

Agency ORI Number 0500200 Agency Name Boca Raton Police Department Agency Report Number (N.T.A.'s only) 3 | 2 | 2018-005115

Name (Last, First, Middle) NOVAK, ATILA IMRE Alias: Alias (Name, DOB, Soc. Sec. #, Etc.) Race W-White I-American Indian M Sex M Date of Birth 02/09/1965 Height 6'02 Weight 220 Eye Color BLUE Hair Color BROWN Complexion LIGHT Build Stocky

Local Address (Street, Apt. Number) 2559 NE 15TH ST, POMPANO BEACH, FL 33062 (City) (State) (Zip) Phone (954) 822-2647

Charge Description DUI Statute Violation Number 316.193(1) Bond

Health / Apparent Physical Condition of Defendant GOOD Any knowledge of the following: Mental Escape Risk Medication Deformities Injuries

PROPERTY - Received By BISSOON Released By BISSOON Released To COUNTY JAIL

INSTRUCTION NO. 1 - Mandatory appearance in court INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.

Signature of Defendant (or Juvenile and Parent/Custodian) Date Signed Name Verification (Printed by Arrestee) BISSOON, S. R. Agency BRPD

SCANNED APR 11 2018

PROBABLE CAUSE AFFIDAVIT

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

1 JUVENILE

OC # Number _____ Agency Report Number **3 | 2 | 2018-005115**

Agency ORI Number **FL 0500200** Agency Name **BOCA RATON POLICE DEPARTMENT**

Charge Type: 1. Felony 3. Misdemeanor 5. Ordinance
 2. Traffic Felony 4. Traffic Misdemeanor 6. Other

Special Notes: _____

Name (Last, First, Middle) **NOVAK, ATTILA IMRE** Alias _____ Race **W** Sex **M** Date of Birth **02/09/1965**

Charge Description **316.193(1) DUI** Charge Description _____

Victim's Name (Last, First, Middle) **STATE OF FLORIDA,**

Local Address (Street, Apt. Number) (City) (State) (Zip) Phone Address Source
100 NW 2ND AVE, BOCA RATON, FL 33432 (561) - _____

Business Address (Name, Street) (City) (State) (Zip) Phone Occupation
 (56) - _____

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 **SEVONTE MILLER** who told **OFC BISSOON** 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 **12** day of **April**, **2018** at **00:01** (Specifically include facts constituting cause for arrest.)

On 04/12/2018 I responded to 1899 S Federal Hwy in reference to an accident involving two vehicles a 2008 Mercedes bearing Fl tag#JE9VI and a 2018 Chevy bearing Fl tag#IEQU74. I met with the driver of the Chevy, Sevonte Miller and he advised that he was driving northbound on S Federal Hwy when the Mercedes who was being driven by Attila Novak struck his vehicle from behind. Miller stated that he called BRPD because he was driving a rental vehicle and wanted to make sure that he was doing everything properly because he didn't want to be responsible for any damages to the rental vehicle. Miller advised that he pulled over to the right side to check the damages to his vehicle. Miller stated that there were minor scratches to the rear bumper. Novak began to get upset because Miller wanted to have the incident document and Novak wiped the scratches off of Miller's vehicle. Miller advised that Novak was the driver and only occupant of the vehicle. I then spoke to Novak who advised that he was on his phone and wasn't paying attention and struck the vehicle in front of him. I asked him if he had been drinking and he advised that he had a couple of beers over the past few hours. Ofc Codling and Ofc Bohan arrived on scene a short time after.

I observed no damage to either vehicle so no accident report was completed. I then asked Novak to walk over to the front of vehicle and as he walked over he had his hands in the air and stumbled. I then advised him that I was done with the traffic crash investigation and would be conducting a criminal investigation. I then read Novak his Constitutional Rights in the presence of Ofc Codling and Novak stated that he understood and would answer my questions without an attorney present. Novak stated that he wasn't paying attention and struck the vehicle in front of him, but there was no damage to either vehicle. Novak believed that since there was no damage that there was no accident. I then asked him where he was coming from and he stated that he was coming from home and driving around. He also stated that he was not drinking tonight after I asked him again. While speaking with Novak I could smell a strong odor of an alcoholic beverage emanating from his person, his eyes were glossy and blood shot and he

SWORN AND SUBSCRIBED BEFORE ME

FRENZ, JONATHAN RYAN
 NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)
 04/12/2018
 DATE

BISSOON, STEPHEN R (664)
 NAME OF OFFICER (PLEASE PRINT)
 04/12/2018
 DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER **664**

PAGE 1 OF 2

PROBABLE CAUSE AFFIDAVIT
SUPPLEMENT

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

1

JUVENILE

A D M I N I S T R A T I V E	Agency ORI Number FL 0500200	Agency Name BOCA RATON POLICE DEPARTMENT	Agency Report Number 3 2 2018-005115
	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 checked="" type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 6. Other
D E F	Name (Last, First, Middle) NOVAK, ATILA IMRE	Alias	Race W Sex M Date of Birth 02/09/1965

was slurring his speech.

Based on my observations I asked Novak if he would submit to roadside sobriety tasks and he stated that he would submit to the tasks. I then walked him over to a well-lit area and asked him if he had any medical problems or medical issues that would prevent him from doing the tasks. Novak advised that he was taking medications for his heart but he was unable to advise the names of the medications. I then asked him if this would prevent him from being able to walk a line, lift his foot or lift his finger to nose or recite the Alphabet and he stated that he would be able too. I then tried to put him in the starting position and he was unable to maintain that position. He then began to walk the line without being told to do so. Novak then stated that he couldn't do the tasks. I then advised him of his Taylor Warnings and he advised that he understood. I then asked him again if he would like to submit to the tasks and he stated no. I then placed Novak into custody for DUI. I then transported him to BRPD.

Ofc Murphy responded to BRPD as my Breath Test operator. Ofc Murphy and I conducted the 20-minute observation and then he was taken into the BAT room. Novak advised he would provide a breath sample. When Ofc Murphy began to give him instructions he stated that he was not going to provide a sample. I then read him Implied Consent Warnings and he advised that he wouldn't provide a sample. I also reminded Novak of his Constitutional Warnings which I read on scene and he advised he wouldn't answer my questions without an attorney present. See DUI influence report.

Novak is being charged under F.S.S. 316.193(1) for DUI. Novak was transported to Palm Beach county jail for final disposition. Novak's vehicle was towed to Emerald.

NOT A CERTIFIED COPY

A D M I N I S T R A T I V E	SWORN AND SUBSCRIBED BEFORE ME	
	FRENZ, JONATHAN RYAN	SIGNATURE OF ARRESTING / INVESTIGATING OFFICER
	NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)	BISSOON, STEPHEN R (664)
	04/12/2018	NAME OF OFFICER (PLEASE PRINT)
	DATE	04/12/2018
		DATE

CASE #: 18-5115

10-15:0001

OBV: 0015 (Bissoo/Murphy)

DUI INFLUENCE REPORT



BOCA RATON POLICE SERVICES DEPARTMENT

100 NW 2nd Avenue

Boca Raton, FL 33432

SCANNED

APR 11 2018

ARRESTING OFFICER: Bissoon

Name: Ofc Bissoon Phone # _____ Work # 561-338-1234

Address: 100 NW 2nd Ave Boca Raton FL 33432

Can testify to: investigation

Name: Ofc Coaling Phone # _____ Work # " "

Address: " "

Can testify to: " "

Name: Ofc Bohan Phone # _____ Work # " "

Address: " "

Can testify to: " "

Name: Ofc Murphy Phone # _____ Work # " "

Address: " "

Can testify to: booking

Name: Savonte Miller Phone # 321-271-0271 Work # _____

Address: 1202 Admirality Blvd, Bokeledge FL 32955

Can testify to: accident

Name: Shane Young Phone # 778-682-4243 Work # _____

Address: 200 NE 20th St Boca Raton, FL 33431 199c

Can testify to: Accident

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____



BOCA RATON POLICE SERVICES DEPARTMENT
DUI-INFLUENCE REPORT - PART II

To be filled out at testing facility

Agency Case # 18-5115

I. INTRODUCTION (Instrument Operator faces video camera)

A. The day is Thursday, April, 12, 2018.
(day) (month) (date) (year)

B. The time is now approximately 0042 AM/PM.

C. The following is in reference to case number 2018-005115.

D. Present at this time is Ofc Bissoon, Murphy of the Boca Raton Police Department.
(Officer's Name)

E. Officer Bissoon, have you arrested Attika Novah in violation of Florida State Statute 316.193?
(Defendant's name)

F. Did this violation occur within the City of Boca Raton, Palm Beach County, Florida? yes

G. Mr/Mrs./Ms. Novah, I am required to inform you these proceedings are being video recorded.

Operator Note: Video record breath request, breath sample, and interview.

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II. AT THIS TIME THE ARRESTING OFFICER WILL REQUEST A BREATH SAMPLE.

Note: Read only the paragraph applicable to the type of test you are requesting.

- A. I am now requesting that you submit to a lawful test of your **BREATH** for the purpose of determining its alcohol content.
- B. I am now requesting that you submit to a lawful test of your **URINE** for the purpose of determining its alcohol content.
- C. I am now requesting that you submit to a lawful test of your **BLOOD** for the purpose of determining its alcohol content and the presence of chemical or controlled substances.

IMPLIED CONSENT WARNINGS

Note: Read only if the subject does not comply with your request.

I am OAC BISSON of the BRPD.

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 Signature: on video

Note: Also read for CDL holders:

IN ADDITION, your refusal to submit will result in the loss of your commercial privileges for one year from today. If this is your SECOND REFUSAL, you will be permanently disqualified from operating a commercial motor vehicle.

Note: After reading the implied consent warning, the arresting officer must request a breath sample again.

(IF REFUSAL THEN)

At this time Mr. NOVAH has refused to submit to a breath test.

The date is April, 12, 2018, and the time is 0046 AM PM.
(month) (day) (year)

A refusal form will be completed by the arresting officer.

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BOCA RATON POLICE SERVICES DEPARTMENT
TESTING FACILITY TASK REPORT

SUBJECT: Attila Navah

CASE #: 2018-005115 DATE: 4-12-18

BREATH TEST RESULTS

1) TIME _____ AM/PM 2) TIME _____ AM/PM
3) TIME _____ AM/PM 4) TIME _____ AM/PM

BREATH OPERATOR: Murphy

MAINTENANCE TECHNICIAN: Dane

TESTING OFFICER'S OBSERVATIONS

SPEECH: accent

ATTITUDE: calm ; became agitated and began cursing inside the breath room and jail cell.

CLOTHING: white cargo shorts, tan sandals, blue/green plaid shirt

MEDICAL CONDITION: heart condition

OTHER: Navah appeared to have a dry mouth and continued to lick his lips. ; odor of an alcoholic beverage emitting from person ; stated he drank Palinka.

COMMENTS:

Identify yourself and state:

I am required to warn you before you make any statement that you have the following Constitutional rights:

- (1) You have the right to remain silent and not answer any questions.
- (2) Any statement you make must be freely and voluntarily given.
- (3) You have a right to the presence and representation 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 and representation of a court appointed lawyer before you make any statement 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 be and will be used against you in a court of law.
- (8) Do you understand these rights as I have read them to you, and do you wish to speak to me?

Signed: on video Date: 4-11-18 Time: _____
(read on scene due to it being an accident; verified again in booking)
QUESTIONS AND ANSWERS

Were you operating a motor vehicle at the time of the accident/stop? _____

Where were you going? _____

What street or highway were you on? _____

Direction of travel? _____

Where did you start driving from? _____

What city (county) were you stopped in? _____

What time did you start? _____ AM/PM What time is it now? _____

What is today's date? _____ What day of the week is it? _____

When did you last eat? _____ What did you eat? _____

What have you been doing the past three hours prior to this stop/accident? _____

How much do you weigh? _____ Have you been drinking? _____ What were you drinking? _____

How much? _____ Where? _____ With whom were you drinking? _____

When did you have your first drink? _____ AM/PM When did you stop drinking? _____ AM/PM

How did you consume your last two drinks? _____

Are you under the influence of alcohol now? Yes No

Can you feel the effects of alcohol? Yes No

Have you consumed alcohol since the accident? Yes No

Can you feel the effects of alcohol? Yes No

Have you consumed alcohol since the accident? Yes No How much? _____

What? _____ Where? _____

What line of work are you in? _____

When did you last work? _____

Do you have any physical defects or injuries? Yes No If yes, explain: _____

Are you sick or injured? Yes No If yes, explain: _____

Do you limp? Yes No Did you get a bump on the head? Yes No

Were you in an accident today? _____

Have you taken any drugs or smoked marijuana today? _____

What? _____ When? _____

Have you seen a doctor or dentist today? Yes No Who? _____

Are you taking any prescription medications? Yes No What? _____ When? _____

Do you have: Epilepsy? Yes No Inner ear trouble? Yes No

Glass eye? Yes No Ear infection? Yes No

False teeth? Yes No Diabetes? Yes No

Any problems not correctable by glasses or contact lenses? _____

Do you take insulin? Yes No If yes, when was your last injection? _____

Have you ever had a driver's license in any other state? _____

I am now ending this video recording. The time is now approximately 0047 AM/PM.

The date is April (month), 12 (day), 2018 (year).

SCANNED
APR 11 2018