Marsy's Law CVI FL. Const. Art.1 § 16(b) 0538178 23CT2786AMB

☐ Check if Supplement is Attached 02

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

OBTS Number

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

Juvenile: N

ADMINISTRATIVE

Agency ORI Number: FL0 5 0 0 0 0 0

Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE

Agency Report Number: 06-23-035711 ( )

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: 0 1

Location of Arrest (including Name of Business): Southern Blvd (SR 80) and Fairgrounds Rd, West Palm Beach, FL 33411

Location of Offense (Business Name, Address): Southern Blvd (SR 80) and Fairgrounds Rd, West Palm Beach, FL 33411

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
02/12/2023	0015					

DEFENDANT

Name (Last, First, Middle): Saravia, Victor, Manuel

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	10/23/1958	5'08	175	Bro	Bro	Med	Med

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

Marital Status: Married

Religion: Catholic

Indication of: Alcohol Influence Y ☒ N ☐ Unk ☐ Drug Influence Y ☐ N ☐ Unk ☒

Local Address (Street, Apt. Number) (City) (State) (Zip): 6410 Westover Rd, West Palm Beach, FL 33417

Mobile Phone: (561) 293-9474

Residence Type: 1. City 2. County 3. Florida 4. Out of State: 2

Permanent Address (Street, Apt. Number) (City) (State) (Zip)

Phone ( )

Address Source: FI DL

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

Phone ( )

Occupation: Worker Sugar

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
S610873583830, FL	[redacted]		Honduras	Honduras

CO-DEF

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

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) 355-6511) 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 P. Possess S. Sell B. Buy 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. Barbiturate 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 #
Driving Under the Influence	01	☐ Y ☒ N	316.193(1a)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
N	N		23-035711		

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐ Y ☐ N		

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

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐ Y ☐ N		

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

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐ Y ☐ N		

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

NOTICE TO APPEAR

Location (Court, Room Number, Address): Criminal Justice Complex, 3228 Gun Club Road, West Palm Beach, FL 33406 - Ph: (561) 688-4600

Court Date and Time: Month March Day 27 Year 2023 Time 0830 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

Signature of Defendant (or Juvenile and Parent/Custodian) Date Signed 02/12/2023

I consent to receive text reminders of court date(s) and times for this case by automated technology to the mobile number identified above. I understand that standard text message rates may apply, and that I may revoke this consent via the text message system if I choose. Signature

ADMIN

HOLD for other agency

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other:

Signature of Arresting Officer X

Name of Arresting Officer (Print) I.D. #: Inv. C. Ward

Intake Deputy: Barillo 16342 Pouch #

Transporting Officer: Inv. C. Ward I.D. #: 16305 Agency: PBSO

Name Verification (Printed by Arrestee) (PRINT)

Witness here if subject signed with an "X"

PAGE 1 OF 1

PBSO #0148 REV. 11/22 DISTRIBUTION: COURT COPY STATE ATTORNEY AGENCY AGENCY DEFENDANT (N.T.A.'s ONLY)

NOT A CERTIFIED COPY

SCANNED FEB 13 2023

PROBABLE CAUSE AFFIDAVIT

OBTS Number:

1 Arrest 2 NTA 3 Request for Warrant 4 Request for Capias | 1 | Juvenile: N

ADMIN

Agency ORI Number: FLO 5 0 0 0 0 0 | Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE | Agency Report Number: 23-035711

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
Saravia, Victor, Manuel		W	M	10/23/1958

CHARGES

Charge Description		Charge Description
Driving Under the Influence	316.193(1a)	
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 I have just and reasonable grounds to believe, and do believe that the above named Defendant committed the listed violation(s) of law.
The Person taken into custody:

☐ committed the below acts in my presence.
☐ was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.
☐ confessed to _____ admitting to the below facts.
☒ was found to have committed the below acts, resulting from my (described) investigation.

On the 11 day of February 20 23 at 2337 ☐ A.M ☒ P.M (Specifically include facts constituting cause for arrest.)

☐ **Marsy's Law CVI**
FL. Const. Art.1 § 16(b)

I conducted the Standardized Field Sobriety Tasks (SFSTs) in front of my PBSO patrol vehicle using the in car video system with the following results. The area appeared Flat and even to the naked eyed, Well Lit and clear of any large debris. It was Warm and Not Windy. The area was dry

Horizontal Gaze Nystagmus (HGN)

The defendant was placed with their feet together and hands down by their side. The defendant was instructed to await the completion of the instructions prior to beginning the task. The defendant acknowledged that they clearly understood my instructions. I then instructed the defendant on the task. The defendant stated that they clearly understood my instructions for the task. I placed my stimulus in front of the defendant and ask the defendant if they could see it to which he said "yes." I asked the defendant what color the stimulus was to which they answered. "red.". Upon commencing the task the defendant did not follow with their eyes only, and/or did not follow the stimulus as instructed. I had to reinstruct the defendant multiple times during the task to follow the stimulus with their eyes only. During the task, I observed that the defendant had equal pupil size and did not exhibit resting nystagmus. The defendant's eyes tracked equally. I observed a lack of smooth pursuit in both of the defendant's left and right eyes. I observed distinct and sustained nystagmus, a quivering/jerking from side to side, while the stimulus was held at maximum deviation in both of the defendant's left and right eyes. I observed the onset of nystagmus with the stimulus held prior to 45 degrees in both of the defendant's left and right eyes.

I then checked the defendant for Vertical Gaze Nystagmus (VGN). I did not see a distinct and sustained nystagmus at maximum deviation in both of the defendant's left and right eyes.

NOT A CERTIFIED COPY

ADMINISTRATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH

Inv. C. Ward
(Signature of Arresting /Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 12 day of February 20 23 by Inv. C. Ward
(Print name of Arresting/Investigative Officer), who personally known to me and/or produced identification. Type of identification produced: Known LEO

Notary Public, Clerk of Court, Officer (F.S.S). 117.10)

JOSHUA BELL
MY COMMISSION #GG346008
EXPIRES: JUN 18, 2023
Bonded through 1st State Insurance

PBSO #0004 REV. 12/22 DISTRIBUTION: STATE ATTORNEY AGENCY AGENCY DEFENDANT (N.T.A.'s ONLY)

ADMIN

OBTS Number

PROBABLE CAUSE AFFIDAVIT

1 Arrest 2 NTA 3 Request for Warrant 4 Request for Capias | 1 | Juvenile: N

Agency ORI Number	Agency Name	Agency Report Number
FLO 5 0 0 0 0 0	PALM BEACH COUNTY SHERIFF'S OFFICE	23-035711

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
Saravia, Victor, Manuel		W	M	10/23/1958

CHARGES

Charge Description		Charge Description	
Driving Under the Influence	316.193(1a)		
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**
				( )	

The undersigned certifies and swears that I have just and reasonable grounds to believe, and do believe that the above named Defendant committed the listed violation(s) of law.
The Person taken into custody:

☐ committed the below acts in my presence.
☐ was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.
☐ confessed to _____ admitting to the below facts.
☒ was found to have committed the below acts, resulting from my (described) investigation.

On the 11 day of February 20 23 at 2337 ☐ A.M ☒ P.M (Specifically include facts constituting cause for arrest.)

PROBABLE CAUSE STATEMENT

☐ **Marsy's Law CVI**
FL. Const. Art.1 § 16(b)

At this time I found probable cause to believe that the defendant was impaired for the purposes of operating and/or being in actual physical control of a motor vehicle pursuant to Florida State Statute 316.193(1a). I handcuffed the defendant to the rear. I checked the handcuffs for proper fit and double locked them. I then placed the defendant in the rear of my PBSO patrol vehicle.

I transported the Defendant to the Palm Beach County Jail Breath Alcohol Testing (B.A.T.) center.

Once at the Breath Alcohol Testing Center I placed the defendant in a centrally located position where they could be easily monitored. I observed the defendant for 20 uninterrupted minutes during which time they did not ingest anything and/or regurgitate. After the 20 minute observation period the defendant was escorted into and isolated testing room which was video recorded. Once inside the room, With D/S J. Bermudez interpreting, I requested a lawful sample of the defendant's breath for the purposes of determining its blood alcohol content. The defendant Consented. The defendant gave two lawful samples of his breath resulting in a BAC of .096 and .098.

NOT A CERTIFIED COPY

ADMINISTRATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH

Inv. C. Ward
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 12 day of February 20 23 by Inv. C. Ward

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

Notary Public, Clerk of Court, Officer (F.S.S). 117.10)

JOSHUA BELL
MY COMMISSION #GG346008
EXPIRES: JUN 10, 2026
Bonded through 1st State Insurance

PBSO #0004 REV. 12/22 DISTRIBUTION: STATE ATTORNEY AGENCY DEFENDANT (NTA ONLY)

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 11 DAY OF February 20 23, AT 2337 AM ✓PM

SUBJECT: Saravia, Victor, Manuel CASE NUMBER: 23-035711

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: Inv. C. Ward

PERSONAL CONTACT

DRIVING PATTERN: Actual physical control (physical evidence or statements putting def. behind wheel of vehicle)

I was patrolling in the area of Southern Blvd (State Road 80) and Fairgrounds Rd, in unincroproated West Palm Beach, Palm Beach County when I observed the defendant's vehicle, a Gray Chevrolet Colorado bearing tag QEVX60, was swaying side to side within it's lane and crossed the yellow fog ling to the left side of the lane while traveling East bound on Southern Blvd. The vehicle then proceeded to apply it's brakes and slow down at a steady solid green lignt. I then proceeded to activate my emergency overhead lights to conduct a welfare check of the vehicle. The vehicle slowed down and stopped in a bus stop.

OBSERVATION OF DRIVER:

I made contact with the defendant, later identified by their Florida Driver's License as, Victor Manuel Saravia. I observed that the defendant had red, watery, bloodshot eyes. The defendant had a heavy spanish accent and the odor of an unknown alcoholic beverage, based on my training and life experiences, that came from their breath which intensified as they spoke to me.

I asked the defendant to exit the vehicle. The defendant swayed while standing and while walking. I continued to smell the odor of an unknown alcoholic beverage the emitted the from the defendant's breath while outside of the vehicle.

I spoke to the defendant using my limited Spanish while waiting for an interpreter to respond. The defendant stated that he had three beers. D/S J. Bermudez # 36176 responded to the scene and interpreted. I asked the defendant if they had any medical problems or physical defects or had taken any medications and the defendant said no. I asked the defendant if he had any illegal drugs or smoked any marijuana and he stated that he had only drank the three beers. He stated that the beers were Stella I asked the if the turck had any mechanical issues and he said no.

I asked the defendant to perform voluntary field sobriety tasks. The defendant consented.

DRIVER'S STATEMENTS:

I asked the defendant if they had any medical problems or physical defects or had taken any medications and the defendant said no. I asked the defendant if he had any illegal drugs or smoked any marijuana and he stated that he had only drank the three beers. He stated that the beers were Stella I asked the if the turck had any mechanical issues and he said no. The defendant said he was coming from Patigonia in Royal Palm Beach area and was heading home. He stated was on Southern Blvd. He stated that he could feel the effects of alcohol a little bi

ODORS:

I could smell the odor of an unknown alcoholic beverage, that came from the defendant and intensified as he spoke to me

GENERAL OBSERVATIONS

SPEECH: **Spanish Speaking**

ATTITUDE: **Cooperative**

CLOTHING: **Polo Shirt and Slacks, clean**

MEDICAL/OTHER: I asked the defendant if they had any medical problems or physical defects or had taken any medications and the defendant said no. I asked the defendant if he had any illegal drugs or smoked any marijuana and he stated that he had only drank the three beers. He stated that the beers were Stella I asked the if the turck had any mechanical issues and he said no.

TATE OF FLORIDA
'OUNTY OF PALM BEACH

Inv. C. Ward
ignature of Arresting/Investigative Officer)

he foregoing instrument was sworn to or affirmed and subscribed before me this 12 day of February 20 23 by Inv. C. Ward

rint name of Arresting/Investigative Officer) who is personally known to me and/or produced identification. Type of identification produced Known LEO

otary Public, Clerk of Court, Officer (F.S.S 117.10)

JOSHUA BELL
MY COMMISSION #GG348008
EXPIRES: JUN 18, 2023
Bonded through 1st State Insurance

NOT A CERTIFIED COPY

SUBJECT: Saravia, Victor, Manuel **CASE NUMBER** 23-035711

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- [x] LT EYE-LACK OF SMOOTH PURSUIT
- [x] RT EYE-LACK OF SMOOTH PURSUIT
- [x] LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
- [x] RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
- [x] LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES
- [x] RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

)ther Observations:
See PC

WALK & TURN:

A white lane marked that was painted on the groud. I asked the defendant if they knew their left from their right which they did. I asked the defendant i they could see the line and they stated that they did. I asked the defendant what color the line was and they stated white. I had the defendant place their left foot on the line with their right foot in front of the left, heel to toe. I instructed the defendant to remain in the position throughout my instructions an demonstration. The defendant was instructed not to start the task prior to me telling them to begin. The defendant acknowledged and stated they completely understood my instructions. The defendant was then instructed on the task which I also demonstrated. The defendant swayed during my instructions. The defendant came out of the stance prior to me telling them to begin. Once the defendant was told to begin the task they missed heel to toe, and made an improper turn. The defendant stumbled and brought his hands up for balance while turning. The defendant did not count out loud for the first half of the task, stopped and asked for additional instructions, and swayed throughout completing the task.

ONE LEG STAND:

The defendant was instructed to stand with their feet together and their hands down by their side. They were then instructed to remain in the position throughout the instructions and demonstration until instructed to begin. The defendant acknowledged and stated that they clearly understood the instructions. The defendant swayed while in the instructional position. After being told to begin the defendant used their arms for balance and swayed. The defendan did not count in the manner instructed. The defendant did not point their toe even after being instructed to do so.

FINGER TO NOSE:

The defendant was instructed to stand with their feet together and their hands down by their side. The defendant was then instructed to remain in the position throughout the instructions and demonstration until instructed to begin. The defendant acknowledged and stated that they clearly understood these instructions. The defendant swayed while in the instructional position. The defendant mimicked me by raising their arms prior to being told to start. I instructed the defendant on the task and demonstrated the task. The defendant acknowledged the instructions stating that they clearly understood them. The defendant proceeded to searched for the tip of their nose with the tip of their finger, sand did not bring their hand immediately bring back.

ROMBERG ALPHABET:

The defendant was instructed to stand with their feet together and their hands down by their side. The defendant was then instructed to remain in the position throughout the instructions and demonstration until instructed to begin. The defendant acknowledged and stated that they clearly understood these instructions. The defendant swayed while in the instructional position. The defendant stated that he did know their spanish alphabet from A to Z. He stated that could count in Spanish from 0 to 100. I instructed him on the task and then demonstrated the task. The defendant acknowledged the instructions statin that they clearly understood them. The defendant then proceeded to count from 1 to 26 in English without issue.

3REATH TEST RESULTS: .096 .098

TATE OF FLORIDA
'OUNTY OF PALM BEACH

Inv. C. Ward
ignature of Arresting/Investigative Officer)

ne foregoing instrument was sworn to or affirmed and subscribed before me this 12 day of February 20 23 by Inv. C. Ward

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

otary Public, Clerk of Court, Officer (F.S.S 117.10)

JOSHUA BELL
MY COMMISSION #GG348008
EXPIRES: JUN 18, 2023
Bonded through 1st State Insurance

NOT A CERTIFIED COPY

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: 80-006478 Software: 8100.27
Date of Test: 02/12/2023

Date of Last Agency Inspection: 02/10/2023
Observation Period Began: 00:43
Subject's Name: VICTOR M SARAVIA DOB: 10/23/1958 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	01:08
Air Blank	0.000	01:09
Control Test	0.079	01:09
Air Blank	0.000	01:10
Subject Sample #1	0.096	01:10
Air Blank	0.000	01:11
Air Blank	0.000	01:13
Subject Sample #2	0.098	01:13
Air Blank	0.000	01:14
Control Test	0.078	01:15
Air Blank	0.000	01:15
Diagnostics Check	OK	01:15

Cylinder Lot: 08622080A1
Exp: 06/05/2024

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 RENEE M RAGIN, 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: _____ Date: 02/12/23
Signature

Sworn to (or affirmed) before me this 12 day of Feb., 2023

_____ Inv. C. Ward # 16305
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.

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

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

PBSO CASE # 23-035711 PBSO ZONE 1-25

AGENCY CASE # _____ CRASH CASE # _____

TIME OF STOP/CRASH 2337 DATE 02/12/2023 DAY Sunday

SUBJECT'S NAME Saravia, Victor, Manuel RACE W SEX M

HGT 5'08 WGT _____ DOB 10/23/1958

LOCATION Southern Blvd (SR 80) and Fairgrounds Rd, West Palm Beach, FL 33411

ARRESTING OFFICER'S NAME & ID Inv. C. Ward 0 AGENCY Palm Beach County Sheriff's Office

DIVISION: DUI-CID

NOTIFIED BY COMMO Yes

ARRIVAL AT FACILITY 0043

ARREST TIME 0015

BREATH RESULTS:

.096
.098

NOT A CERTIFIED COPY

TESTING OFFICER'S ID 16877 PBSO VIDEOTAPE # N/A

TESTING FACILITY TASK REPORT

AGENCY: PBSO

SUBJECT: Saravia, Victor M.

CASE NUMBER: 23-035711

DATE: Feb 12, 2023

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 01:06

ENDING TIME: 01:22

BREATH TESTS RESULTS: 1) .096 TIME 01:10 A.M. ☒ P.M. ☐ 2) .098 TIME 01:13 A.M. ☒ P.M. ☐

3) N/A TIME ——— A.M. ☐ P.M. ☐ 4) N/A TIME ——— A.M. ☐ P.M. ☐

BREATH OPERATOR: R. Ragin #16877

MAINTENANCE TECHNICAN: Jason Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: Spanish Speaking, Slurred

ATTITUDE: Calm, cooperative

CLOTHING: Mint green pants, mint green polo shirt, black sneakers

MEDICAL CONDITIONS: None

MEDICATIONS: None

OTHER:

Eyes are glassy & bloodshot
odor of unknown alcoholic beverage on breath
Translated by D/S J.Bermudez#36176 PBSO Subject stated in Q&A he had 3 Beers

---

COMMENTS:

Arrived at center A/O started 20 minute observation period at 00:43 hrs.

Subject agreed to perform breath test.

A/O read rights.
Subject stated he understood rights.

Tech read breath test results.
Subject acknowledged he understood breath test results.

A/O conducted Q&A.
Subject answered Q&A.

NOT A CERTIFIED COPY

WITNESS LIST

CASE NUMBER: 23-035711

ARRESTING OFFICER: Inv. C. Ward

ADDRESS: 3228 Gun Club Rd, West Palm Beach, FL 33406

PHONE NUMBERS (HOME): _____ (WORK) 561-688-300

CAN TESTIFY TO: DUI investigation

NAME: D/S Jarmy Bermudez # 36176

ADDRESS: 3228 Gun Club Rd, West Palm Beach, FL 33406

PHONE NUMBERS (HOME) _____ (WORK) 561-688-3000

CAN TESTIFY TO: Interpretation.

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 _____

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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: _____

NOT A CERTIFIED COPY

SUBJECT: Garcia, Victor M. CASE NUMBER: 22-025711

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)_____

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

SUBJECT: Cruz, Victor M. CASE NUMBER: 22-025711

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: _____

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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: 2023004047	**Date:** 2/13/2023
	Specialist Name/ID: T.Howard/7185