0265672 23CT 116851TNB 3594

ARREST / NOTICE TO APPEAR

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

1 JUVENILE

ADMINISTRATION

OBTS Number

Agency ORI Number: 0501700
Agency Name: Jupiter Police Department
Agency Report Number (N.T.A.'s only): 5 | 4 | 23-002690

Charge Type: Check as many as apply.
☐ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

If Weapon Seized — Enter Type: UNARMED

Multiple Clearance Indicator: 1

Location of Arrest (Including Name of Business): 500 UNIVERSITY BLVD JUPITER, FL
Location of Offense (Business Name, Address): 500 UNIVERSITY BLVD, JUPITER, FL 33458

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
07/04/2023	06:28	07/04/2023	06:38			

DEFENDANT

Name (Last, First, Middle): ROY, MICHAEL SCOTT
Alias (Name, DOB, Soc. Sec. #, Etc.): Alias: ROY, MICHAEL S

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	06/20/1980	5'11	190	BLUE	SANDY	LIGHT	Medium

Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description):
Marital Status: S
Religion: OTHER
Indication of: Alcohol Influence ☒ Yes ☐ No ☐ Unk. ☐ Drug Influence

Local Address (Street, Apt. Number) (City) (State) (Zip): 107 KOPSIA DR, JUPITER, FL 33458
Phone: (561) 339-5755
Residence Type: 1. City 3. Florida 2. County 4. Out of State: 1

Permanent Address (Street, Apt. Number) (City) (State) (Zip): 107 KOPSIA DR, JUPITER, FL 33458
Phone: (561) 339-5755
Address Source: FL DL

Business Address (Name, Street) (City) (State) (Zip):
Phone:
Occupation:

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
R000557802200 / FL	[redacted]		PORTSMITH, VI,	US

CO-DEF

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

JUVENILE

☐ Parent ☐ Other: ☐ Legal Custodian
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 Department and Released 2. TOT JAC 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 355-2526) informed of any change of address.
☐ Yes, by: ☐ No:

School Attended: Grade:
Property Crime? ☐ Yes ☒ No
Description of Property: Value of Property:

CODE

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

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

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #
DUI - NORMAL FACULTIES IMPAIRED	316.193(1)(A)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
	N	/		1	☐ Y ☒ N		

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
		/			☐ Y ☐ N		

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
		/			☐ Y ☐ N		

INTAKE

Health / Apparent Physical Condition of Defendant:
Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries
Explain:

Check which applies: ☐ Released O.R. ☐ Released to Parent/Guardian ☐ T.O.T. County Jail ☐ Posted Bond ☐ South County Mental Health

PROPERTY - Received By | Released By | Released To

Transported By | Date Transported / / | Time Transported : : | Other

NOTICE TO APPEAR

☒ INSTRUCTION NO. 1 - Mandatory appearance in court
☐ INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.

Location (Court, Room): North County PALM BEACH GARD
Court Date and Time: 08/09/2023 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 COMTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.

X _____
Signature of Defendant (or Juvenile and Parent/Custodian) Date Signed

No Photo Available

ADMIN

HOLD for Other Agency
☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other
Intake Deputy I.D. # 6248 Pouch #

Signature of Arresting Officer
Name of Arresting Officer (Print): ANDERSON, KELLY I.D. # 1200
Transporting Officer K. ANDERSON I.D. # 1200 Agency JUPITE

Name Verification (Printed by Arrestee) (PRINT)
Witness here if subject signed with an "X".

FILED PBC - GUN CLUB
'23 JUL 5 AM 7:56

PAGE 1 OF 1

☐ COURT ☐ STATE ATTORNEY ☐ AGENCY ☐ CENTRAL RECORDS ☐ JAIL ☐ CRIME ANALYSIS ☐ P.T.O. ☐ DEFENDANT

SCANNED
JUL 05 2023

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PROBABLE CAUSE AFFIDAVIT

ADMIN

OBTS Number:

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

1 JUVENILE

Agency ORI Number	Agency Name	Agency Report Number
FL 0501700	JUPITER POLICE DEPARTMENT	5 | 4 | 23-002690

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)	Alias	Race	Sex	Date of Birth
ROY, MICHAEL SCOTT	ROY, MICHAEL S	W	M	06/20/1980

CHARGES

Charge Description	Charge Description
316.193(1)(A) DUI - NORMAL FACULTIES IMPAIRED	
Charge Description	Charge Description

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
STATE OF FLORIDA,			

Local Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Address Source

Business Address (Name, Street)	(City)	(State)	(Zip)	Phone	Occupation

PROBABLE CAUSE STATEMENT

The undersigned certifies and swears that he/she has just and resonable 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.
☐ confessed to _____ admitting to the below facts.
☐ was observed by _____ who told _____ that he/she saw the arrested person committ the below acts.
☒ was found to have committed the below acts, resulting from my (described) investigation.

On the 4 day of July, 2023 at 05:35 (Specifically include facts constituting cause for arrest.)

On 7/4/23 at approximately 0326 hours, I was in the outside lane of the 4100 black of Mililtary Trail just south of Frederick Small Road in Jupiter, Florida, assisting with a vehicle that ran out of gas.

While standing by with the disabled vehicle (event # 23176547) I was in my marked Jupiter Police Department vehicle #1403 with my directional red and blue lights activated, I observed a larger vehicle approaching at a high rate of speed in the outside lane. I placed my vehicle in drive due to my concerns the driver was going to rear end my vehicle and accelerated in to the center lane. A 2020 gray Dodge Ram bearing Florida tag PCCF41 drove past me in the outside lane. I conducted a traffic stop at Miitary Trail and University Boulevard. The driver pulled in near the 500 building of University Boulevard.

Upon approach, the driver and sole occupant later identified as W/M Michael Scott Roy DOB 6/20/80 was actively searching for his registration. I explained to him the purpose of the traffic stop and he apologized and stated he was on his way home. While speaking wtih Mr. Roy, I could smell an unknown alcoholic beverage emanating from his person. I asked him where he was coming from and he advised he was out and about for the night. I asked him to confirm where he lived and he advised 107 Kopsia Drive in Botanica. I would like to note that the direction in which he was traveling was aprroximately 2 miles south in the opposite direction of his residence. He ultimately told me he was coming from Uncle Micks in Jupiter and had approximately 5-6 beers. Mr. Roy provided me his driver`s license but had a difficult time producing his registration and his insurance. He ultimately provided both after I conducted a driver`s license check.

Due to my concerns that he may be impaired, I asked Mr. Roy to step out of the vehicle. I explained to him my concerns and asked him to perform Field Sobriety Tasks in which he agreed to do.

ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

07/04/2023
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

ANDERSON, KELLY (1200)
NAME OF OFFICER (PLEASE PRINT)

07/04/2023
DATE

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O.

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ADMIN	OBTS Number	PROBABLE CAUSE AFFIDAVIT SUPPLEMENT	1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias	1	JUVENILE

Agency ORI Number	Agency Name	Agency Report Number
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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)	Alias	Race	Sex	Date of Birth
	ROY, MICHAEL SCOTT	ROY, MICHAEL S	W	M	06/20/1980

PROBABLE CAUSE STATEMENT

As a result of the Standardized Field Sobriety Tasks, Ducoste Amedee gave me clues that indicated impairment (see DUI probable cause affidavit for further information regarding specific indicators of impairment).

I placed Mr. Roy under arrest for suspcion of driving under the influence pursuant to F.S.S. 316.193(1)(a)- Normal Faculties Impaired. Mr. Roy was placed in to handcuffs, checking for proper spacing and double locked. A search incident to arrest was conducted and he was placed in the backseat of my marked patrol vehicle (1403). I notified Mr. Roy`s girlfriend of his arrest per his request and advised of her of the location of his vehicle. Mr. Roy gave permission for us to park his vehicle in a parking space approximately 30 feet away from his final stop. Officer Waltenburg parked and secured Mr. Roy`s vehicle.

While in the backseat of my patrol vehicle, I requested Mr. Roy to submit to a lawful test of his breath. Mr. Roy refused to provide a breath same and I then read Implied Consent to Mr. Roy who refused again. Roadside refusal was completed at 0405 hours. I transported Mr. Roy back to the Jupiter Police Department at 196 Military Trail to complete the appropriate paperwork. He was then transported down to the Palm Beach County Jail without incident.

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

07/04/2023
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

ANDERSON, KELLY (1200)
NAME OF OFFICER (PLEASE PRINT)

07/04/2023
DATE

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O.

23002690

STATE OF FLORIDA
AFFIDAVIT OF REFUSAL TO SUBMIT TO
BREATH TEST

I, **Officer K. Anderson**, a duly certified Law Enforcement or Correctional Officer, am a
(Name of Officer reading Implied Consent Warning)

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

or affirm that on or about the **4th** day of **July**, 20**23**, at **0351** ☐P.M. ☑A.M.

DRIVER **Michael** **Scott** **Roy**,
FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL # **R000557802200**, state of **Florida**, was placed under lawful arrest for

the offense of **DUI** by **Officer K. Anderson** and
(Name of Arresting Officer)

issued citation # **AHUH7EE**.

That on or about the **4TH** day of **July**, 20**23**, at **0405** ☐P.M. ☑A.M.

in **Palm Beach** County,

I requested that the driver submit to a **BREATH** test for the purpose of determining its alcohol content. I informed the driver that the refusal to submit to such test would result in the suspension of his or her driving privilege for a period of one (1) year for a first refusal, or for a period of eighteen (18) months if his or her driving privilege had been previously suspended, or if he or she had been previously fined under s. 327.35215, F.S., for refusing to submit to a breath, urine, or blood test. I also informed the driver that he or she commits a misdemeanor by refusing to submit to a lawful test as requested above if his or her driving privilege has been previously suspended, or if he or she has been previously fined under s. 327.35215, F.S., for refusal to submit to a lawful test of his or her breath, urine, or blood. Nonetheless, the driver refused to submit to the test requested.

Signature of Law Enforcement Officer or Correctional Officer

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

The foregoing instrument was sworn and subscribed before me:

Signature of Attesting Officer

Title Detective

Date **July 4, 2023**

(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before me this **4th** day of **July**, 20**23**, by **Officer K. Anderson ID 1200**, who is personally known to me or who has produced **Personally Known** as identification.

Notary Public _____

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.

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EFFECTIVE OCTOBER 1, 2021

SUBJECT: **Roy, Michael Scott** CASE NUMBER: **23002690**

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 o chemical or controlled substances.

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

I am **Officer K. Anderson** of the **Jupiter Police Department**

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.

SUBJECT'S SIGNATURE: **Read on Camea** **Roy, Michael Scott**

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: **Read on Camera** **Roy, Michael Scott**

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WITNESS LIST

CASE NUMBER: 23002690

ARRESTING OFFICER: K. Anderson ID 1200

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: _____

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NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

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TOWN OF JUPITER

POLICE DEPARTMENT

Important Post DUI Arrest Information

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Mr. Roy ,

You have been arrested for DUI by the Jupiter Police Department, case # **23002690** .
Your vehicle has been towed by **Parked at 500 University Blvd Jupiter, Fl** . Their phone number can be found in the yellow pages or with an internet search.

You have a court date of **August 9, 2023** at 8:30 am at the North County Courthouse located at 3188 PGA Blvd. Palm Beach Gardens, FL 33410.

☑ Your copy of the DUI Citation is your driving permit for the next TEN (10) 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 3718-3 West Oakland Park Blvd. Lauderdale Lakes, FL 33144 or call (954) 677-5801.

☐ 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, **Officer K. Anderson ID 1200** can be reached by calling the Jupiter Police Department and leaving a message, or by email at **1200** @jupiter.fl.us. The arresting officer will attempt to contact you during the next working shift after your call/email has been received.

196 Military Trail • Jupiter, Florida 33458 • Phone (561) 746-6201 • Fax (561) 746-4545

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:	

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REVIEW COMPLETED BY

Booking Number: 2023017365	**Date:** 7/5/2023
	Specialist Name/ID: Chantel Daniels/30347