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ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

ADMINISTRATIVE

OBTS Number	Agency ORI Number	Agency Name	Agency Report Number (N.T.A.'s only)
	FLO 500000	PALM BEACH COUNTY SHERIFF'S OFFICE	06- 17-167859

ChargeType: Check as many as apply. ☐ 1. Felony ☐ 2. Traffic Felony ☑ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

Weapon Seized / Type (1. Yes 2. No): 2 — Multiple Clearance Indicator: 1

Location of Arrest (Including Name of Business)	Location of Offense (Business Name, Address)
1217 LAKE BREEZE DR	1217 LAKE BREEZE DR

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
12/26/17	0324					WESTWAY TOWING

DEFENDANT

Name (Last, First, Middle): Griffin, Alan — Alias (Name, DOB, Soc. Sec. #, Etc.):

Race (W - White I - American Indian B - Black O- Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	M	3/15/1975	6'00	180	BRO	BRO	FAIR	MED

Scars, Marks, Tatoos, Unique Physcal Features (Location, Type, Description):

Marital Status: SINGLE — Religion: CATHOLIC — Indication of: Alcohol Influence Y ☑; Drug Influence N ☑

Local Address (Street, Apt. Number) (City) (State) (Zip)	Phone	Residence Type (1. City 2. County 3. Florida 4. Out of State)
1912 S CLUB DR WELLINGTON FL 33414	(203) 273-2782	1

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

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

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
038301428	[redacted]		HARROW, ENGLAND	USA

CO-DEF

Co-Defendant Name (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 provided by ☐ defendant and / or ☐ defendant's parents The child and / or parent was told to keep the Juvenile Court Clerk (Phone 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 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. Synthetics U. Unknown Z. Other

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
DRIVING UNDER THE INFLUENCE	1	☐Y ☑N	316.193(1)(A)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
N	N		17-167859		

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): 3228 GUN CLUB ROAD WEST PALM BEACH FL 33406

Court Date and Time: Month JAN Day 25 Year 2018 Time 830 AM ✓ PM

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

ADMIN

HOLD for other Agency Name: — Signature of Arresting Officer X — Name Verification (Printed by Arrestee) (PRINT)

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other:

Name of Arresting Officer (Print): Schneider — I.D. #: 8723

Intake Deputy: Hoover 7220 — I.D. # — Pouch # — Transporting Officer: SCHNEIDER — ID # — Agency

Witness here if subject signed with an -X" — PAGE 1 OF 1

DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT NTA ONLY

PBSO #148 REV. 8/97

PROBABLE CAUSE AFFIDAVIT

ADMIN

OBTS Number:

1 Arrest, 2 NTA, 3 Request for Warrant, 4 Request for Capias: 1

Juvenile:

Agency ORI Number: FLO. 5 , 0 , 0 , 0 , 0 , 0

Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE

Agency Report Number: 17-167859

Charge Type (Check as many as apply): [x] 1 Felony [ ] 2 Traffic Felony [ ] 3 Misdemeanor [ ] 4 Traffic Misdemeanor [ ] 5 Ordinance [ ] 6 Other

Special Notes:

DEF

Name (Last, First, Middle): GRIFFIN, ALAN P

Alias:

Race: W | Sex: M | Date of Birth: 3-15-75

CHARGES

Charge Description: DUI

Charge Description:

Charge Description:

Charge Description:

VICTIM

Victim s Name (Last, First, Middle): FL

Race | Sex | Date of Birth

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 reasonable grounds to believe. and does believe that the above named Defendant committed the following violation of law
The Person taken into custody

[x] 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 commit the below acts.
was found to have committed the below acts, resulting from my (described) investigation.

On the 26 day of DEC 20 17 at 02:45 [ ] A.M [x] P.M (Specifically include facts constituting cause for arrest.)

While on patrol, I observed Def Griffin passed out behind the wheel of a 2011 blue Ford Pick up truck bearing a FL tag of Y66-CTD, with the headlights off, in the intersection of Columbine Pl and Lake breeze Dr. As I positioned my vehicle behind his, the vehicle began to slowly pull forward and turn left on to Lake Breeze Dr. I conducted a traffic stop coming to a final rest at 1217 Lake Breeze Dr. Upon making contact with the Def., I observed him to have blood shot, red watery eyes, he had slurred speech when he spoke and I detected the distinct, pungent odor of an unknown alcoholic beverage coming from his facial area. Based on these observations, I requested D/S Schneider ID 8723 respond to the scene and conduct an independent DUI investigation, which resulted in the Def's arrest.

ADMINISTRATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting /Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 26 day of DEC 20 17 by D/S J. RIGNEY #8875

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

DEC 27 2017

SCANNED

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