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NH

2131

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

1 Juvenile

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- 17154579		
	Charge Type: Check as many as apply. <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony		<input type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor		<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Weapon Seized / Type 2 1. Yes 2. No		
	Location of Arrest (Including Name of Business) 20551 Boca West Drive, Boca Raton FL 33434		Location of Offense (Business Name, Address) 20551 Boca West Drive		Boca Raton FL 33434				
DEFENDANT	Date of Arrest 11/21/2017	Time of Arrest 1941	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle Towed by Access Towing		
	Name (Last, First, Middle) Kane Arlene Diane		Alias (Name, DOB, Soc. Sec. #, Etc.)						
	Race W - White I - American Indian B - Black O - Oriental/Asian	Sex F	Date of Birth 07/11/1950	Height 5'1"	Weight 112	Eye Color Hazel	Hair Color Brunette	Complexion Fair	Build Small
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) None visible		Marital Status Widowed		Religion Jewish		Indication of: Alcohol Influence <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Unk. Drug Influence <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Unk.			
Local Address (Street, Apt. Number) 20064 Waters Edge Drive Apt 402		(City) Boca Raton FL 33434		(State) FL		(Zip)		Phone (561) 5043391	
Permanent Address (Street, Apt. Number)		(City)		(State)		(Zip)		Residence Type: 1. City 2. County 3. Florida 4. Out of State 2	
Business Address (Name, Street)		(City)		(State)		(Zip)		Address Source Verbal/DAVID	
D/L Number, State K500004507510, FL		Soc. Sec. Number		INS Number		Place of Birth (City, State) Manhattan, New York		Citizenship USA	
CO-DEF	Co-Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large <input type="checkbox"/> 3. Felony <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"/> 2. At Large <input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile		
JUVENILE	<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other:		Residence Phone () () ()						
	Address (Street, Apt. Number)		(City)	(State)	(Zip)	Business Phone () () ()			
	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. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)		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. Dispense/ Distribute	M. Manufacture/ Produce/ Cultivate	Z. Other	Drug Type N. N/A A. Amphetamine	
	Charge Description DUI Crash with property damage		Counts 1	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number 316.193(3)(C)(1)		Violation of ORD #		
Drug Activity N		Drug Type N	Amount / Unit	Offense # 17154579	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		
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) PALM BEACH COUNTY COURTHOUSE CRIMINAL JUSTICE COMPLEX, 3228 GUN CLUB RD, WEST PALM BEACH, FL 33406 PH: (561) 355-2996								
	Court Date and Time Month December , Day 21st , Year 2017 , Time 0830 , AM <input checked="" type="checkbox"/> PM <input type="checkbox"/>		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.						Date Signed 11/21/2017
Signature of Defendant (or Juvenile and Parent /Custodian) <i>[Signature]</i>		Signature of Arresting Officer <i>[Signature]</i>						Name Verification (Printed by Arresting Officer) <i>[Signature]</i>	
Name Inv. Christopher Ficarra		Name of Arresting Officer (Print) Inv. Christopher Ficarra		I.D. # 8368		(PRINT) NOV 21 2017		PAGE 1 OF 1	
Take Delivery <input checked="" type="checkbox"/> <i>[Signature]</i>		I.D.#		Pouch #		Transporting Officer Inv. C. Ficarra		Witness here if subject signed with an "X" 1	

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

PROBABLE CAUSE AFFIDAVIT

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

1

Juvenile

N

OBTS Number	Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	Agency Report Number 06-
Charge Type: Check as many as apply.		<input type="checkbox"/> 1. Felony	<input checked="" type="checkbox"/> 3. Misdemeanor	<input type="checkbox"/> 5. Ordinance
		<input type="checkbox"/> 2. Traffic Felony	<input type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 6. Other

Name (Last, First, Middle) KANE ARLENE	Alias DIANE	Race W	Sex F	Date of Birth 07/11/1950
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Charge Description DUI	316.193(1)(A)	Charge Description
Charge Description		Charge Description

Victim's Name (Last, First, Middle) STATE OF FLORIDA	Race ~	Sex ~	Date of Birth ~
Local Address (Street, Apt. Number)	(City)	(State)	(zip)
Business Address (Name, Street)	(City)	(State)	(zip)

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.
 The Person taken into custody
 committed the below acts in my presence. was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.
 confessed to _____ admitting to the below facts. was found to have committed the below acts, resulting from my (described) investigation.
 On the **21ST** day of **NOVERBER** 20 **17** at **1827** A.M. P.M. (Specifically include facts constituting cause for arrest.)

On Tuesday 11/21/2017 at approximately 1827 hours I responded to 20551 Boca West Drive in unincorporated Boca Raton, in Palm Beach County Florida, 33434 in reference to a single vehicle car crash. Upon my arrival I met with the Boca West Security who advised that a white female later identified as Arlene Kane was driving at the time of the crash.

I then spoke with Arlene and asked how the crash occurred. Arlene stated that she didn't know and then stated that she swerved to hit something in the roadway. Arlene's white Mercedes Benz (bearing FL tag 656QUR) drove off the roadway and hit a light pole on the right side of the road way. When I asked Arlene for her driver's license, registration and insurance card, Arlene stated that she did not have any. While speaking with Arlene she had a slow slurred speech. When she was standing she had a circular sway. Arlene's eyes were bloodshot and glassy.

When I asked Arlene if she had her insurance and registration paperwork in the car, she began to look and then stopped as if she forgot what I had asked her for. I asked Arlene if she had anything to drink tonight and she stated that she had two glasses of wine about an hour ago. In a spontaneous utterance, Arlene stated that they give you too much to drink at Boca West Club House, which is where she was coming from. Arlene also stated that she had too much to drink. Based my observations of Arlene, I requested that a DUI investigation respond to the scene due to her possible impairment.

STATE OF FLORIDA
 COUNTY OF PALM BEACH
JAMES ALISEO
 (Signature of Arresting/Investigative Officer) **JAMES ALISEO**

The foregoing instrument was sworn to or affirmed and subscribed before me this **21ST** day of **NOVERBER** 20 **17** by **JAMES ALISEO 19472**
 (Print name of Arresting/Investigative Officer, who is personally known to me and/or produced identification. Type of identification produced **Personally Known**)

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

PROBABLE CAUSE AFFIDAVIT

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

1

Juvenile

OBTS Number	Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	Agency Report Number 06-17154579
Charge Type: Check as many as apply.	<input type="checkbox"/> 1. Felony	<input type="checkbox"/> 3. Misdemeanor	<input type="checkbox"/> 5. Ordinance	Special Notes:
	<input type="checkbox"/> 2. Traffic Felony	<input checked="" type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 6. Other	

Name (Last, First, Middle) Kane, Arlene, Diane	Alias	Race W	Sex F	Date of Birth 07/11/1950
Charge Description DUI Crash with property damage	Charge Description 316.193(3)(C)(1)			
Charge Description	Charge Description			

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		
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.
 The Person taken into custody
 committed the below acts in my presence. was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.
 confessed to _____ admitting to the below facts. was found to have committed the below acts, resulting from my (described) investigation.
 On the **21st** day of **November** 20 **17** at **1827** A.M. P.M. (Specifically include facts constituting cause for arrest.)

I asked Arlene to follow me to the front of my marked PBSO patrol vehicle which she did. Arlene gave crash statements at that time. I observed that she had a circular sway as she stood still. I also confirmed that she was not injured from the crash and Fire Rescue had checked her out. After giving crash statements I advised her that the crash investigation was completed and I was conducting a DUI investigation. I advised her that I would have to read her her Constitutional Warnings which she stated she understood. She also stated that she knew because she was an attorney. I read to Arlene her Constitutional Warnings which he stated she understood. Post- Constitutional Warnings she stated the following: She did not need Fire Rescue and had no injuries from the crash. Arlene had no medical issues such as diabetes or seizures, she had no physical defects or injuries, no issues walking around, she was not sick, and she did not take any prescription medications or illegal drugs or marijuana. Arlene stated that she practiced medical law. Arlene stated that she pulled out and next thing she knew she was being pulled over by a Sheriff's deputy. Arlene stated that she did not remember getting into the crash nor did she remember striking anything. She stated that he vehicle was hers and she was the registered owner. Arlene stated that she was alone in the vehicle as she came from the Club House. Alrene stated that the vehicle had no damage prior to that. No airbags had deployed and she stated she had her seatbelt on.

I explained my concerns to Arlene who stated that she had three normal size glasses of wine at the Club House starting at approximately 4 pm. Arlene stated she had nothing to drink since the crash and had no food as she was drinking. Arlene stated she had no speech issues normally and had no eye issues (did not wear glasses or contacts).

Based on my above observations I asked Arlene to submit to standardized field sobriety tasks which she stated she would do. Arlene decided to keep her wedges on for the tasks. It should be noted that she had them on during the HGN and walk and turn tasks but took them off with my assistance for the one leg stand task. She then put them back on with assistance for the remainder. Arlene assisted in placing a tape line on the roadway for the tasks. *See roadside task page for further*****

STATE OF FLORIDA
 COUNTY OF PALM BEACH
Inv. Christopher Ficarra
 (Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this **21st** day of **November** 20 **17** by **Inv. Christopher Ficarra**
 (Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced **Known**

Jeanette Cain (#2109)
 Notary Public, Clerk of Court, Officer (F.S.S 117.10)

PAGE
 OF

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 21st DAY OF November 20 17, AT 1827 AM PM

SUBJECT: Kane Arlene Diane CASE NUMBER: 17154579

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: Inv. Christopher Ficarra

PERSONAL CONTACT

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

On 11/21/2017 at approximately 1917 hours I responded to 20551 Boca West Drive (Boca West Community), in unincorporated Palm Beach County, in reference to a DUI crash investigation. Upon my arrival I observed a white Mercedes Benz C300 stopped on the south shoulder of the roadway facing east. The Mercedes had impacted a metal light post and was currently stopped on top of it. There was heavy damage to the front end of the Mercedes. I observed sitting in the driver's seat was a white female wearing a gray top and gray long pants, later identified and confirmed through DAVID as Arlene Diane Kane the registered owner of the Mercedes. No air bags had deployed in the vehicle. Palm Beach County Fire Rescue had already been on scene to medically assess Arlene for any injuries needing transport to the hospital. No injuries were observed and no transport to the hospital was needed (Reference run number 17125611). The crash scene was approximately 75 feet from the entrance of the Boca West Club House.

OBSERVATION OF DRIVER:

I asked Arlene if she was okay to which she stated she was. I then spoke with the deputy on scene, Deputy Aliseo ID: 19472 who stated to me the following: The crash was called in by security who saw Arlene in the driver's seat of the vehicle. As he spoke with Arlene he observed that she had an orbital sway and glassy eyes. He asked her how much she had been drinking that night to which she stated a couple glasses of wine, they gave her too much (referring to the Club House on property), and she had too much to drink. Deputy Aliseo asked her for her vehicle registration, license, and insurance. Arlene stated that she did not have any of those documents. He asked her for just her registration but she seemed to forget what he asked for. Arlene appeared slowed and disoriented as well. Deputy Aliseo stated that he was unable to smell any odor of an alcoholic beverage because of his allergies but the security guard was able to. A sworn written statement given by the security guard on scene, Eric Perez, stated that Arlene was behind the wheel of the vehicle upon his arrival (see sworn statement for further). Deputy Aliseo completed a supplemental probable cause affidavit (see attached for further). As I was still speaking with Deputy Aliseo I observed that Arlene attempted to start her vehicle at which time I advised her to turn it off because she was stuck on the post she had hit.

DRIVER'S STATEMENTS:

I then spoke with Arlene who was still sitting in the driver's seat of the vehicle. I asked Arlene for her driver's license to which she stated she did not bring it with her. I asked her to come out of the vehicle so I could speak with her about the crash. I observed as she stepped from the vehicle that she appeared unsteady on her feet. She seemed to sway side to side as she walked as well. I observed that her eyes were red, glassy, and droopy. Her speech appeared slurred and slowed. I also could smell the obvious odor of an unknown alcoholic beverage on her breath as she spoke (See attached PC page for further).

ODORS:

Obvious odor of an unknown alcoholic beverage on her breath as she spoke

GENERAL OBSERVATIONS

SPEECH: Slurred, slowed

ATTITUDE: Calm, compliant, dazed, forgetful

CLOTHING: Gray shirt, gray long pants, tan wedge shoes

MEDICAL/OTHER: No medical issues (no diabetes, no seizures), no physical defects or injuries, no issues with eyes (no glasses or contacts), no prescription medication or illegal drugs taken, state had three glasses of wine that night

STATE OF FLORIDA
COUNTY OF PALM BEACH

Inv. Christopher Ficarra *W C 28362*

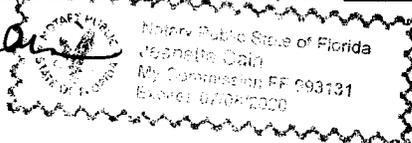
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 21st day of November 20 17 by Inv. Christopher Ficarra

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

Jeanette Cain (#2109) *Jeanette Cain*

Notary Public, Clerk of Court, Officer (F.S.S. 117.00)



SUBJECT Kane

Arlene

CASE NUMBER 17154579

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- | | |
|---|---|
| <input checked="" type="checkbox"/> LT EYE-LACK OF SMOOTH PURSUIT | <input checked="" type="checkbox"/> RT EYE-LACK OF SMOOTH PURSUIT |
| <input checked="" type="checkbox"/> LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION | <input checked="" type="checkbox"/> RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION |
| <input checked="" type="checkbox"/> LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES | <input checked="" type="checkbox"/> RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES |

Other Observations:

The overhead blue police lights were turned off prior to the tasks. Arlene's eyes tracked equally, the pupils were the same size, were appropriate for the lighting conditions, and no resting nystagmus was observed. Vertical gaze nystagmus was administered and was observed. Arlene moved her head during the task and swayed in a circular motion.

WALK & TURN:

I explained and demonstrated the instructions for the walk and turn task to Arlene who stated that she understood. During the task I observed that Arlene had the following cues: couldn't keep balance while listening to instructions (kept right foot across line and separated from left during instructions, when getting into position she stumbled to her left); swayed while standing in instructed position; missed heel-to-toe on each step; stepped off the line on each step (stepped to side of line and walked normally); used arms for balance (raises arms over six inches); improper turn (turned around lifting her front foot, turned with large steps); took incorrect number of steps: 8 on first set then 8 on return.

ONE LEG STAND:

I explained and demonstrated the instructions for the one leg stand task to Arlene who stated that she understood. During the task I observed that Arlene had the following cues: swayed while balancing; used arms for balance (raises arms over six inches); put foot down multiple times (before 30 seconds); started task before being told to; started to walk forward and stumbled to the side. Arlene stated that she was not sure if she understood the instructions but did want to take her shoes off. I reexplained the instructions to her and again she stated she understood. Arlene then showed the following cues the seconds time through: started before being told to again; arms raised; stumbled to side; swayed side to side; foot down multiple times; toe tapping. Arlene stated that she had too much to drink and was trying to get home.

FINGER TO NOSE:

I explained and demonstrated the instructions for the finger to nose task to Arlene. I explained what is considered the tip of the finger and tip of the nose to Arlene who stated that she understood. She also knew her left from her right. During the task I observed that Arlene had the following cues: did not keep eyes closed (peaked during task); failed to return arms to the side multiple times during the task; used pad of finger not finger tip as instructed to touch nose; touched side of nose on 4th instructed hand; swayed side to side during task; touched side of nose then brought finger to tip on 6th instructed hand.

ROMBERG ALPHABET:

I explained and demonstrated the instructions for the Romberg with recitation task to Arlene who stated that she understood. I asked her to say her ABCs from A to Z without stopping or singing which she stated she could. During the task I observed that Arlene had the following cues: did not keep eyes closed; swayed more than two inches in a circle; closed eyes and tilted head before being told to do so; paused in between letters as she recited alphabet.

BREATH TEST RESULTS: 1) .165 2) .175 3) 4)

STATE OF FLORIDA
COUNTY OF PALM BEACH

Inv. Christopher Ficarra *IN C 2708*

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 21st day of November 2017 by Inv. Christopher Ficarra

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

Jeanette Cain (#2109) *Jeanette Cain*

Notary Public, Clerk of Court, Officer (F.S.S. 117.00)



