

**ARREST / NOTICE TO APPEAR
Juvenile Referral Report**

PLT 0010

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

ADMINISTRATIVE	OBTS Number		Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06-18096093	
	Charge Type: Check as many as apply.		1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other <input type="checkbox"/>		2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input checked="" type="checkbox"/>		Weapon Seized / Type 2. 1. Yes NA 2. No	
	Location of Arrest (Including Name of Business) FOREST HILL BLVD/WELLINGTON TRCE, WELLINGTON, FL 33414				Location of Offense (Business Name, Address) FOREST HILL BLVD/WELLINGTON TRCE, WELLINGTON, FL 33414			
	Date of Arrest 7/12/18	Time of Arrest 0355	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle WESTWAY TOWING	
	Name (Last, First, Middle) COSTA, APRIL RENEE				Alias (Name, DOB, Soc. Sec. #, Etc.)			
	Race W - White 1 - American Indian B - Black 0 - Oriental/Asian	Sex W	Date of Birth 04/17/1971	Height 5'4"	Weight 200	Eye Color BRN	Hair Color BLK	Complexion MED
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) NONE				Marital Status SINGLE		Religion NONE	
DEFENDANT	Local Address (Street, Apt. Number) 3397 PEBBLE BEACH DRIVE		(City) LAKE WORTH	(State)	(Zip) FL 33467	Phone (561) 558-8675		Indication of: Alcohol Influence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> Drug Influence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/>
	Permanent Address (Street, Apt. Number) SAME AS LOCAL		(City)	(State)	(Zip)	Phone		Residence Type: 1. City 2. County 3. Florida 4. Out of State <input type="checkbox"/> 2
	Business Address (Name, Street) UNK		(City)	(State)	(Zip)	Phone		Address Source DAVID / DL
	DL Number, State C-230-016-71-637-0 /FL		Soc. Sec. Number		INS Number		Place of Birth (City, State) WPB, FL	
	Citizenship USA							
CO-DEF	Co-Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile	
	Co-Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile	
JUVENILE	Parent Name (Last) (First) (Middle)		Residence Phone					
	Legal Custodian		Business Phone					
	Other:							
	Address (Street, Apt. Number)		(City)	(State)	(Zip)			
	Notified by: (Name)		Date	Time	Juvenile Disposition 1. Handed/processed within Dept. and Released.		2. TOT HRS / DYS 3. Incarcerated	
	Released To: (Name)		Relationship		Date	Time		
	The above address provided by <input type="checkbox"/> defendant and / or <input type="checkbox"/> 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.				School Attended		Grade	
	Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property		Value of Property			
CHARGE	Drug Activity N. N/A P. Possess		S. Sell B. Buy T. Traffic	R. Smuggle D. Deliver E. Use	K. Disperse/ Distribute	M. Manufacture/ Products/ Cultivate	Z. Other	Drug Type N. N/A A. Amphetamine
	Charge Description DUI		Counts 01	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number 316.193(1)		Violation of ORD #	
	Drug Activity U	Drug Type U	Amount / Unit NA	Offense # 18096093	Warrant / Capias Number		Bond OK	
	Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number		Violation of ORD #	
	Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond	
	Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number		Violation of ORD #	
	Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond	
	Charge Description		Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> 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) CRIMINAL JUSTICE COMPLEX @ 3228 GUN CLUB RD WPB, FL 33406							
	Court Date and Time Month 8 Day 2 Year 2018 Time 8:30 AM <input checked="" type="checkbox"/> 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) <i>Refused to sign</i>				Date Signed			
ADMIN	HOLD for other Agency Name:		Signature of Arresting Officer 8236		Name Verification (Printed by Arrestee)			
	<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other:		Name of Arresting Officer (Print) DANIEL MERCIER		I.D. # 8236		(PRINT)	
	Inmate Deputy	I.D. #	Pouch #	Transporting Officer DANIEL MERCIER	ID # 8236	Agency PBSO	PAGE 1 OF 1	

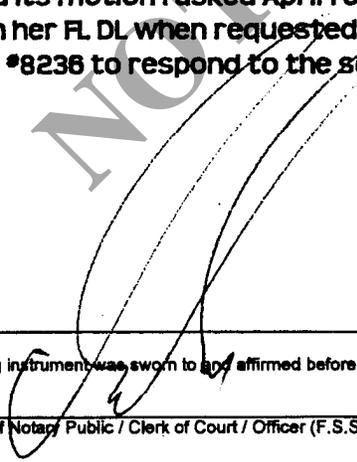
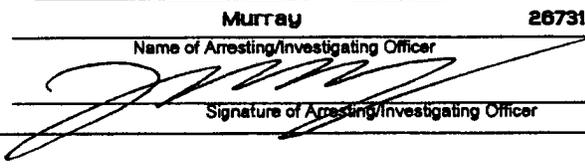
DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT (N.T.A.'s ONLY)

2018 CT012484 MB

JUL 12 AM 5:50

OBS Number		PROBABLE CAUSE AFFIDAVIT			1. Arrest 3. Request For Warrant 2. N.T.A. 4. Request For Copies		1	Juvenile <input type="checkbox"/>	
Agency ORD Number FLO 5 0 0 0 0 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE			Agency Report Number 06		18096093		
Charge Type: Check as many as apply <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony		<input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor		<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Special Notes			
Defendant Name (Last, First, Middle) COSTA APRIL RENE			Race W		Sex F		Date of Birth 04/17/1971		
Charge			Charge						
Charge			Charge						
Victim Name (Last, First, Middle) State			Race		Sex		Date of Birth		
Local Address (Street, Apt. Number)		City		State		Zip		Phone	
Business Address (Street, Apt. Number)		City		State		Zip		Phone	
								Address Source	
								Occupation	
<p>The undersign 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...</p> <p><input checked="" type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.</p> <p><input type="checkbox"/> confessed to admitting to the below facts. <input type="checkbox"/> was found to have committed the below acts, resulting from (described) investigation.</p> <p>On the 12 day of July 20 18 at 0335 <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM</p>									

On 7/12/18 at approximately 0335 hours while on patrol at the intersection of Forest Hill Blvd and Wellington Trace, on Wellington Trace Eastbound, I observed a black BMW facing the opposite side of the intersection. I was waiting at the red light to make a left turn onto Forest Hill Blvd Northbound. I observed a Red dodge charger get behind the black BMW. The red dodge charger began to honk its horn while the light was green for their intersection. The Red dodge charger backed up and waited for a second light cycle to turn. Once my light cycle turned green I crossed the intersection to get behind the Black BMW. While I passed the black BMW I observed a white female with her head slumped back and her eyes closed. The black BMW had a FL tag of BTQP24. I waited behind the vehicle for the light to cycle green once more. After the cycle completed and the vehicle did not move I activated my emergency lights on my fully marked patrol vehicle and conducted a traffic stop for stopping and standing in the roadway as well as blocking a intersection. I approached the vehicle's driver side and began to knock on the window to conduct a welfare check due to the driver's appearance. The white female who was later identified as APRIL RENE COSTA opened her eyes looked at me and shut her eyes again. I attempted to wake April several more times. After a few minutes April became aware of me and reached for the center console to open the window. April began to take her foot off the brake pedal and move into the intersection while the light was red. I immediately ran back into my vehicle and attempted to block the intersection to prevent a vehicle crash. The vehicle continued to drift into the South bound lanes of Forest Hill passing 5 lanes of travel. When April finally got the door opened I jumped out of my patrol vehicle ran toward her car and reached into her vehicle to shut off the vehicle before she crashed. April was approximately 10 feet away from the intersection's sidewalk where a church sign is posted. Once the vehicle was off and stopped its motion I asked April for her keys to prevent her from restarting the car. April also provided me with her FL DL when requested. April was found to have suspended DL I then notified Dispatch for D/S Mercier #8236 to respond to the scene where he took over the investigation.

The foregoing instrument was sworn to and affirmed before me this <u>12</u> day of <u>July</u> 20 <u>18</u> , by:	
 Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	MURRAY 26731 Name of Arresting/Investigating Officer
Signature of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	 Signature of Arresting/Investigating Officer
Page <u>1</u> of <u>1</u>	

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 12TH DAY OF JULY 2018 AT 0337 AM PM

SUBJECT: COSTA, APRIL RENEE CASE NUMBER: 18096093

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: DS DANIEL MERCIER 8236
PERSONAL CONTACT

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

I was called to the scene of a traffic stop near the intersection of Forest Hill Blvd and Wellington Trace, in the Village of Wellington, Palm Beach County, Florida. I arrived at the scene at approximately 0345 hrs. D/S Murray #26731 told me, in a signed sworn PC Supplement, that he had stopped the defendant's vehicle, a black BMW four door, bearing FL tag BTQP24, because the defendant was asleep at the red light. When Murray knocked on her car window, she rolled through the intersection. Murray ran alongside the moving car, opened the door and, at great risk to himself, managed to stop the car before it crashed. Murray noticed that the defendant had articulable indicators of impairment, so he called for a DUI unit to conduct a possible DUI investigation. All the DUI units were busy, so I took the case. Murray identified the defendant, to me, as the driver / sole occupant of the defendant's vehicle, at the time of the stop.

OBSERVATION OF DRIVER:

Upon my arrival, I saw the defendant sitting in the driver's seat of her car. I made contact with the defendant, later identified by FL DL as, April Renee Costa. I observed that the defendant had red, watery, bloodshot eyes, slurred speech, and the odor of an unknown alcoholic beverage that came from her breath and intensified as she spoke to me. I asked if she had any medical problems, or took any medications. She said no. I asked how much she had had to drink. She never answered. I asked if she was sick, ill, hurt or needed medical attention. She said no. I asked her other questions but she ignored me, mumbled, and raised her hand to brush me off. Her crotch was wet and smelled like urine.

I asked the defendant to exit the vehicle. The defendant refused, so I gave the Taylor Warnings and asked her to exit the car again. She said no. I explained that I had probable cause to arrest her for DUI and that she was now under arrest. I ordered her to exit the vehicle. She again refused, saying no. I then explained that she was under arrest and that she needed to exit the car or I would have to "remove her from the vehicle". She said, "Go ahead. Remove me from the vehicle." At that point, I escorted her from the car, handcuffed her, checking them for fit and double lock, and had her transported to the BAT.

DRIVER'S STATEMENTS:

Pre Miranda / spontaneous roadside admissions: INCOHERENT MUMBLING

Post Miranda roadside admissions: NA

Post Miranda admissions enroute to / or at BAT: REFUSED after Implied Consent, which she refused to acknowledge. REFUSED Q&A

ODORS:

Obvious odor of an unknown alcoholic beverage that intensified as the defendant spoke to me. URINE

GENERAL OBSERVATIONS

SPEECH: slurred, slow, mumbling, incoherent

ATTITUDE: annoyed

CLOTHING: blue t shirt, blue jeans, black sneakers

MEDICAL/OTHER: FEOSTs conducted on in car video. Defendant states no medical problems or medications. Based on my training and experience, and the totality of the circumstances, I determined that probable cause existed for the defendant's arrest for DUI, in violation of FSS 316.193(1).

STATE OF FLORIDA
COUNTY OF PALM BEACH

DS DANIEL MERCIER 8236

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 12th day of JULY 2018 by INV. DANIEL MERCIER

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

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



SUBJECT: COSTA, APRIL RENEE

CASE NUMBER 18096093

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

DS DANIEL MERCIER 8236

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 12th day of JULY 2018 by INV. DANIEL MERCIER

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

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



WITNESS LIST

CASE NUMBER: 18096093

ARRESTING OFFICER: DS DANIEL MERCIER 8236

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 _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NOT A CERTIFIED COPY

TESTING FACILITY TASK REPORT

AGENCY: PBSO
SUBJECT: Costa, April R CASE NUMBER: 18-09160913
DATE: 07/12/18 VIDEO TAPE NUMBER: NIA
BEGINNING TIME: 04:47 ENDING TIME: 04:49
BREATH TESTS RESULTS: 1) R TIME 04:49 A.M./P.M. 2) NIA TIME - A.M./P.M.
3) NIA TIME - A.M./P.M. 4) NIA TIME - A.M./P.M.

BREATH OPERATOR: K. Magnifico #32079
MAINTENANCE TECHNICIAN: J. Korteck #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: Muffled
ATTITUDE: Calm, Quiet, Sleeping, / Uncooperative
CLOTHING: Blue Jeans, Blue short sleeve collared shirt, brown shoes
MEDICAL CONDITIONS: None
MEDICATIONS: None
OTHER: Eyes glassy and bloodshot. Unsteady on feet, Odor of unknown Alcoholic Beverage on Breath

COMMENTS: Arrived at Testing center, ALO began 30 minute Observation Period at 04:32 hrs.

REFUSED

A refused to participate in camera footage.

A refused to take test.

ALO read TIC and tried to explain

A stated she didn't understand TIC even when ALO tried to explain it.

REFUSED

ALO took A being uncooperative as a Refusal

Due to A being uncooperative, Rights were not read and Q+A was not conducted.

SUBJECT: Costa, April R

CASE NUMBER: 18-091093

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) NOT Read on camera

SUBJECT: Osia April R

CASE NUMBER: 18-096093

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: _____

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

I, D/S DANIEL MERCIER, 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 12TH day of JULY, 20 18, at 0355 P.M. A.M.

DRIVER APRIL RENEE COSTA
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# C230016716370, state of FLORIDA, was placed under lawful arrest for

the offense of DUI by D/S DANIEL MERCIER and
(Name of Arresting Officer)

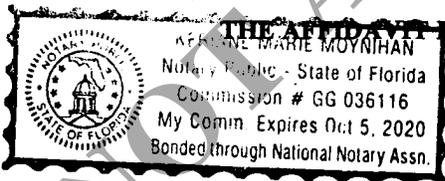
issued Citation # A2FUP9P

That on or about the 12TH day of JULY, 20 18, at 0449 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 of Law Enforcement Officer or
Correctional Officer



(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before

me this 12TH day of JULY, 20 18,

by D/S DANIEL MERCIER,

who is personally known to me or who has produced

KNOWN LEO as identification

Notary Public Marie Moynihan

HSMV-BAR1001 (REV. 10/2016)

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

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.



Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	<input type="checkbox"/>	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	<input type="checkbox"/>	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	<input type="checkbox"/>	119.071(4)(c)	Undercover personnel.	
	<input type="checkbox"/>	119.071(2)(f)	Confidential informants (CIs).	
	<input type="checkbox"/>	119.071(2)(e)	Confession.	
Public Info. Exemptions	<input type="checkbox"/>	985.04(1)	Juvenile offender records.	
	<input type="checkbox"/>	119.071(h)(i)	Assets of a crime victim.	
	<input type="checkbox"/>	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	<input type="checkbox"/>	394.4615(7)	Mental health information.	
	<input type="checkbox"/>	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)	<input checked="" type="checkbox"/>	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	<input type="checkbox"/>	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	<input type="checkbox"/>	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	<input type="checkbox"/>	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	<input type="checkbox"/>			
Other	<input type="checkbox"/>	119.014(3A)(13)(1-3C)	Other: Keep Separate - Court Documents/Official Records	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2018023182	Date: 07/15/2018
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