0268072 2019CT19013ASB 2095

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

1 | Juvenile **N**

ADMINISTRATION

OBTS Number		

Agency ORI Number	Agency Name	Agency Report Number
FL0500300	BOYNTON BEACH POLICE DEPT.	34-19-057347

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)	Location of Offense (Business Name, Address)
3000 N. CR 807, BOYNTON BEACH, FLORIDA, 33435	3000 N. CR 807, BOYNTON BEACH, FLORIDA, 33435

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
10/12/2019	0017					

DEFENDANT

Name (Last, First, Middle): BREEN, BLAIR WILLIAM
Alias (Name, DOB, Soc. Sec. #, Etc):

W - White I – American Indian B - Black O – Oriental / Asian

Race	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	M	08/28/1983	510	220	BRO	BRO	FAIR	MED

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)	Marital Status	Religion
N/A	SINGLE	N/A

Indication of: (Y N Unk.)
Alcohol Influence ☒ ☐ ☐
Drug Influence ☐ ☐ ☒

	(Street, Apt. Number)	(City)	(State)	(Zip)	Phone
Local Address	38 W. COCONUT DR,	LAKE WORTH,	FLORIDA,	33467	( ) -
Permanent Address					( ) -
Business Address					( ) -

Residence Type: 1. City 2. County 3. Florida 4. Out of State — **2**
Address Source: DL
Occupation: ENGINEER

D/L Number, State		INS Number	Place of Birth	Citizenship
B650079833080 / FL	[redacted]		SHEYENNE, WY	US

CO-DEF

Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	
				☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile
				☐ 1. Arrested ☐ 2. At Large ☐ 3. Felony ☐ 4. Misdemeanor ☐ 5. Juvenile

JUVENILE

☐ Parent ☐ Legal Custodian ☐ Other — Name (Last) (First) (Middle) — Residence Phone

CVOR

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 561-355-2526) 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. Barbituate, C. Cocaine, E. Heroin, H. Hallucinogen, M. Marijuana, O. Opium/Deriv., P. Paraphernalia/Equipment, S. Synthetic, U. Unknown, Z. Other

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD#
DUI	1	☐Yes ☒No	316.193.1	-

Drug Activity	Drug Type	Amount/Unit	Offense #	Warrant/Capias Number	Bond
-	-	-	19-057347	-	-

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD#
		☐Yes ☐No		

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

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD#
		☐Yes ☐No		

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

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD#
		☐Yes ☐No		

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

NOTICE TO APPEAR

☐ Instruction No. 1 Mandatory Appearance in Court
☐ Instruction No. 2 You need not appear in Court but must Comply with instruction on reverse side.

Location (Court, Room Number, Address): South County Courthouse, 200 West Atlantic Ave, Delray Beach, FL 33444

Court Date and Time: Month 11 Day 18 Year 2019 Time 0830 ☐ 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.

Signature of Defendant (or Juvenile and Parent/Custodian) — Date Signed

ADMIN.

HOLD for other Agency Name:
☐ Dangerous ☐ Suicidal ☐ Resisted Arrest ☐ Other:

Signature of Arresting Officer
Name of Arresting Officer (Print): OFFICER CASTRO — I.D. # 905

Name Verification (Printed by Arrestee) (PRINT)
BU#

Intake Deputy: O'Neal — I.D. # 7206
Pouch #
Transporting Officer: OFFICER CASTRO — I.D. # 905 — Agency BBPD
Witness here is subject Signed with an "X".

Page 1 OF 1

OCT 12 AM 4:39

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 12 **DAY OF** October **2019 AT** 0008 ☒ **A.M** ☐ **P.M.**

CASE #: 19-057347 **DEFENDANT:** BREEN, BLAIR WILLIAM

PERSONAL CONTACT/DRIVING PATTERN/OBSERVATION OF DRIVER:

While in the left (south) turn lane at the intersection of Gateway Blvd and N. CR 807 (Congress Ave) I observed a 2014 Gray Chevrolet Impala bearing Florida tag EPHQ24 failed to stop at the solid red traffic light as it traveled northbound through the intersection. This incident occurred within the City of Boynton Beach, Palm Beach County, Florida. As the vehicle traveled through the intersection the Red Light Camera flashed numerous times, indicating that the infraction was recorded as well. Due to the traffic I proceeded behind the vehicle and initiated a traffic stop on the vehicle at the 3000 block of N. CR 807.

I then made contact with the driver/sole occupant W/M Breen, Blair (08/28/83). I explained the reason of the traffic stop to Breen, which he stated that he understood and that he was just being "stupid". While speaking with Breen I detected the odor of an unknown alcoholic beverage emanating from his breath and from within the vehicle. I noticed that Breen's eyes were bloodshot/glassy and that his speech was slurred. After positioning my vehicle properly I requested Breen to exit his vehicle and escorted him to the rear of his vehicle. At the rear of the vehicle Breen quickly began to lean on his vehicle. While continuing to speak with Breen, the signs of impairment and the odor of the unknown alcoholic beverage were still present. Breen advised that he had a couple of glasses of wine at his girlfriend's residence a couple of hours prior to the traffic stop. Based on the above facts I asked Breen if he would submit to a Series of Standardized Field Sobriety Task, which he stated no. I then advised Breen of his Taylor Warnings, which he stated that he understood. I then asked Breen a second time, which he stated no because he feels that he was going to fail the test. Based on my investigation at this point Breen was placed into custody under suspicion of DUI (D/L and Spaced).

HORIZONTAL GAZE NYSTAGMUS:

- ☐ Left eye does not follow smoothly
- ☐ Left eye prior to 45 degrees
- ☐ Distinct jerking in left eye at maximum deviation
- ☐ Vertical Nystagmus in left eye
- ☐ Right eye does not follow smoothly
- ☐ Right eye prior to 45 degrees
- ☐ Distinct jerking in right eye at maximum deviation
- ☐ Vertical Nystagmus in right eye

WALK AND TURN:

ONE LEG STAND:

FINGER TO NOSE:

ROMBERG/ALPHABET:

Breen was then placed in the back seat of my patrol vehicle (#4734). I started my 20 minutes observations at 0020hrs and completed it at 0040hrs. Upon completion I requested Breen to provide a sample of his breath to determine the alcohol content, which he refused. I then read Breen Implied Consent, which he stated that he understood. I then asked a second time, which Breen refused again. I then read Breen his Miranda Warnings, which he stated that he understood. Breen refused Q&As.

Based on the above facts I've established Probable Cause to arrest Breen with 1M count of DUI pursuant with F.S.S. 316.193.1. Breen was processed and later TOT PBCJ.

Copy of the SFST and BAT video was later entered into the Boynton Beach Police Evidence Department. Incident was captured via BWC as well. Breen vehicle was released to a family member.

Nothing Further.

The following instrument was sworn to before me this 12 day of October 2019

By: PERSONALLY KNOWN / OFFICER CASTRO #905

Notary/Police Officer (F.S.S. 117.10)

Signature of Arresting Officer

Notary Public State of Florida
Samantha Palmer
My Commission GG 233762
Expires 10/28/2022

FLORIDA DEPARTMENT OF LAW ENFORCEMENT
ALCOHOL TESTING PROGRAM
BREATH ALCOHOL TEST AFFIDAVIT

Instrument Type: Intoxilyzer 8000
Instrument Registered To: BOYNTON BEACH PD
Instrument Serial Number: 80-001190 Software: 8100.27
Date of Test: 10/12/2019

Date of Last Agency Inspection: 09/27/2019
Observation Period Began: 00:20
Subject's Name: BLAIR W BREEN DOB: 08/28/1983 Sex: M

The subject was observed for at least twenty-minutes prior to the administration of the breath test to ensure that the subject did not take anything orally and did not regurgitate.

Results:

Test	g/210L	Time
Diagnostics Check	OK	00:45
Air Blank	0.000	00:46
Control Test	0.078	00:46
Air Blank	0.000	00:47
Subject Sample #1	REF*	00:47
Air Blank	0.000	00:47
Control Test	0.078	00:48
Air Blank	0.000	00:48
Diagnostics Check	OK	00:48

*Subject Test Refused

Cylinder Lot: 684131
Exp: 01/23/2020

State of Florida, County of Palm Beach,

Personally appeared before me the undersigned authority, who (✓) is personally known to me or (__) produced _____ as identification, and who after being placed under oath, states:

I DENNIS CASTRO, hold a valid Breath Test Operator permit issued by the Florida Department of Law Enforcement, I administered the above breath test to the subject named above in accordance with Chapter 11D-8, Florida Administrative Code, and this form is a true and accurate report of that breath test.

Breath Test Operator: _____ 936 Date: 10/12/19
Signature

Sworn to (or affirmed) before me this 12 day of October, 2019

_____ Samantha Palmer
Signature of Notary Public-State of Florida Printed Name of Notary Public-State of Florida

Note: Pursuant to section 117.10, Florida Statutes, law enforcement officers, correctional officers, traffic accident investigation officers and traffic infraction enforcement officers are notaries public when engaged in the performance of official duties. In accordance with section 316.1934(5), F.S., this completed form is admissible without further authentication and is presumptive proof of the results herein. To be used in accordance with Section 316.1934(5), F.S., and in administrative proceedings pursuant to 322.2615, F.S.

FDLE/ATP FORM 38 - MARCH 2004, Ref. 11D-8.007

Notary Public State of Florida
Samantha Palmer
My Commission GG 133762
Expires 10/28/2023

TESTING FACILITY TASK REPORT

CASE #: 19-057347 **DEFENDANT:** BREEN, BLAIR WILLIAM
Date: 10/12/19 **Video Tape #:** 4734

BREATH TEST RESULTS: REFUSED

1. ____ g/210L Time _____ ☐ a.m. ☐ p.m.
2. ____ g/210L Time _____ ☐ a.m. ☐ p.m.
3. ____ g/210L Time _____ ☐ a.m. ☐ p.m.
4. ____ g/210L Time _____ ☐ a.m. ☐ p.m.

BREATH OPERATOR: OFFICER CASTRO #905
MAINTENANCE TECHNICIAN: OFFICER CASTRO #905

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED
ATTITUDE: COOPERATIVE
CLOTHING: GREEN SHIRT, GRAY SHORTS, WHITE SHOES
MEDICAL CONDITIONS: UNKNOWN
MEDICATIONS: UNKNOWN
OTHER:

COMMENTS:

- DEF REFUSED TO PROVIDE BREATH SAMPLE
- IMPLIED CONSENT WAS READ
- DEF REFUSED TO PROVIDE BREATH SAMPLE AGAIN
- MIRANDA WAS READ
- DEF REFUSED TO COMPLETE Q&As

CASE #: 19-057347 **DEFENDANT:** BREEN, BLAIR WILLIAM

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.

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.

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.

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

I am OFFICER CASTRO #905 of the Boynton Beach Police Department

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.

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 statements can and will be used against you in a court of law.**

Suspect's Signature: Read on Video

CASE #: 19-057347 **DEFENDANT:** BREEN, BLAIR WILLIAM

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.

Where you operating a motor vehicle at the time of the stop/Accident? **REFUSED**
Where were you going? _____
What Street or Highway were you on? _____
What was you direction of travel? _____
Where did you start from? _____
What time did you start? _____
What time is it now? _____
What is today's date? _____
What day of the week is it? _____
What City and County 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 have you been drinking? _____
How much? _____
With whom? _____
When did you have your first drink? _____
When did you have your last drink? _____
Can you feel the effects of the alcohol? _____
Are you under the influence? _____
Have you consumed any alcohol since the stop/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? _____
Where 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 you eyes that are not corrected by glasses? _____
Do you take insulin? _____ If so, when was your last injection? _____
Have you ever gad a driver's license in any other state? _____
Where? _____
Interviewer: _____

CASE #: 19-057347 **DEFENDANT:** BREEN, BLAIR WILLIAM

Arresting Officer: CASTRO #905
Address: 100 E. Boynton Beach Boulevard Boynton Beach, Fl. 33435
Phone Numbers: Home: ______ **Work:** (561) 742-6100

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: ______

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: ______

FLORIDA DEPARTMENT OF LAW ENFORCEMENT
ALCOHOL TESTING PROGRAM
BREATH ALCOHOL TEST AFFIDAVIT

Instrument Type: Intoxilyzer 8000
Instrument Registered To: BOYNTON BEACH PD
Instrument Serial Number: 80-001190 Software: 8100.27
Date of Test: 10/12/2019

Date of Last Agency Inspection: 09/27/2019
Observation Period Began: 00:20
Subject's Name: BLAIR W BREEN DOB: 08/28/1983 Sex: M

The subject was observed for at least twenty-minutes prior to the administration of the breath test to ensure that the subject did not take anything orally and did not regurgitate.

Results:

Test	g/210L	Time
Diagnostics Check	OK	00:45
Air Blank	0.000	00:46
Control Test	0.078	00:46
Air Blank	0.000	00:47
Subject Sample #1	REF*	00:47
Air Blank	0.000	00:47
Control Test	0.078	00:48
Air Blank	0.000	00:48
Diagnostics Check	OK	00:48

*Subject Test Refused

Cylinder Lot: 684131
Exp: 01/23/2020

State of Florida, County of Palm Beach,

Personally appeared before me the undersigned authority, who (✓ is personally known to me or (__) produced _____ as identification, and who after being placed under oath, states:

I DENNIS CASTRO, hold a valid Breath Test Operator permit issued by the Florida Department of Law Enforcement, I administered the above breath test to the subject named above in accordance with Chapter 11D-8, Florida Administrative Code, and this form is a true and accurate report of that breath test.

Breath Test Operator: _____ 906 Date: 10/12/19
Signature

Sworn to (or affirmed) before me this 12 day of October, 2019

_____ Samantha Palmer
Signature of Notary Public-State of Florida Printed Name of Notary Public-State of Florida

Note: Pursuant to section 117.10, Florida Statutes, law enforcement officers, correctional officers, traffic accident investigation officers and traffic infraction enforcement officers are notaries public when engaged in the performance of official duties. In accordance with section 316.1934(5), F.S., this completed form is admissible without further authentication and is presumptive proof of the results herein. To be used in accordance with Section 316.1934(5), F.S., and in administrative proceedings pursuant to 322.2615, F.S.

FDLE/ATP FORM 38 - MARCH 2004, Ref. 11D-8.007

Notary Public State of Florida
Samantha Palmer
My Commission GG 163762
Expires 10/28/2022

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

I, **OFFICER CASTRO #905** , a duly certified Law Enforcement Officer or Correctional Officer,
(Name of Officer reading Implied Consent Warning)

am a member of **BOYNTON BEACH POLICE DEPARTMENT** , and I do swear
(Name of law enforcement agency)

or affirm that on or about the **12** day of **OCTOBER** , 20 **19** , at **0008** ☐ P.M ☑ A.M.

DRIVER **BLAIR** **WILLIAM** **BREEN** ,
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# **B650079833080** , state of **FLORIDA** , was placed under lawful arrest for

the offense of **DUI** by **OFFICER CASTRO #905** and
(Name of Arresting Officer)

issued Citation # AC85YXE .

That on or about the **12** day of **OCTOBER** , 20 **19** , at **0047** ☐ 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.

905
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
Samantha Palmer
My Commission GG 233782
Expires 10/28/2022

(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before me this 12 day of Oct. , 20 19 ,

by **OFFICER CASTRO #905**

who is personally known to me or who has produced _____ 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)

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.	3
	☐	(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	☐	539.001 FS	Other: All records relating to pawnbroker transactions.	
	☐	119.0712(2)	Other: Personal information contained within a motor vehicle record	

REVIEW COMPLETED BY

Booking Number: 2019033252	**Date:** 10/13/2019
	Specialist Name/ID: howardt7185

19-057347

FLORIDA DUI UNIFORM TRAFFIC CITATION AC85YXE

COUNTY OF: PALM BEACH | (1) F.H.P ☐ (2) P.D ☑ (3) S.O ☐ (4) OTHER ☐
CITY (IF APPLICABLE): BOYNTON BEACH | AGENCY NAME: BOYNTON BEACH POLICE DEPARTMENT | AGENCY #: 0634

IN THE COURT DESIGNATED BELOW THE UNDERSIGNED CERTIFIES THAT HE/SHE HAS JUST AND REASONABLE GROUNDS TO BELIEVE AND DOES BELIEVE THAT ON — ABSTRACT OF COURT RECORD FOR STATE LICENSING AUTHORITY REPORT OF DISPOSITION

DAY OF WEEK	MONTH	DAY	YEAR	TIME
SAT	10	12	2019	12:08:00 AM

NAME (PRINT) FIRST	MIDDLE	LAST
BLAIR	WILLIAM	BREEN

STREET: 38 W COCONUT DR — IF DIFFERENT THAN ONE ON DRIVER LICENSE "A" HERE ☐

CITY: LAKE WORTH | STATE: FL | ZIP CODE: 33467

TELEPHONE NUMBER	DATE OF BIRTH MO	DAY	YR	RACE	SEX	HGT
	8	28	1983	W	M	5' 10"

DRIVER LICENSE NUMBER: B 6 5 0 0 7 9 8 3 3 0 8 0 | STATE: FL | CLASS: E | CDL LICENSE: Y ☑ N ☐ | YR LICENSE EXP: 2026 | COMMERCIAL VEHICLE: YES ☐ NO ☑

YR VEHICLE	MAKE	STYLE	COLOR	PLACARDED HAZARDOUS MATERIAL
2014	CHEV	4D	GRY	YES ☐ NO ☑

VEHICLE LICENSE NO	TRAILER TAG NO	STATE	YEAR TAG EXP	15 PASSENGERS
EPHQ24		FL	2020	YES ☐ NO ☑

UPON A PUBLIC STREET OR HIGHWAY, OR OTHER LOCATION, NAMELY: N CR 807 AT GATEWAY BLVD — MOTORCYCLE: YES ☐ NO ☑ — COMMERCIAL CITATION: YES ☐ NO ☑

FT _____ MILES _____ N ☐ S ☐ E ☐ W ☐ OF NODE _____

DID UNLAWFULLY COMMIT THE OFFENSE OF DRIVING UNDER THE INFLUENCE OF ALCOHOLIC BEVERAGES, CHEMICAL OR CONTROLLED SUBSTANCES; DID DRIVE OR WAS IN ACTUAL PHYSICAL CONTROL OF A VEHICLE, WHILE UNDER THE INFLUENCE OF AN ALCOHOLIC BEVERAGE/CHEMICAL SUBSTANCE/CONTROLLED SUBSTANCE TO THE EXTENT NORMAL FACULTIES WERE IMPAIRED, OR WITH A BLOOD OR BREATH ALCOHOL LEVEL OF .08 OR ABOVE OF _____

COMMENTS PERTAINING TO OFFENSE (Only one offense each citation) — REVIEW: YES ☑ NO ☐

D.U.I. - DRIVING UNDER THE INFLUENCE(MISDEMEANO

AGGRAVATING DRIVER: ☐ — PREVIOUS 5 YEARS: YES ☐ NO ☑ — STATE STATUTE: SECTION 316.193 — SUB SECTION (1)

CRASH: YES ☐ NO ☑ — DAMAGE TO OTHER PROPERTY: YES $ _____ NO ☑ — INJURY TO ANOTHER: YES ☐ NO ☑ — PERSON BODILY INJURY TO ANOTHER: YES ☑ NO ☐ — FATAL: YES ☐ NO ☑

THIS IS A CRIMINAL VIOLATION, COURT APPEARANCE REQUIRED, AS INDICATED BELOW.

11/18/2019 — COURT DATE — 08:30 AM — TIME — AC85YXE

SOUTH COUNTY COURT HOUSE — COURT AND LOCATION

200 WEST ATLANTIC AVE — DELRAY BEACH — 33444 — FL

ARREST DELIVERED TO: PBCJ — DATE: 10/12/2019

I AGREE AND PROMISE TO COMPLY AND ANSWER TO THE CHARGES AND INSTRUCTIONS SPECIFIED IN THIS CITATION. WILLFUL REFUSAL TO ACCEPT AND SIGN THE CITATION MAY RESULT IN ARREST. I UNDERSTAND MY SIGNATURE IS NOT AN ADMISSION OF GUILT OR WAIVER OF RIGHTS. IF YOU NEED REASONABLE FACILITY ACCOMMODATIONS TO COMPLY WITH THIS CITATION, CONTACT THE CLERK OF THE COURT.

X _____ SIGNATURE OF VIOLATOR

EFFECTIVE IMMEDIATELY, YOUR DRIVING PRIVILEGE IS SUSPENDED/DISQUALIFIED FOR:

☐ DRIVING WITH AN UNLAWFUL BLOOD OR BREATH ALCOHOL LEVEL. THIS SUSPENSION IS FOR A PERIOD OF SIX MONTHS IF THIS IS THE FIRST VIOLATION OR ONE YEAR IF PREVIOUSLY SUSPENDED FOR DRIVING WITH AN UNLAWFUL BLOOD OR BREATH ALCOHOL LEVEL. IF YOU HOLD A CDL OR YOU ARE OPERATING A CMV, YOUR COMMERCIAL DRIVER LICENSE/PRIVILEGE WILL ALSO BE DISQUALIFIED FOR ONE YEAR FOR THE FIRST OFFENSE OR PERMANENTLY DISQUALIFIED FOR A SUBSEQUENT OFFENSE.

☑ REFUSAL TO SUBMIT TO LAWFUL BREATH BLOOD OR URINE TEST SECTION 322.2615, F. S. THIS SUSPENSION IS FOR A PERIOD OF ONE YEAR IF THIS IS A FIRST REFUSAL OR 18 MONTHS IF PREVIOUSLY SUSPENDED FOR THIS OFFENSE. IF YOU HOLD A CDL OR YOU ARE OPERATING A CMV, YOUR COMMERCIAL DRIVER LICENSE/PRIVILEGE WILL ALSO BE DISQUALIFIED FOR A PERIOD OF ONE YEAR FOR A FIRST REFUSAL OR PERMANENTLY DISQUALIFIED FOR A SUBSEQUENT REFUSAL.

LICENSE SURRENDERED? ☑ YES ☐ NO — REASON _____

ELIGIBLE FOR PERMIT? ☑ YES ☐ NO — REASON _____

UNLESS INELIGIBLE, THIS CITATION SHALL SERVE AS A TEMPORARY DRIVER LICENSE AND WILL EXPIRE AT MIDNIGHT ON THE 10TH DAY FOLLOWING THE DATE OF SUSPENSION.

AT THE _____ BUREAU OF ADMINISTRATIVE REVIEWS OFFICE, YOU MAY REQUEST, WITHIN 10 DAYS AFTER THE DATE OF SUSPENSION, A REVIEW TO DETERMINE ELIGIBILITY FOR A RESTRICTED LICENSE IF THIS IS YOUR FIRST DUI RELATED OFFENSE BY THE DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES. SEE REVERSE SIDE.

D. Castro — 905 — 905 — DUI TRAFFIC

RANK-SIGNATURE OF OFFICER — BADGE NO — ID NO — TROOP UNIT

D — CASTRO

HSMV 75804 (Rev 10/14) ELECTRONIC REPORT

FLORIDA DUI
UNIFORM TRAFFIC CITATION REPORT OF DISPOSITION
ABSTRACT OF COURT RECORD FOR
DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES
MUST BE REPORTED WITHIN 10 DAYS AFTER FINAL ADJUDICATION

I. COURT ACTION

DEFENDANT'S PLEA: (CHECK ONE) ☐ GUILTY ☐ NOT GUILTY ☐ NOLO CONTENDERE

TRIAL: ☐ 1. JURY ☐ 2. NON-JURY

☐ 1. DEFENDANT REPRESENTED BY COUNSEL ☐ 2. DEFENDANT WAIVED COUNSEL

TOTAL FINE AMOUNT _____ TOTAL COURT COSTS _____

VERDICT

CHECK ONLY ONE:

☐ 1 GUILTY
☐ 6 ESTREATED OR FEITED BOND
☐ 9 ADJUDGED DELINQENT (JUVENILE ONLY)
☐ 2 NOT GUILTY
☐ 3 DISMISSED
☐ 8 NOLLE PROSEQUI
☐ A ADJUDICATION WITHHELD BY JUDGE
☐ B OTHER _____ EXPLAIN

SENTENCE

CHECK ONLY WHEN VERDICT IS GUILTY OR ADJUDICATION WITHHELD BY JUDGE.

☐ 1 SERVED TIME
☐ 2 SENTENCE WITHHELD, DEFERRED OR SUSPENDED
☐ 3 PROBATION
☐ 4 TRAFFIC SCHOOL
☐ 5 FINE AND/OR COSTS
☐ 6 LICENSE ACTION ONLY
EXPLAIN BELOW
☐ 7 OTHER _____ EXPLAIN
☐ 8 COMMUNITY SERVICE
☐ 9 INCARCERATION (AFTER DISPOSITION)

II.

IF ORIGINAL CHARGE IS CHANGED, ENTER CHARGE OF WHICH VIOLATOR WAS CONVICTED. DO NOT MAKE ANY ADDITIONAL CHANGES ON FRONT OR BACK OF THIS CITATION.

ORIGINAL DUI CHARGE CHANGED PER STATE ATTORNEY ☐ YES ☐ NO

III. LOCATION

COUNTY _____

CITY _____ LOCATION OF TRIAL COURT

PRESIDING JUDGE _____

TYPE OF COURT (CHECK BOX)
☐ 1 COUNTY
☐ 2 CIRCUIT

IV. LICENSE ACTION

☐ COURT RECOMMENDS THE DEPARTMENT SUSPEND DRIVING PRIVILEGE

LENGTH _____

VIOLATIONS CARRYING MANDATORY REVOCATIONS

COURT MAY SPECIFY LENGTH _____ OR CHECK ONE:

☐ MINIMUM ☐ MAXIMUM

☐ LICENSE PICKED UP BY COURT AND ATTACHED TO THIS REPORT AS REQUIRED BY F.S. 322.25.

☐ VIOLATOR'S ABILITY TO DRIVE IS QUESTIONABLE AND COURT RECOMMENDS RE-EXAMINATION.

V. THE DATES BELOW MUST BE ENTERED ON ALL DISPOSITIONS

FINAL ADJUDICATION OR ACTION ON _____ DATE

SUBMITTED TO DHSMV ON _____ DATE

SIGNATURE OF INDIVIDUAL SUBMITTING REPORT