: 5061

NOT A CERTIFIED COPY

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

PBSO CASE # 23-096396 PBSO ZONE 1-11

AGENCY CASE # FHP230N04077 42 CRASH CASE # 89680191

TIME OF STOP/CRASH 0337 DATE 8/5/23 DAY Saturday

SUBJECT'S NAME Smart (LAST) Jared (FIRST) Leigh (MID) RACE W SEX M

HGT 511 WGT 165 DOB 2/22/2002

LOCATION ~~W~~ SB I95(SR9) Just Belvedere Road.

ARRESTING OFFICER'S NAME & ID Jonathan Zimmerman 5061 AGENCY FHP

DIVISION: Troop L

NOTIFIED BY COMMO NO

ARRIVAL AT FACILITY 05:00

ARREST TIME 04:47

BREATH RESULTS:

1). 120
2). 123
3). .104
4). .102

TESTING OFFICER'S ID 16212 PBSO VIDEOTAPE # N/A

NOT A CERTIFIED COPY

TESTING FACILITY TASK REPORT

AGENCY: FHP-L TRP. ZIMMERMAN #5061

SUBJECT: SMART, JARED L.

CASE NUMBER: 23-096396

DATE: 08-05-23

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 05:22 HRS/05:58 HRS

ENDING TIME: 05:37 HRS/06:12 HRS

BREATH TESTS RESULTS: 1) .120 TIME 05:28 A.M. ☒ P.M. ☐ 2) .123 TIME 05:31 A.M. ☒ P.M. ☐

3) .104 TIME 06:03 A.M. ☒ P.M. ☐ 4) .102 TIME 06:05 A.M. ☒ P.M. ☐

BREATH OPERATOR: S. O'NEAL #6212

MAINTENANCE TECHNICAN: J. KARLECKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: CALM, COOPERATIVE

CLOTHING: SHIRT- WHITE/BLOOD STAINS PANTS- KHAKI

MEDICAL CONDITIONS: NONE/ LEFT WRIST AND LOWER BACK ON CAMERA

MEDICATIONS: NONE

OTHER:

EYES: RED, GLASSY
ODOR OF UNKNOWN ALCOHOLIC BEVERAGE
FACE: DRY BLOOD ON AND UNDER THE D'S NOSE.

COMMENTS:

20 MIN. OBSERVATION CONDUCTED BY A/O ZIMMERMAN #5061

A/O REQUESTED THE BREATH TEST.
D ASKED WHAT WAS HIS OPTIONS.
A/O READ THE IMPLIED CONSENT ON CAMERA. D UNDERSTOOD THE I/C AS READ.
D SUBMITTED AFTER THE I/C WAS READ TO HIM.
D COMPLETED THE TEST CORRECTLY, EXPLAIN THE RESULTS TO THE D.
C/W READ ON CAMERA, D STARTED ANSWERING Q&A.
NOTICE THE D WAS CHEWING DURING Q&A, IT WAS DISCOVERED THE D HAD GUM IN HIS MOUTH.
I MADE THE A/O AWARE THAT HE WOULD HAVE TO DUE A NEW 20 MIN. OBSERVATION.
STOPPED THE VIDEO, GAVE A/O A NEW 20 MIN. TIME AND MADE HIM AWARE THAT A NEW BREATH TEST WOULD BE REQUIRED. NEW 20 MIN. OBSERVATION TIME 05:37 HRS.
A/O REQUESTED A NEW BREATH TEST AFTER THE NEW 20 MIN. OBSERVATION WAS CONDUCTED.
D SUBMITTED TO THE REQUEST.
D COMPLETED THE TEST CORRECTLY.
EXPLAINED THE RESULTS TO THE D.
Q&A CONT. FROM PRIOR VIDEO.

NOT A CERTIFIED COPY

II

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

Instrument Type: Intoxilyzer 8000
Instrument Registered To: PALM BEACH CO SO
Instrument Serial Number: 80-006477 Software: 8100.27
Date of Test: 08/05/2023

Date of Last Agency Inspection: 07/14/2023
Observation Period Began: 05:37
Subject's Name: JARED L SMART DOB: 02/22/2002 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	06:01
Air Blank	0.000	06:01
Control Test	0.078	06:02
Air Blank	0.000	06:02
Subject Sample #1	0.104	06:03
Air Blank	0.000	06:03
Air Blank	0.000	06:05
Subject Sample #2	0.102	06:05
Air Blank	0.000	06:06
Control Test	0.078	06:06
Air Blank	0.000	06:07
Diagnostics Check	OK	06:07

Cylinder Lot: 15922080A3
Exp: 08/05/2024

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 SHARI L O'NEAL, 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: S. O'Neal Date: 08-05-23
Signature

Sworn to (or affirmed) before me this 05 day of August, 2023

Signature of Notary Public-State of Florida

Trp. Zimmerman #5061
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.

FDLE/ATP FORM 38 - MARCH 2004, Ref. 11D-8.007

NOT A CERTIFIED COPY

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? yes

WHERE WERE YOU GOING? Home

WHAT STREET OR HIGHWAY WERE YOU ON? I95 SB

DIRECTION OF TRAVEL? S WHERE DID YOU START? Okeechobee Blvd.

WHAT TIME DID YOU START? UK WHAT TIME IS IT NOW? 0540.

WHAT IS TODAY'S DATE? 8/5/23 WHAT DAY OF THE WEEK IS IT? Saturday

WHAT COUNTY AND CITY ARE YOU IN NOW? pb county / west pb.

WHEN DID YOU LAST EAT? 4/5pm WHAT DID YOU EAT? chips salsa pasta

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? in jail / sidewalk 95.

HOW MUCH DO YOU WEIGH? 165 HAVE YOU BEEN DRINKING? yes WHAT? X 1 fireball shot

HOW MUCH? 2 drinks WHERE? in west palm WITH WHOM? friends 1 beer.

WHEN DID YOU HAVE YOUR FIRST DRINK? 12am AND YOUR LAST DRINK? 1am

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? 1 shot / sipping beer

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? no ARE YOU UNDER THE INFLUENCE? no

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? no HOW MUCH? N/A

WHAT? N/A WHERE? N/A WHEN? N/A

WHAT LINE OF WORK ARE YOU IN? fire fighter WHEN DID YOU LAST WORK? thursday 8/3

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? yes WHAT? Left wrist / Lower back.

ARE YOU SICK OR INJURED? yes WHAT'S WRONG? Left wrist / Lower back.

DO YOU LIMP? no DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? no

WERE YOU IN AN ACCIDENT TODAY? yes

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? no WHEN? N/A

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? NO WHO? N/A WHY? N/A

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? no WHAT? N/A WHEN? N/A

DO YOU HAVE:

EPILEPSY? NO
GLASS EYE? NO
FALSE TEETH? NO
EAR INFECTION? NO
INNER EAR TROUBLE? NO
DIABETES? NO

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? NO

DO YOU TAKE INSULIN? NO IF SO, WHEN WAS YOUR LAST INJECTION? N/A

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? NO WHERE? N/A

INTERVIEWER: J

NOT A CERTIFIED COPY

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)_____

NOT A CERTIFIED COPY

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:	

NOT A CERTIFIED COPY

REVIEW COMPLETED BY

Booking Number: 2023020309	**Date:** 8/6/2023
	Specialist Name/ID: R.Castro/40259