0547798 · 24CT4671 SB 2800

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

1. Arrest 3. Request for Warrant
2. N.T.A. 4. Request for Capias

1 Juvenile N

ADMINISTRATION

OBTS Number

Agency ORI Number: FL0500300
Agency Name: BOYNTON BEACH POLICE DEPT.
Agency Report Number: 34-24-004350

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

Multiple Clearance Indicator

Location of Arrest (Including Name of Business): 800 W BOYNTON BEACH BLVD, BOYNTON BEACH,FL,33426
Location of Offense (Business Name, Address): 800 W BOYNTON BEACH BLVD, BOYNTON BEACH,FL,

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
03/14/2024	23:27					BECK'S TOWING

DEFENDANT

Name (Last, First, Middle): OZKURT, MEHMET FATIH
Alias (Name, DOB, Soc. Sec. #, Etc)

Race (W - White, B - Black, I – American Indian, O – Oriental / Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	M	08/26/1975	5'9"	190	BROWN	BLACK	FAIR	MEDIUM

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)

Marital Status: MARRIED
Religion: UNK
Indication of Alcohol Influence: ☒ Y ☐ N ☐ Unk.
Indication of Drug Influence: ☐ Y ☒ N ☐ Unk.

Local Address (Street, Apt. Number) (City) (State) (Zip): 10590 PINE TREE TER BOYNTON BEACH, FL 33436-4904
Phone: ( ) -
Residence Type: 1. City 3. Florida 2. County 4. Out of State: 1

Permanent Address (Street, Apt. Number) (City) (State) (Zip)
Phone: ( ) -
Address Source: FL DL

Business Address (Street, Apt. Number) (City) (State) (Zip)
Phone: ( ) -
Occupation: SELF EMPLOYED

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth	Citizenship
O263-546-75-306-0 / FL	[redacted]		TURKEY	YES

CO-DEF

Co-Defendant Name (Last, First, Middle) | Race | Sex | Date of Birth | ☐ 1. Arrested ☐ 3. Felony ☐ 5. Juvenile ☐ 2. At Large ☐ 4. Misdemeanor

Co-Defendant Name (Last, First, Middle) | Race | Sex | Date of Birth | ☐ 1. Arrested ☐ 3. Felony ☐ 5. Juvenile ☐ 2. At Large ☐ 4. Misdemeanor

JUVENILE

☐ Parent ☐ Legal Custodian ☐ Other — Name (Last) (First) (Middle) — Residence Phone

Address (Street, Apt. Number) (City) (State) (Zip) — Business Phone

Notified by: (Name) — Date — Time — Juvenile Disposition: 1. Handled/Processed within Dept. and Released 2. TOT HRS/DYS 3. Incarcerated

Released To: (Name) — Relationship — Date — Time

The above address was provided by ☐ defendant and/or ☐ defendant's parents. The child and/or parent was told to keep the Juvenile Court Clerk's Office (Phone 561-355-2526) informed of any change of address: ☐ Yes, By: (Name) ☐ No: (Reason)

School Attended — Grade

Property Crime? Yes ☐ No ☐ — Description of Property — Value of Property

CODE

Drug Activity: N. N/A B. Buy P. Possess S. Sell T. Traffic R. Smuggle D. Deliver E. Use K. Dispense/ Distribute M. Manufacture Produce/ Cultivate Z. Other

Drug Type: N. N/A A. Amphetamine B. Barbituate C. Cocaine E. Heroin H. Hallucinogen M. Marijuana O. Opium/Deriv. P. Paraphernalia/ Equipment S. Synthetic U. Unknown Z. Other

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD#
DUI	1	☐Yes ☒No	316.193.1A	

Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number	Bond
-	-	-	24-004350		

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD#
		☐Yes ☐No		

Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number	Bond

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD#
		☐Yes ☐No		

Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number	Bond

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD#
		☐Yes ☐No		

Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number	Bond

NOTICE TO APPEAR

☐ Instruction No. 1 Mandatory Appearance in Court
☐ Instruction No. 2 You need not appear in Court but must Comply with instruction on reverse side.

Location (Court, Room Number, Address): South County Courthouse, 200 West Atlantic Ave, Delray Beach, FL 33444

Court Date and Time: Month APRIL Day 22 Year 2024 Time 08:30 ☒ A.M. ☐ P.M.

I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED BY THIS **NOTICE TO APPEAR**, THAT I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.

Refused
Signature of Defendant (or Juvenile and Parent/Custodian) — Date Signed

NK

ADMIN

HOLD for other Agency Name:
☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other:
Intake Deputy I.D.# Pouch #

Signature of Arresting Officer
Name of Arresting Officer (Print): ALEXIS I.D.# 1105
Transporting Officer: ALEXIS I.D.# 1105 Agency BBPD

Name Verification (Printed by Arrestee) (PRINT)
BU#
Witness here is subject Signed with an "X".

Page 1 OF 1

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SCANNED
MAR 15 2024

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 14 **DAY OF** March **2024 AT** 23:06 ☐ **A.M** ☒ **P.M.**

CASE #: 24-004350 **DEFENDANT:** OZKURT, MEHMET FATIH

PERSONAL CONTACT/DRIVING PATTERN/OBSERVATION OF DRIVER:

On the above date and time, I was patrolling the area of N Seacrest Blvd and Boynton Beach Blvd, City of Boynton Beach, Palm Beach County, FL, 33435. I was stopped at the intersection of N Seacrest Ave and Boynton Beach Blvd, waiting to travel southbound on Seacrest Ave. The east and westbound traffic lights at Boynton Beach Blvd were solid red, and the left turn arrow on Seacrest was solid green. I then noticed a white Tesla Sedan, traveling at a high rate of speed on Boynton Beach Blvd, running the solid red, traveling west on Boynton Beach.

I followed the vehicle, traveling west on Boynton Beach Blvd, when I paced it, using my marked patrol vehicle (905), traveling at more than 60 MPH in an area with a 35 MPH posted speed limit. I had to reach speeds of almost 90 MPH to catch up with the vehicle, which finally stopped for a red light at the intersection of Old Boynton Rd and Boynton Beach Blvd.

Based on the observed infractions, I conducted a traffic stop on the vehicle, bearing FL tag 1ATA, at the 800 Block of Boynton Beach Blvd, City of Boynton Beach. Contact was made with the driver and sole occupant, later identified as W/M MEHMET FATIH OZKURT. I introduced myself and asked Ozkurt for his license, registration and proof of insurance, at which time he started fidgeting with documents and handed me only his registration papers.

I advised Ozkurt of my reasons for the traffic stop, at which point he admitted that he was speeding and said that he was rushing home to his wife. Ozkurt stated that he was coming from the "Old Key Lime House" restaurant in the City of Lantana and was heading home to West Boynton Beach. His speech was thick and slurred, and his eyes were bloodshot red and glassy. While speaking to Ozkurt, I detected a strong odor of unknown alcoholic beverages emanating from his mouth. Ozkurt was asked if he had drunk any alcoholic beverage and stated he had "one" beer approximately 3 hrs. prior while at the " Old Key Lime house."

During my interaction with Ozkurt, while he was still inside the vehicle, he never provided me with his driver's license. I asked Ozkurt if he would agree to perform the Standardized Field Sobriety Exercises to dispel my suspicion that he was impaired, and he said yes.

Ozkurt was asked to exit his vehicle at this point. Before the SFST, Ozkurt stated he had no medical or physical condition besides diabetes.

SFST:

HORIZONTAL GAZE NYSTAGMUS:

☒ Left eye does not follow smoothly
☒ Left eye prior to 45 degrees
☒ Distinct jerking in left eye at maximum deviation

☒ Right eye does not follow smoothly
☒ Right eye prior to 45 degrees
☒ Distinct jerking in right eye at maximum deviation

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MAR 15 2024

☐ Vertical Nystagmus in left eye ☐ Vertical Nystagmus in right eye

WALK AND TURN:

Instruction was provided and demonstrated to Ozkurt, who stated he understood. During the instruction phase, Ozkurt started the exercise too soon and could not keep balance while listening to the instructions. During the exercise phase, Ozkurt:

- did not touch heel to toe on steps, 3,4,5,6,7
- stepped off the line
- used his arms for balance
- took more than nine steps
- made an improper turn
- Ozkurt did not touch heel to toe the returning steps, 2,3,4,5,6,7,8, and took more than nine steps.

ONE LEG STAND:
Instruction was provided and demonstrated to Ozkurt, who stated he understood.
During the exercise phase, Ozkurt:

- used his arms for balance
- was hopping
- put his foot down

Ozkurt never counted as instructed.

FINGER TO NOSE:
Instruction was provided and demonstrated to Ozkurt, who stated he understood.
Ozkurt did not return his hands to his side as instructed.

ROMBERG/ALPHABET:
Instruction was provided to Ozkurt, who stated that he understood.
Ozkurt did recite the alphabet in order.

Based on my investigation, Ozkurt was arrested (handcuffed D/L and checked for spacing) and was transported to the Boynton Beach Police Station BAT room.

I arrived at the station and started a 20-minute observation from 23:55 to 00:15. Once completed, Ozkurt was asked to provide a breath sample to determine the alcohol content, and he refused. I read Implied Consent to Ozkurt, who stated he understood. Ozkurt was asked to provide a breath sample a second time, and he refused. Q/A's were not completed.

OZKURT, MEHMET FATIH was charged with DUI according to FSS 316.193.1a. he was cited accordingly.

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The following instrument was sworn to before me this 14 day of March 2024

By: Ofc. Alexis

T. [illegible] 1137
Notary/Police Officer (F.S.S. 117.10)

Signature of Arresting Officer

SCANNED
MAR 15 2024

TESTING FACILITY TASK REPORT

CASE #: 24-004350 **DEFENDANT:** OZKURT, MEHMET FATIH
Date: 3/15/24 **Video Tape #:** _____

BREATH TEST RESULTS: refused

1. ____ g/210L Time _____ ☐ a.m. ☐ p.m.
2. ____ g/210L Time _____ ☐ a.m. ☐ p.m.
3. ____ g/210L Time _____ ☐ a.m. ☐ p.m.
4. ____ g/210L Time _____ ☐ a.m. ☐ p.m.

BREATH OPERATOR: _____
MAINTENANCE TECHNICIAN: _____

TESTING OFFICER'S OBSERVATIONS

SPEECH: THICK, SLURRED
ATTITUDE: COOPERATING AT TIMES
CLOTHING: GREEN SHIRT, BLUE JEANS
MEDICAL CONDITIONS: DIABETES MEDS
MEDICATIONS: DIABETES
OTHER: _____

COMMENTS:

ADMITTED TO DRINKING ONE BEER
BLOODSHOT AND GLASSY EYES
REFUSED AT 00:19 HOURS ON 03/15/2024

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MAR 15 2024

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

Instrument Type: Intoxilyzer 8000
Instrument Registered To: BOYNTON BEACH PD
Instrument Serial Number: 80-001190 Software: 8100.27
Date of Test: 03/15/2024

Date of Last Agency Inspection: 02/28/2024
Observation Period Began: 23:55
Subject's Name: MEHMET F OZKURT DOB: 08/26/1975 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	00:23
Air Blank	0.000	00:23
Control Test	0.083	00:24
Air Blank	0.000	00:24
Subject Sample #1	REF*	00:24
Air Blank	0.000	00:25
Control Test	0.082	00:25
Air Blank	0.000	00:26
Diagnostics Check	OK	00:26

*Subject Test Refused

Cylinder Lot: 402357111
Exp: 02/10/2025

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 VLADIMIR ALEXIS, 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: _____ 1105 Date: 3/15/2024
Signature

Sworn to (or affirmed) before me this 15 day of March, 2024

_____ 1137
Signature of Notary Public-State of Florida

OFC. Coppini 1137
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

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MAR 15 2024

STATE OF FLORIDA

AFFIDAVIT OF REFUSAL TO SUBMIT TO

BREATH TEST

I, Officer VLADIMIR ALEXIS, a duly certified Law Enforcement Officer or Correctional Officer,
(Person reading Implied Consent Warning)

am a member of Boynton Beach Police Department, and I do swear
(Name of enforcement agency)

or affirm that on or about the FIFTEENTH day of March, 2024, at 12:29 AM

DRIVER MEHMET FATIH OZKURT,
(Type or Print) FIRST MIDDLE OR MAIDEN LAST

DL # O263546753060, state of FL, was placed under lawful arrest for

the offense of DUI by Officer VLADIMIR ALEXIS and
(Name of Arresting Officer)

issued Citation # AHPW9VE.

That on or about the FIFTEENTH day of March, 2024, at 12:19 AM

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. Nonetheless, the driver refused to submit to the test requested.

1101

Signature of Law Enforcement Officer or Corrctional Officer

THE AFFIDAVIT MUST BE NOTARIZED OR ATTESTED TO (s. 117.10, F.S.)

The foregoing instrument was sworn and subscribed before me:

1137

Signature of Attesting Officer

Title OFFICER

Date 3/15/24

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.

(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before me this ____ day of _____, 20____,

by _____

who is personally known to me or who has produced

_____ as identification.

Notary Public _____

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SCANNED

MAR 15 2024

****EFFECTIVE OCTOBER 1, 2021****

CASE #: 24-004350 **DEFENDANT:** OZKURT, MEHMET FATIH

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.

Where you operating a motor vehicle at the time of the stop/Accident? _____
Where were you going? _____
What Street or Highway were you on? _____
What was you direction of travel? _____
Where did you start from? _____
What time did you start? _____
What time is it now? _____
What is today's date? _____
What day of the week is it? _____
What City and County 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 have you been drinking? _____
How much? _____
With whom? _____
When did you have your first drink? _____
When did you have your last drink? _____
Can you feel the effects of the alcohol? _____
Are you under the influence? _____
Have you consumed any alcohol since the stop/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? _____
Where 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 you eyes that are not corrected by glasses? _____
Do you take insulin? _____ If so, when was your last injection? _____
Have you ever gad a driver's license in any other state? _____
Where? _____
Interviewer: _____

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MAR 15 2024

SUBJECT: , , CASE NUMBER: 24-00 4350

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.

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)_____

WHITE: STATE ATTY. YELLOW: DHSMV PINK: CENTRAL RECORDS GOLD: AN

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MAR 15 2024

CASE #: 24-004350 **DEFENDANT:** OZKURT, MEHMET FATIH

Arresting Officer: V. ALEXIS
Address: 2100 HIGH RIDGE ROAD, BOYNTON BEACH, FL 33426
Phone Numbers: Home: _____ **Work:** (561) 742-6100

Name: OFC. DONNINO
Address: 2100 HIGH RIDGE RD.
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: _____

Name: _____
Address: _____
Phone Numbers: Home: _____ **Work:** _____
Can testify to: _____

Name: _____
Address: _____
Phone Numbers: Home: _____ **Work:** _____
Can testify to: _____

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MAR 15 2024

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	☐			
	☐			
	☐			
	☐			

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REVIEW COMPLETED BY

Booking Number: 2024007028	**Date:** 3/15/2024
	Specialist Name/ID#: C. Daniels/ 30347

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MAR 15 2024