

0358096

19CT9662

1062

OBTS Number		ARREST / NOTICE TO APPEAR Juvenile Referral Report		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1		Juvenile		N	
Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE				Agency Report Number (N.T.A.'s only) 06-19-075820							
Charge Type: 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		Multiple Clearance Indicator					
Location of Arrest (Including Name of Business) S STATE ROAD 7 AND ACCESS ROAD 6 WELLINGTON FL						Location of Offense (Business Name, Address) SAVED AS ARREST S SR 7 and access 6 wellington							
Date of Arrest 05/28/2019		Time of Arrest 0410AM		Booking Date		Booking Time		Jail Date		Jail Time		Location of Vehicle PRIORITY 533-5573	
Name (Last, First, Middle) SCHEIBLE ALEXANDER PAUL						Alias (Name, DOB, Soc. Sec. #, Etc.)							
Race W - White I - American Indian B - Black O - Oriental/Asian		Sex M		Date of Birth 06/04/1991		Height 5'10"		Weight 280		Eye Color BRN		Hair Color BLK	
Complexion MED		Build MED		Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) TATOOS-ON R ARM		Marital Status Single		Religion NONE		Indication of Alcohol Influence Y ☐ N ☐ Unk ☐		Indication of Drug Influence Y ☐ N ☐ Unk ☐	
Local Address (Street, Apt. Number) 6564 OSBORNE DR.		(City) LAKE WORTH		(State) FL		(Zip) 33462		Phone (954) 536-4436		Residence Type: 1. City 2. County 3. Florida 4. Out of State		1	
Permanent Address (Street, Apt. Number)		(City)		(State)		(Zip)		Phone		Address Source Def DL			
Business Address (Name, Street) REFUSED		(City)		(State)		(Zip)		Phone		Occupation REFUSED			
D/L Number, State S140015912040		Soc. Sec. Number		INS Number		Place of Birth (City, State) WELLINGTON, FL		Citizenship US					
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			
☐ Parent ☐ Legal Custodian ☐ Other		Address (Street, Apt. Number)		(City)		(State)		(Zip)		Residence Phone ()		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									
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 Description DUI		Counts 1		Domestic Violence ☐ Y ☐ N	
Statute Violation Number 316.193(1)		Violation of ORD #		Warrant / Capias Number		Bond		Charge Description		Counts		Domestic Violence ☐ Y ☐ N	
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		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		Juvenile	
ADMIN	OBTS Number	Agency ORI Number		Agency Name		Agency Report Number			
	FLO 500000	PALM BEACH COUNTY SHERIFF'S OFFICE		06-19075820					
DEF	Charge Type	Check as many as apply		3. Misdemeanor		5. Ordinance		Special Notes:	
	1. Felony	2. Traffic Felony		4. Traffic Misdemeanor		6. Other			
CHARGES	Name (Last, First, Middle)	Scheible Alexander Paul		Alias		Race		Sex	
	W	M		06/04/1991					
VICTIM	Charge Description	DUI		Charge Description					
	Charge Description			Charge Description					
VICTIM	Victim's Name (Last, First, Middle)	STATE OF FLORIDA		Race		Sex		Date of Birth	
	Local Address (Street, Apt. Number)	(City) (State) (zip)		Phone		Address Source			
VICTIM	Business Address (Name, Street)	(City) (State) (zip)		Phone		Occupation			
	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.								
ADMINISTRATIVE	The Person taken into custody								
	☐ committed the below acts in my presence.								
ADMINISTRATIVE	☐ confessed to admitting to the below facts.								
	☐ was observed by _____ who told that he/she saw the arrested person commit the below acts.								
ADMINISTRATIVE	☒ was found to have committed the below acts, resulting from my (described) investigation.								
	On the 28TH day of MAY 20 19 at 0350 ☒ A.M. ☐ P.M. (Specifically include facts constituting cause for arrest.)								
ADMINISTRATIVE	On 05/28/2019 at approximately 03:37hrs, while conducting selective traffic enforcement in the area of S. STATE ROAD 7 and STRIBLING WAY which is located in the Village of Wellington, Palm Beach County, Florida I initiated a traffic stop on the defendant's vehicle, a 2013 KIA Forte bearing FL tag JBUT36, for speeding 85 MPH in a 50 MPH zone. The driver was identified as Alexander Scheible, by their Florida driver license. Scheible was the sole occupant of the vehicle.								
	Upon making contact with the driver, I immediately detected an obvious and strong odor of an unknown alcoholic beverage emitting from his person and face area. This odor intensified as I spoke to Scheible. Scheible had glassy, glazed, and blood shot eyes. Scheible's speech was slurred, slow, thick, and at times difficult to understand. Scheible's movements were (slow, deliberate, lethargic) with poor coordination. Scheible was wearing a blue t-shirt, blue jeans, and white shoes.								
ADMINISTRATIVE	Alexander Scheible showed signs of possible impairment so I requested a DUI Unit to conduct an assessment. This affidavit is for supplemental purposes only.								
ADMINISTRATIVE	STATE OF FLORIDA COUNTY OF PALM BEACH		D/S G PALMER 25						
	(Signature of Arresting/Investigative Officer)								
ADMINISTRATIVE	The foregoing instrument was sworn to or affirmed and subscribed before me this 28TH day of MAY 20 19 by D/S G PALMER 25514								
	(Print name of Arresting/Investigative Officer) who is personally known to me and/or produced identification. Type of identification produced KNOWN								
ADMINISTRATIVE	Notary Public, Clerk of Court, Officer (F.S. 17.10)								
PAGE 1 OF 1									

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 28th DAY OF May 20 19, AT 0338 AM PM
SUBJECT: SCHEIBLE ALEXANDER PAUL CASE NUMBER: 19-075820
AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: D/S D. DIEZ #33109

PERSONAL CONTACT

DRIVING PATTERN: ACTUAL PHYSICAL CONTROL (PHYSICAL EVIDENCE OR STATEMENTS PUTTING DEF. BEHIND WHEEL OF VEHICLE)
Def. was stopped for speeding 85mph in a 50 mph zone.

OBSERVATION OF DRIVER:

Red gassy eyes, slurred speech. When exiting the vehicle had trouble getting balance.

DRIVER'S STATEMENTS:

I will not do roadsides, I just want to call my mom.

ODORS:

Odor of an Unk Alcoholic beverage coming from his person

GENERAL OBSERVATIONS

SPEECH: Slurred speech

ATTITUDE: mood swings

CLOTHING: blue shirt, blue jeans and gray shoes

MEDICAL/OTHER:

ALL ROADSIDES CAPTURED ON IN-CAR VIDEO

STATE OF FLORIDA
COUNTY OF PALM BEACH

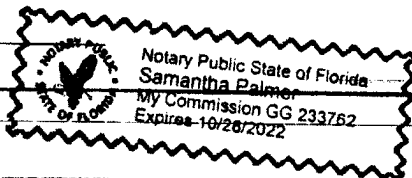
D/S D. DIEZ #33109

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 28TH day of MAY 20 19 by D/S D. DIEZ #33109

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

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



SUBJECT SCHEIBLE

ALEXANDER

CASE NUMBER 19-075820

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

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

Other Observations:

refused

WALK & TURN:

refused

ONE LEG STAND:

refused

FINGER TO NOSE:

refused

ROMBERG ALPHABET:

refused

BREATH TEST RESULTS: 1) **refused** 2) 3) 4)

STATE OF FLORIDA
COUNTY OF PALM BEACH

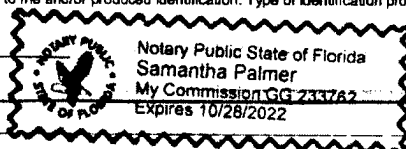
D/S D. DIEZ #33109

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to, affirmed and subscribed before me this 28TH day of MAY 2019 by D/S D. DIEZ #33109

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

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



TESTING FACILITY TASK REPORT

AGENCY: PBSO/DIEZ

SUBJECT: SCHEIBLE, ALEXANDER

CASE NUMBER: 19-075820

DATE: May 28, 2019

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 0451

ENDING TIME: 0455

BREATH TESTS RESULTS: 1) R TIME 0453 A.M. ☒ P.M. ☐ 2) XX TIME XX A.M. ☐ P.M. ☐
3) XX TIME XX A.M. ☐ P.M. ☐ 4) XX TIME XX A.M. ☐ P.M. ☐

BREATH OPERATOR: S. PALMER #24520

MAINTENANCE TECHNICIAN: J Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: RAMBLING, VULGAR, SARCASTIC,

CLOTHING: BLUE SHIRT, BLUE JEANS, GREY SHOES

MEDICAL CONDITIONS: AIDS "IM GONNA BITE YOU"

MEDICATIONS: NONE

OTHER:

EYES: GLASSY AND BLOODSHOT,

COMMENTS:

ARRESTING OFFICER CONDUCTED THE 20 MINUTE OBSERVATION BEGINNING AT 0430
SUBJECT REFUSED TO TAKE BREATH TEST
A/O READ I/C
SUBJECT STATED HE UNDERSTOOD I/C
AND AGAIN REFUSED TO TAKE BREATH TEST @ 453
A/O READ RIGHTS
A/O ATTEMPTED Q&A
SUBJECT REFUSED TO ANSWER QUESTIONS

19 07-020

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 DIS. DIRZ of the AFSC

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 COPY

SUBJECT:

Schable, Alexander

CASE NUMBER:

19 C75820

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? YgWHERE WERE YOU GOING? Friend's houseWHAT STREET OR HIGHWAY WERE YOU ON? Exit 11 off

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:

D/S DIAZ #133109

**STATE OF FLORIDA
DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES
AFFIDAVIT OF REFUSAL TO SUBMIT TO
BREATH AND/OR URINE TEST**

I, D/S D. DIEZ #33109, a duly certified Law Enforcement Officer or Correctional Officer,
(Name of Officer reading Implied Consent Warning)

am a member of Palm Beach County Sheriff's Office, and I do swear
(Name of law enforcement agency)

or affirm that on or about the 28TH day of MAY, 20 19, at 0410AM ☐ P.M. ☐ A.M.

DRIVER ALEXANDER PAUL SCHEIBLE
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# [REDACTED], state of FLORIDA, was placed under lawful arrest for
the offense of DUI by D/S D. DIEZ #33109 and
(Name of Arresting Officer)
issued Citation # A2G45MP

That on or about the 28TH day of MAY, 20 2019, at 0453 ☐ P.M. ☒ A.M.
in PALM BEACH County,

I requested that the driver submit to a ☒ breath and/or ☐ urine test to determine his or her blood alcohol level and/or the presence of chemical or controlled substances. I informed the driver that the refusal to submit to such test(s) 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 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 for refusal to submit to a lawful test of his or her breath, urine, or blood. Additionally, I informed the driver that if he or she holds a CDL, or was operating a CMV, refusal will result in the disqualification of the Commercial Driver's License/driving privilege for a period of one (1) year in the case of a first refusal or permanently if he or she has previously been disqualified as a result of a refusal to submit to any such lawful test. Nonetheless, the driver refused to submit to the test(s) requested.

[Signature]
Signature of Law Enforcement Officer or
Correctional Officer

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



The foregoing instrument was sworn and subscribed before

me this 28TH day of MAY, 20 19,

by D/S D. DIEZ #33109,

who is personally known to me or who has produced
Known as identification

Notary Public [Signature]

HSMV-BAR1001 (REV. 10/2016)

The foregoing instrument was sworn and subscribed before me:

[Signature]
Signature of Attesting Officer

Title Deputy

Date 5/28/2019

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.

WITNESS LIST

CASE NUMBER: 19-075820

ARRESTING OFFICER: D/S D. DIEZ #33109

ADDRESS: 3228 Gun Club Road West Palm Beach

PHONE NUMBERS (HOME): _____ (WORK) 681-4500

CAN TESTIFY TO: DUI Investigation

NAME: D/S G Palmer #25514

ADDRESS: 3228 Gun Club Road West Palm Beach

PHONE NUMBERS (HOME) _____ (WORK) 681-4500

CAN TESTIFY TO: traffic stop and observations

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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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: _____



**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	☐	539.001 FS	Other: All records relating to pawnbroker transactions.	
	☐	119.0712(2)	Other: Personal information contained within a motor vehicle record	

REVIEW COMPLETED BY

Booking Number: 2019017633

Date: 05/28/2019

Specialist Name/ID: howardt/7185