

Arrest Report

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

18CT9122

Report Date / Time 5/19/2018 6:32:23AM	Report Number FHP99ARR769460	Case Number/CAD Number FHPL18OFF041820 / LWRC18CAD090503	Reporting Officer Name K. GRUEBEL
Originating Agency ORI FL0509000	Occurrence Date Time Range 5/19/2018 6:06:42 AM -	Jurisdiction	Clearance

Location of Occurrence

Location Type OTHER	Location Description SOF		
Street Number I-95 NB	Apt/Lot/Bldg		
County PALM BEACH	City WEST PALM BEACH	State FL	Zip 33407

Defendant

First Name ALDEN	Middle Name JAMES	Last Name DAVIS	Suffix	Date Of Birth 3/13/1996	Age 22	Race WHITE	Sex MALE
SSN	MNI #	Place of Birth WPB, FL	Height 509	Weight 160	Hair BRO	Eyes BRO	
DL or ID Number D120010960930	ID State FL	ID Type E	Address Type				
Street Number 3538	Street WILLIAM ST	Apt/Lot/Bldg					
County	City LAKE PARK	State FL	Zip 33403	Phone Number	Extension		
Location Description							

Arrest

Arrest Date/Time 5/19/2018 6:09:30AM	Arrest Location Type PUBLIC PLACE	Arrest Location Description NB SR-9 S OF 45TH ST	
Street Number	Street	Apt/Lot/Bldg	County
City	State	Zip	

Charge(s)

Counts 1	Charge 316.193.1	General Offense Code	Bond Amount \$ 0.00	☐ No Bond
Charge Degree N	Charge Level MISDEMEANOR	Arrest Offense Code Description DUI-UNLAW BLD ALCH		
Charge Description DUI ALCOHOL OR DRUGS				

Probable Cause

On the above date I was dispatched to a crash on Northbound State Road 9 (I-95) just south of 45th St. There was fire rescue and ambulance on scene. The stated no one wanted to be transported and everyone was fine. I first spoke to a black male that was later known in crash as driver of vehicle #2. He stated he was driving in the middle left lane. He stated all of a sudden he felt a impact in the rear of his vehicle. He stated he looked back and saw a car spinning out and going to the right. He stated the male sitting was the only person in the vehicle. I spoke with the white male driver that was determined to be driver of vehicle #1. As he stood up he was uncoordinated on his feet. I asked the driver what happened. He stated he doesn't remember. He remember changing his tire and that's it. As he spoke me I could smell the odor of an unknown alcoholic beverage on his breath. He had bloodshot glassy eyes and slurred speech. After I conducted my vehicle crash investigation I read driver of vehicle #1 Miranda to begin a DUI investigation. I stated that he was driving and he stated yes. I asked the driver

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where is he coming from and he stated he couldn't remember. He stated all he can remember is changing his tire. I asked where is he coming from and he stated he couldn't remember. His speech was still slurred and still had bloodshot glassy eyes. He was uneven of his feet as he talked. Based on all the information gathered I began to perform SFST's. Prior to all field sobriety tasks, I gave all the instructions and demonstrated to the driver on what I was going to ask and the driver understood. I asked the driver if he had any medical conditions and he stated no

HGN: Driver was uneven on his feet and swayed side to side. A red pen light was used as a stimulus. There was equal pupil size, no resting Nystagmus, and equal tracking. The driver had lack of smooth pursuit in both eyes. The driver had distinct and sustained nystagmus at maximum deviation in both eyes. The driver had nystagmus prior to 45 degrees in both eyes.

WAT: The ground was as level as possible, free from debris and well lit by my patrol car headlights and spot light. The driver started early. Driver used arms for balance. Wouldn't let me fully explain the instructions. Became very argumentative with me. Went to the task do to the combativeness during this task.

OLS: Swayed while balancing. Used arms for balance. Put foot down on his count of 28. Counted 20 twice. Didn't keep leg straight or look at his toe.

After Field Sobriety Tasks the driver was placed under arrest for DUL. I transported the driver to the PBC Bat where I conducted a 20 minute observation on the driver. I never lost visual contact of the driver in this time period. I then asked the driver to provide a Breath test. The driver refused so Implied consent was read. After reading Implied consent was read, I asked the driver for a breath test and he refused at 7:00am. After completing paperwork the driver was brought over to the PBC Jail for booking

All events were recorded on my in car camera.

Jail Booking Facility

Booking Date/Time	Booking County PALM BEACH	Booking Facility PALM BEACH COUNTY CORRECTIONS	Booking Facility Phone Number (561) 688-4400
Booking Facility Location 3228 GUN CLUB ROAD WEST PALM BEACH, FLORIDA 33406			Booking Number
Booking Comments			

Court

Court County PALM BEACH	Court Location 3228 GUN CLUB ROAD WEST PALM BEACH, FL 33406		
Court CRIMINAL JUSTICE COMPLEX	Court Phone 561-355-2994	Court Appearance Date / Time 6/21/2018 8:30AM	Court Fine
Comments			

SCANNED
MAY 25 2018

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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 K. GRUEBEL	Officer Rank TROOPER	Officer ID No 2847	Sworn and subscribed before me, the undersigned authority This the <u>19</u> day of <u>May</u> , <u>2018</u> DEPUTY OF THE COURT, NOTARY OR LAW ENFORCEMENT OFFICER KERIANE MARIE MOYNIHAN Notary Public - State of Florida Commission # GG 036116 My Comm Expires Oct 5, 2020 Bonded through National Notary Assn
Officer Agency FLORIDA HIGHWAY PATROL			
Officer Signature <i>Karl Gruebel</i>			

Approving Supervisor

Officer Name	Officer Rank	Officer ID No	Officer Agency
Officer Signature			

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MAY 25 2018

WITNESS LIST

Name Tpr. K. Gruebel On Scene ☒ Yes ☐ No Statement ☐ Yes ☐ No

Home Address _____

Place of Employment Florida Highway Patrol

Employment Address P.O. BOX 16007 WEST PALM BEACH, FL 33416

Phone Numbers: Primary _____ Secondary _____

Can Testify To: Road side Tasks

Name Silvester Williams On Scene ☒ Yes ☐ No Statement ☒ Yes ☐ No

Home Address _____

Place of Employment OLE School Bakery

Employment Address _____

Phone Numbers: Primary _____ Secondary _____

Can Testify To: Witness driver of vehicle

Name _____ On Scene ☐ Yes ☐ No Statement ☐ Yes ☐ No

Home Address _____

Place of Employment _____

Employment Address _____

Phone Numbers: Primary _____ Secondary _____

Can Testify To: _____

Name _____ On Scene ☐ Yes ☐ No Statement ☐ Yes ☐ No

Home Address _____

Place of Employment _____

Employment Address _____

Phone Numbers: Primary _____ Secondary _____

Can Testify To: _____

Case Number: FHPL180404/020 THI Case Number: _____ Page _____

WITNESS INTERVIEW / STATEMENT

Name	<u>Silvester Williams</u>	Date/Time	<u>05-19-18 / 5:45am</u>
Address	<u>180 NE 17th Ave, Baynton Beh FL 33435</u>		
Place of Employment	<u>Old School Bakery</u>		
Phone Number(s): Home	<u>(270) 744 8863</u>	Work	<u>()</u>
Interview Conducted By:	<u>Tpr. K. Gruebel</u>		
Identification Produced:			

"I was traveling in the ~~4~~ Lane." A white vehicle hit me in the rear. I looked behind me and saw the vehicle swerve to the right and go into the bushes. I pulled over got out and went to check on the driver. In the car was a white male in the drivers seat in himself. He looked drunk. When the trooper arrived. I told him what happened and who was driving the white car.

Sworn to me this 19 day of May.

[Signature]
(Law Enforcement Officer Signature)
Section 117.10 Florida Statute

K. Gruebel / 993
(Print Name / PIN)

I swear/affirm that this statement is true and correct

[Signature]
(Witness Signature)

Statement Page 1 of 1

Case Number: F14PL180FF
HSMV 62706 (Rev. 10/14)

Page SCANNED
MAY 25 2018

SUBJECT: Davis, Arlen J

CASE NUMBER: EPH-115-1417-0

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: [Signature]

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MAY 25 2018

SUBJECT: Davis, Megan S CASE NUMBER: 14-0117-1411-0

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 of chemical or controlled substances.

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

I am _____ of the _____

If you fail to submit to the test I have requested of you, your privilege to operate a motor vehicle will be suspended for a period of one (1) year for a first refusal, or eighteen (18) months if your privilege has been previously suspended as a result of a refusal to submit to a lawful test of your breath, urine or blood. Additionally, if you refuse to submit to the test I have requested of you and if your driving privilege has been previously suspended for a prior refusal to submit to a lawful test of your breath, urine or blood, you will be committing a misdemeanor. Refusal to submit to the test I have requested of you is admissible into evidence in any criminal proceeding.

SUBJECT'S SIGNATURE: (X) Read on Camera

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) Read on Camera **SCANNED**

MAY 25 2018

TESTING FACILITY TASK REPORT

AGENCY: FLIP

SUBJECT: [illegible]

CASE NUMBER: 18-15744

DATE: 05/19/18

VIDEO TAPE NUMBER: N/A

BEGINNING TIME: 06:51

ENDING TIME: 07:06

BREATH TESTS RESULTS: 1) 12 TIME 07:00 A.M./P.M. 2) N/A TIME — A.M./P.M.
3) N/A TIME — A.M./P.M. 4) N/A TIME — A.M./P.M.

BREATH OPERATOR: K. Mounin "22079"

MAINTENANCE TECHNICIAN: J. Krick "64167"

TESTING OFFICER'S OBSERVATIONS

SPEECH: [illegible]

ATTITUDE: [illegible] cooperative.

CLOTHING: [illegible] shirt, pants, shoes, socks.

MEDICAL CONDITIONS: [illegible]

MEDICATIONS: [illegible]

OTHER: Eyes [illegible] 3.00 spec. No or unusual reaction
subject [illegible] admitted to drinking beer (2.00)

COMMENTS: Arrived at Testing Center. A/c began 30 minute
Observation Period at 06:28 hr.

A/c asked to take test.

REFUSED

A/c refused test.

A/c stated he understood the test and again refused to take test.

MO gave him 100 Rights at scene, A/c took Rights again.

A/c stated he understood Rights.

A/c refused test Q1A.

REFUSED

A/c refused test Q1A.

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