0163226 2018CT303BAXMB 1551

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

☐ Check if Supplement is Attached

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

ADMINISTRATIVE

OBTS Number

Agency ORI Number: FLO 5 0 2 7 0 0 | Agency Name: PALM SPRINGS PUBLIC SAFETY | Agency Report Number (N.T.A.'s only): 8 2 1-1 8 1-0 3 7 6 3

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

Location of Arrest (including Name of Business): 4300 block of Lake Worth Rd Palm Springs FL 33461

Location of Offense (Business Name, Address): 4300 block of Lake Worth Rd Palm Springs FL 33461

Date of Arrest: 0 2 1 5 1 8 | Time of Arrest: 1 8 1 3 | Booking Date | Booking Time | Jail Date | Jail Time | Location of Vehicle

DEFENDANT

Name (Last, First, Middle): Himes, Annette, Marie | Alias (Name, DOB, Soc. Sec. #, Etc.)

Race: W - White, B - Black, I - American Indian, O - Oriental/Asian: W | Sex: F | Date of Birth: 0 1 2 2 6 9 | Height: 5'2" | Weight: 136 | Eye Color: Green | Hair Color: Blonde | Complexion: light | Build: thin

Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description): unknown | Marital Status | Religion | Indication of: Alcohol Influence ☐ Y ☐ N ☐ Unk, Drug Influence ☐ ☐ ☐

Local Address (Street, Apt. Number): 4676 Poinsettia Ln | (City): Lake Worth | (State): FL | (Zip): 33461 | Phone: (561) 955 7093 | Residence Type: 1. City 2. County 3. Florida 4. Out of State: 2

Permanent Address (Street, Apt. Number): Same as above | (City) | (State) | (Zip) | Phone ( ) | Address Source: FL DL

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

D/L Number, State: H520-013-69-522-0 | Soc. Sec. Number: [redacted] | INS Number | Place of Birth (City, State): New York, NY | Citizenship: US

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 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. Synthetic U. Unknown Z. Other

CHARGE

Charge Description: DUI | Counts: 1 | Domestic Violence ☐ Y ☑ N | Statute Violation Number: 3 1 6 . 1 9 3 (1) | Violation of ORD #

Drug Activity: N | Drug Type: N | Amount / Unit: NA | Offense #: 2018-03763 | Warrant / Capias Number | Bond

CHARGE

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

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

CHARGE

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

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

FEB 15 PM 7:51

CHARGE

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

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

NOTICE TO APPEAR

Location (Court, Room Number, Address): 3228 Gun Club Rd WPB, FL 33406

Court Date and Time: Month March | Day 15th | Year 2018 | Time 8:30 (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

X Annette Himes
Signature of Defendant (or Juvenile and Parent/Custodian) | Date Signed

SCANNED FEB 16 2018

FILED FEB 16 2018 CIRCUIT & COUNTY COURTS (CRIMINAL DIV.)

ADMIN

HOLD for other agency

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other:

Signature of Arresting Officer: X [signature] 0133

Name of Arresting Officer (Print): Ofc Khatami | I.D. # 133

Name Verification (Printed by Arrestee) (PRINT)

Booking Deputy | I.D. # | Pouch # | Transporting Officer: Ofc Khatami | I.D. # 133 | Agency PSPD

Witness here if subject signed with an "X"

PAGE 1 OF 1

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 15 DAY OF Feb 20 18 AT 1813 AM (PM)

SUBJECT: Annette M Himes CASE NUMBER: 2018-03763

AGENCY: Palm Springs PD ARRESTING OFFICER: Khatami #133

PERSONAL CONTACT

DRIVING PATTERN: ACTUAL PHYSICAL CONTROL (PHYSICAL EVIDENCE OR STATEMENTS PUTTING DEF. BEHIND WHEEL OF VEHICLE)

vehicle crashed into the rear of another vehicle

OBSERVATION OF DRIVER:

Blood shot eyes, slurred speech, swaying while standing, alcohol smell coming from mouth

DRIVER'S STATEMENTS:

Stated she had two ~~drt~~ kk mixed ~~drtng~~ kk drinks at 8 am.

ODORS:

Alcohol on breathe

GENERAL OBSERVATIONS

SPEECH: slurred

ATTITUDE: happy cooperative

CLOTHING: white blouse, blue jeans, brown boots

MEDICAL/OTHER: none

STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer) #133

The foregoing instrument was sworn to or affirmed and subscribed before me this 15th day of Feb 20 18 by OFC Khatami #133

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

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

Notary Public State of Florida
Gary J Parent
My Commission GG 085486
Expires 06/21/2021

SUBJECT: Annette M Himes CASE NUMBER: 2018-03763

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

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

Other Observations:

WALK & TURN:

Could not put heel to toe, fell off of line multiple times. arms out like a plane trying to maintain balance

ONE LEG STAND:

- first attempt dropped leg after 2 secs. leg was not kept straight (bent at knee). Arms not kept at sides after being asked multiple times.

FINGER TO NOSE:

finger was touched under tip of nose multiple times did return finger to starting position, had to be reminded multiple times

ROMBERG/ALPHABET:

only read to the letter V and stopped

BREATH TEST RESULTS:

SCANNED
FEB 16 2018

STATE OF FLORIDA
COUNTY OF PALM BEACH

#133
(Signature of Arresting/Investigative Officer)

The foregoing instrument was notarized or sworn before me this 15th day of Feb, 2018 by Ofc. Khatami #133

who is personally known to me and/or produced identification. Type of identification produced Police ID

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

Notary Public State of Florida
Gary J Parent
My Commission GG 085486
Expires 06/21/2021

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

I, OFC Khatami # 133 , a duly certified Law Enforcement Officer or Correctional Officer,
(Name of Officer reading Implied Consent Warning)

am a member of Palm Springs Police Department , and I do swear
(Name of law enforcement agency)

or affirm that on or about the 15th day of Feb ; 20 18 , at 1813 ☒ P.M ☐ A.M.

DRIVER Annette Marie Himes ,
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# H520-013-69-522-0 , state of FL , was placed under lawful arrest for

the offense of DUI by OFC Khatami #133 and
(Name of Arresting Officer)

issued Citation # A7V1EME .

That on or about the 15 day of FEBRUARY , 20 18 , at 1902 ☒ 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.

OFC Khatami #133
Signature of Law Enforcement Officer or Correctional Officer

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

Notary Public State of Florida
Gary J Parent
My Commission GG 085486
Expires 06/21/2021
(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before me this 15 day of FEBRUARY , 20 18 , by OFC. KHATAMI , who is personally known to me or who has produced POLICE ID as identification

Notary Public _____

The foregoing instrument was sworn and subscribed before me:

_____
Signature of Attesting Officer

Title _____

Date _____

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.

HSMV-BAR1001 (REV. 10/2016)

WITNESS LIST

CASE NUMBER: 2018-03763

ARRESTING OFFICER: Ofc Kh[illegible]
ADDRESS: 230 Cypress Lane Palm Springs FL 33461
PHONE NUMBERS (HOME): 561 968 8243 (WORK):
CAN TESTIFY TO: -DUI-

NAME: Cpl Zito #168
ADDRESS: 230 Cypress Lane Palm Springs FL 33461
PHONE NUMBERS (HOME): 561 968 8243 (WORK):
CAN TESTIFY TO: Roadside test

NAME:
ADDRESS:
PHONE NUMBERS (HOME): (WORK):
CAN TESTIFY TO:

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PHONE NUMBERS (HOME): (WORK):
CAN TESTIFY TO:

TESTING FACILITY TASK REPORT

AGENCY: PSO

SUBJECT: Heath Augustine III CASE NUMBER: 18-039271

DATE: 02/15/18 VIDEO TAPE NUMBER: N/A

BEGINNING TIME: 1900 ENDING TIME: 1904

BREATH TESTS RESULTS: 1) R TIME 1902 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: G. Pacey # 7909

MAINTENANCE TECHNICIAN: Kalmore #040

TESTING OFFICER'S OBSERVATIONS

SPEECH: Mumbled at times

ATTITUDE: Calm quiet, polite, Uncooperative

CLOTHING: Blue Jean, white Ralph Lauren Polo Boots

MEDICAL CONDITIONS: Gastric sleeve

MEDICATIONS: Vitamins, Adderall, Xanax

OTHER: Eyes watery and bloodshot

REFUSED

COMMENTS: Arrived at Central Area for 20 minute observation period @ 1884 hrs

Δ Stated no she would not take test

A/O Read I/C

Δ Stated she understood I/C and Refusing test

A/O Read Rights

REFUSED

Δ Stated she understood Rights

A/O Attempts C+A

Δ Refused to perform any tests

SUBJECT: Hoss, Aaron M. CASE NUMBER: _____

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

SUBJECT: Hines, Austin M. CASE NUMBER: _____

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: _____