

0402977

19CT10934

3027

ADVISOR		ARREST / NOTICE TO APPEAR		1 Arrest 2 NTA 3 Request for Warrant 4 Request for Capas		1 JUVENILE	
Agency ORI Number 0501700		Agency Name Jupiter Police Department		Agency Report Number (N.T.A.'s only) 5, 4 19-002854			
Charge Type Check as many as apply ☐ 1 Felony ☐ 1 Misdemeanor ☐ 5 Ordinance ☐ 6 Other		☐ 2 Traffic Felony ☒ 4 Traffic Misdemeanor ☐ 6 Other		If Weapon Seized Error Type: NONE		Multiple Clearance Indicator	
Location of Arrest (Including Name of Business) FARMINGDALE DR/WATERFORD DR				Location of Offense (Business Name Address) 699 SWA/MILITARY TRL, JUPITER, FL 33458			
Date of Arrest 06/14/2019		Time of Arrest 01:34		Booking Date 06/14/2019		Booking Time 01:44	
Name (Last, First, Middle) DIGIOVINE, ANTHONY DOMENIC				Alias (Name DOB Soc Sec #, Etc.)			
Race W - White 1 - American Indian B - Black O - Oriental/Asian		Sex M		Date of Birth 11/08/1988		Height 5'10	
Weight 172		Eye Color HAZEL		Hair Color BLACK		Complexion MEDIUM	
Scars, Marks, Tattoos, Unique Physical Features (Location Type Description)		Marital Status S		Religion OTHER		Indication of Alcohol Influence Yes ☐ No ☒ Unk ☐	
Local Address (Street Apt Number) 218 SORIANO DR, JUPITER, FL 33458		(City) (FL)		(State) (FL)		(Zip) (33458)	
Permanent Address (Street Apt Number) 218 SORIANO DR, JUPITER, FL 33458		(City) (FL)		(State) (FL)		(Zip) (33458)	
Business Address (Name Street) (FL)		(City) (FL)		(State) (FL)		(Zip) (33458)	
D/L Number State D215004884080 / FL		Sec Soc Number (REDACTED)		INS Number (REDACTED)		Place of Birth (City, State) MELROSE, MA	
Co-Defendant Name (Last First Middle)		Race		Sex		Date of Birth	
Co-Defendant Name (Last First Middle)		Race		Sex		Date of Birth	
☐ Parent ☐ Other		Name (Last First Middle)		Residence Phone		Business Phone	
Address (Street, Apt Number)		(City)		(State)		(Zip)	
Notified by (Name)		Date		Time		JUVENILE DISPOSITION 1 Handled/Processed within Department and Released 2 TOT JAC 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				School Attended		Grade	
☐ Yes by ☐ No				Property Cause? ☐ Yes ☒ No		Description of Property	
Drug Activity S Sell R Seize D Deliver E Use N N/A B Buy P Possess				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/Other		P Paraphernalia/Equipment S Synthetic	
U Unknown Z Other							
Charge Description DUI - REFUSAL TO SUBMIT TO DUI BREATH TEST WITH A PREVIOUS RECORD				Statute Violation Number 316.1939		Violation of ORD #	
Drug Activity N				Amount / Unit /		Offense #	
Counts 1				Domestic Violence ☐ Y ☒ N		Warrant / Capas Number	
Charge Description				Statute Violation Number		Violation of ORD #	
Drug Activity N				Amount / Unit /		Offense #	
Counts 1				Domestic Violence ☐ Y ☒ N		Warrant / Capas Number	
Charge Description				Statute Violation Number		Violation of ORD #	
Drug Activity N				Amount / Unit /		Offense #	
Counts 1				Domestic Violence ☐ Y ☒ N		Warrant / Capas Number	
Health / Apparent Physical Condition of Defendant				Any knowledge of the following ☐ Mental ☐ Escape Risk ☐ Medication ☐ Delirious ☐ Injured			
Check which applies ☐ Released OR ☐ Released to Parent/Guardian ☐ TOT County Jail				PROPERTY - Received By			
☐ Posted Bond ☐ South County Mental Health				Released By			
Transported By				Date Transported			
Time Transported				Other			
☒ INSTRUCTION NO. 1 - Mandatory appearance in court ☐ INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.				Location (Court Room) North County PALM BEACH GARD			
				Court Date and Time 07/17/2019 08:30:00			
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				No Photo Available			
Signature of Defendant (or Juvenile and Parent/Custodian)				Date Signed			
HOLD for Other Agency				Signature of Arresting Officer R. FERGUSON			
☐ Dangerous ☐ Released Arrest ☐ Seizure ☐ Other				Name of Arresting Officer (Print) FERGUSON, RYAN			
ID # 8101				ID # 1202			
Pouch #				Transporting Officer R. FERGUSON			
				ID # 385			
				Agency JUPITE			
				Witness here if subject signed with an "X"			

☐ COURT ☐ STATE ATTORNEY ☐ AGENCY ☐ CENTRAL RECORDS ☐ JAIL ☐ CRIME ANALYSIS ☐ J.P.O. ☐ DEFENDANT

JUN 15 2019

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 14 DAY OF June 20 19, AT 0052 [✓] AM PM
SUBJECT: Anthony Domenic Digiovine CASE NUMBER: 19-002854

AGENCY: JUPITER POLICE DEPARTMENT ARRESTING OFFICER: R. Ferguson #385/1202

PERSONAL CONTACT

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

I observed the vehicle in Abacoa Plaza (5500 Military Trail) driving northbound through the parking lot at a high rate of speed coming from the gas station. The vehicle left the plaza via the east side entrance. The vehicle then drove south on Military Trail and did a U-Turn at the light to go northbound from Military Trail/Donald Ross Rd. I noticed the tag light on the vehicle was out.

OBSERVATION OF DRIVER:

I observed Digiovine whom had blood shot and glossy eyes, and a moderate smell of an unknown odor coming from his person. Digiovine appeared to be sweaty.

DRIVER'S STATEMENTS:

Digiovine advised he just got off work and was heading home. He advised he stopped at the gas station and bought a wine bottle. I asked Digiovine if he drank any alcoholic beverages recently, to which he advised he did not drink anything. He advised he went to work at approximately 1700 hours and was tired. I asked Digiovine again if he had any alcoholic beverages to which Digiovine admitted to drinking an alcoholic beverage before he went in for work, however he would not specify how much he drank or what kind of alcoholic beverage he drank.

ODORS:

Moderate smell of an unknown odor coming from her person.

GENERAL OBSERVATIONS

SPEECH: Coherent

ATTITUDE: Cooperative/Nervous

CLOTHING: Clothing was moist with sweat: Black shirt and long black pants.

MEDICAL/OTHER: Digiovine advised he had no physical medical issues. He advised he does not wear glasses or contacts.

STATE OF FLORIDA
COUNTY OF PALM BEACH

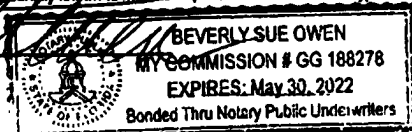
R. Ferguson #385/1202

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 14th day of June 20 19 by R. Ferguson #385/1202

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

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



SCANNED

JUN 15 2019

SUBJECT AnthonyDomenicCASE NUMBER 19-002854

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:

Would sway while doing HGN.

WALK & TURN:

I asked Digiovine if he had any physical medical issues to which he stated no. Digiovine had a hard time getting in the starting position. Digiovine attempted to start the task before I told him to begin. Digiovine repeatedly attempted to get in the starting position however could not maintain his balance. He advised he was unable to do the task unless he moved his feet slightly off the line.

ONE LEG STAND:

Digiovine was asked multiple times if he understood the directions, to which he advised that he understood. Digiovine did not stay in the starting when i was giving instructions. He would cross his arms. Once the task began Digiovine had to be directed to look down at his feet. Once Digiovine counted to "one thousand 14", he did a hop. Once he counted to "one thousand 20" he did two hops. Once he counted to "one thousand and 21" he placed his left foot on the ground without me telling him to stop the task.

FINGER TO NOSE:

Digiovine was asked multiple times if he understood the directions, to which he advised that he understood. Digiovine advised he knew the difference between his "left" and his "right". Digiovine would start the task before i told him to begin. Digiovine would start to move his left hand then quickly move his right hand when I said "right" the third time.

ROMBERG ALPHABET:

Digiovine was asked multiple times if he understood the directions, to which he advised that he understood. He advised that his highest level of education was Sophomore to Junior year in College. Digiovine advised he knew the English alphabet. started before I advised her to begin the task. Digiovine stopped at "G", had to think about it however continued the alphabet with "H" to "Z".

BREATH TEST RESULTS:

1) Refused

2) Refused

3) N/A

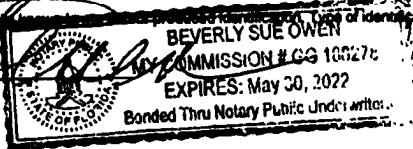
4) N/A

STATE OF FLORIDA
COUNTY OF PALM BEACHR. Ferguson #385/1202

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 14th day of June 2019 by R. Ferguson #385/1202

(Print name of Arresting/Investigative Officer, who is personally known to the Notary Public, or whose identity has been positively ascertained by the Notary Public)

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

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JUN 15 2019



PALM BEACH COUNTY SHERIFF'S OFFICE

DUI TESTING FACILITY

INFORMATION SHEET

PBSO CASE # 19-082191 PBSO ZONE 3-14AGENCY CASE # 19-002854 CRASH CASE # _____TIME OF STOP/CRASH 0052 DATE 06-14-19 DAY FridaySUBJECT'S NAME Anthony D. Digiovanna RACE W SEX MHGT 5'10 WGT _____ DOB 11 109 188LOCATION SWA / Military TrailARRESTING OFFICER'S NAME & ID Det. Felguera #6385 AGENCY Jupiter

DIVISION: _____

NOTIFIED BY COMMO yesARRIVAL AT FACILITY 0210ARREST TIME 0134

BREATH RESULTS:

REFUSED

1. _____
2. _____
3. _____
4. _____

TESTING OFFICER'S ID 3184 PBSO VIDEOTAPE # N/A

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SUBJECT: _____ CASE NUMBER: _____ 4

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 IS TODAY'S DATE? _____

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? _____

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? _____ WHY? _____

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? _____ WHEN? _____

DO YOU HAVE: _____
EPILEPSY? _____
GLASS EYE? _____
FALSE TEETH? _____
EAR INFECTION? _____
INNER EAR TROUBLE? _____
DIABETES? _____

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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: _____

WHITE - STATE ATTY.

YELLOW - DHSMV

PINK - CENTRAL RECORDS

GOLD - JAIL

SUBJECT: _____ CASE NUMBER: 74

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) _____

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.

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SUSPECT'S SIGNATURE: (X) _____

TESTING FACILITY TASK REPORT

AGENCY: _____

SUBJECT: _____ CASE NUMBER: _____

DATE: _____ VIDEO TAPE NUMBER: _____

BEGINNING TIME: _____ ENDING TIME: _____

BREATH TESTS RESULTS: **REFUSED** TIME _____ A.M./P.M. 2) _____ TIME _____ A.M./P.M.

3) _____ TIME _____ A.M./P.M. 4) _____ TIME _____ A.M./P.M.

BREATH OPERATOR: _____

MAINTENANCE TECHNICIAN: _____

TESTING OFFICER'S OBSERVATIONS

SPEECH: _____

ATTITUDE: _____

CLOTHING: _____

MEDICAL CONDITIONS: _____

MEDICATIONS: _____

OTHER: _____

COMMENTS: _____

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JUN 15 2013

WITNESS LIST

CASE NUMBER: 19-002854

ARRESTING OFFICER: R. Ferguson #385/1202

ADDRESS: 210 Military Trail

PHONE NUMBERS (HOME): (561) 799 - 4445 (WORK) _____

CAN TESTIFY TO: Check P.C

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: _____

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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: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

SCANNED

JUN 15 2019



**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:	

REVIEW COMPLETED BY

Booking Number: 2019019558

Date: 6/15/2019

Specialist Name/ID: Ricketts/8693

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