2019CT023646AMB

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

OBTS Number:

ADMINISTRATIVE

Agency ORI Number	Agency Name	Agency Report Number (N.T.A.'s only)
FLO 502600	PALM BEACH GARDENS POLICE DEPARTMENT	78- 19007569

ChargeType: Check as many as apply. ☐ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

Weapon Seized / Type (1. Yes 2. No): N | Multiple Clearance Indicator:

Location of Arrest (Including Name of Business): N MILITARY TRAIL/VICTORIA FALLS BLVD, PBG, FL

Location of Offense (Business Name, Address): N MILITARY TRAIL/VICTORIA FALLS BLVD, PBG, FL

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle KAUFF'S TOWING & RECOVERY
12/25/2019	00:52					4301 East Avenue, West Palm Beach, FL 33405

DEFENDANT

Name (Last, First, Middle): RENICK, BONNY, JEAN | Alias (Name, DOB, Soc. Sec. #, Etc.):

Race (W - White I - American Indian B - Black O- Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	F	04/20/1958	5'6	125	GRN	BLO	LIGHT	SMALL

Scars, Marks, Tatoos, Unique Physcal Features (Location, Type, Description): TAT L/L HIP, RIGHT ANKLE

Marital Status: SINGLE | Religion: CHRISTIAN | Indication of: Alcohol Influence: Y ☒ N ☐ Unk. ☐ | Drug Influence: Y ☐ N ☒ Unk. ☐

	Street, Apt. Number	City	State	Zip	Phone
Local Address	149 WENTWORTH CT	JUPITER	FL	33458	(631) 834-0326
Permanent Address	149 WENTWORTH CT	JUPITER	FL	33458	( )
Business Address (Name, Street)					( )

Residence Type (1. City 2. County 3. Florida 4. Out of State): 2

Address Source: VERBAL

Occupation: JEWELRY STORE MANAGER

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
R520070586400 FL	[redacted]		COCOA BEACH, FL	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 ( )

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 provided by ☐ defendant and / or ☐ 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. ☐ 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. Barbiturate C. Cocaine E. Heroin H. Hallucinogen M. Marijuana O. Opium/Deriv. P. Paraphernalia/ Equipment S. Synthetics U. Unknown Z. Other

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
DRIVING UNDER THE INFLUENCE	1	☐Y ☒N	316.193(1)	

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

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N		
		☐Y ☐N		
		☐Y ☐N		

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

NOTICE TO APPEAR

Location (Court, Room Number, Address): NORTH COUNTY COURTHOUSE, 3188 PGA BOULEVARD, PALM BEACH GARDENS, FL 33410 - PH: (561) 662-6700

Court Date and Time: Month JANUARY Day 29 Year 2020 Time 10:00 AM X 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): B J Renick | Date Signed: 12/25/2019

ADMIN

HOLD for other Agency Name: | Signature of Arresting Officer: X [signature] 514 | Name Verification (Printed by Arrestee)

☐ Dangerous ☐ Suicidal ☐ Resisted Arrest ☐ Other: | Name of Arresting Officer (Print): Ofc. ANDREW FLINK | I.D. #: 514

Intake Deputy	I.D. #	Pouch #	Transporting Officer	ID #	Agency	Witness here if subject signed with an -X"	PAGE
[signature]			ANDREW FLINK	514	PBGPD		1 OF 1

SCANNED DEC 25 2019

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

0513560 1639

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 25TH DAY OF DECEMBER 20 19, AT 0034 ✓ AM PM

SUBJECT: RENICK, BONNY, JEAN CASE NUMBER: 19007569

AGENCY: PALM BEACH GARDENS POLICE DEPT. ARRESTING OFFICER: Ofc. ANDREW FLINK 514

PERSONAL CONTACT

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

Ofc Zuccarelli 518 observed the vehicle driving erratically, drifting between lanes and almost striking a concrete curb. I made contact with Bonny Renick while she was still in the driver seat of her vehicle, while it was still on and running.

OBSERVATION OF DRIVER:

Renick had bloodshot watery eyes, slurred speech, flushed red face and the odor of an unknown alcoholic beverage emanating from her breath.

DRIVER'S STATEMENTS:

Renick said she was coming her bosses house and that she had consumed a glass of wine earlier in the evening at "Capital Grill".

ODORS:

Unknown alcoholic beverage.

GENERAL OBSERVATIONS

SPEECH: **Slurred**

ATTITUDE: **Compliant**

CLOTHING: **Black jacket, white shirt, black pants, black shoes**

MEDICAL/OTHER: **None stated**

STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 25th day of December 20 19 by Ofc. ANDREW FLINK

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

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

Notary Public State of Florida
Thomas H Leahey
My Commission GG 347108
Expires 08/20/2023

SUBJECT: RENICK, BONNY, JEAN CASE NUMBER 19007569

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- [x] LT EYE-LACK OF SMOOTH PURSUIT
- [x] RT EYE-LACK OF SMOOTH PURSUIT
- [x] LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
- [x] RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
- [x] LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES
- [ ] RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

Other Observations:

Vertical Gaze Nystagmus in left eye.

WALK & TURN:

During the exercise, Renick missed heel-to-toe during the first set of nine steps. Renick then conducted an improper turnaround and immediately lost her balance, stepped off the line and raised her arms more than six inches from her sides. Renick took 11 steps rather than nine as instructed and missed heel-to-toe on each of the return steps.

ONE LEG STAND:

During the exercise, Renick did not count aloud. Renick also raised her right foot more than six inches off the ground. Renick was swaying for the duration, took a short hop and placed her foot down four times, prior to being told to do so.

ROMBERG ALPHABET:

Not performed

FINGER TO NOSE:

Not performed

BREATH TEST RESULTS: 1) .129 | 2) .123 | 3) | 4)

STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 25th day of December 2019 by Ofc. ANDREW FLINK

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

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

Notary Public State of Florida
Thomas H Leahey
My Commission GG 347108
Expires 06/20/2023

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

~~Instrument~~ Type: Intoxilyzer 8000
Instrument Registered To: PALM BEACH CO SO
Instrument Serial Number: 80-006239 Software: 8100.27
Date of Test: 12/25/2019

Date of Last Agency Inspection: 12/06/2019
Observation Period Began: 01:26
Subject's Name: BONNY J RENICK DOB: 04/20/1958 Sex: F

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	01:50
Air Blank	0.000	01:51
Control Test	0.080	01:51
Air Blank	0.000	01:52
Subject Sample #1	0.129	01:54
Air Blank	0.000	01:54
Air Blank	0.000	01:56
Subject Sample #2	0.123	01:57
Air Blank	0.000	01:57
Control Test	0.079	01:58
Air Blank	0.000	01:58
Diagnostics Check	OK	01:58

Cylinder Lot: 17919080A1
Exp: 08/05/2021

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 THOMAS H LEAHEY, 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: T. Leahy Date: 12/25/19
Signature

Sworn to (or affirmed) before me this 25th day of December, 2019

Signature of Notary Public-State of Florida

Dale A Flink #514 PBG
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

PALM BEACH COUNTY SHERIFF'S OFFICE
DUI TESTING FACILITY
INFORMATION SHEET

PBSO CASE # 19-152253 PBSO ZONE 3-13

AGENCY CASE # 19007569 CRASH CASE #

TIME OF STOP/CRASH 0034 DATE 12/25/2019 DAY WEDNESDAY

SUBJECT'S NAME RENICK (LAST) BONNY (FIRST) JEAN (MID) RACE W SEX F

HGT 5'6 WGT DOB 04/20/1958

LOCATION N MILITARY TRAIL/VICTORIA FALLS BLVD, PBG, FL

ARRESTING OFFICER'S NAME & ID Ofc. ANDREW FLINK 514 AGENCY PBGPD

DIVISION: ROAD PATROL

NOTIFIED BY COMMO Yes

ARRIVAL AT FACILITY 01:26

ARREST TIME 00:52

BREATH RESULTS:

1) .129
2) .123
3) NA
4) NA

BREATH TEST OPERATOR: 19183

TESTING FACILITY TASK REPORT

AGENCY: PSO

SUBJECT: Parrish Bailey-I CASE NUMBER: 19-152253

DATE: 12/25/19 VIDEO TAPE NUMBER: N/A

BEGINNING TIME: 01:48 ENDING TIME: 02:02

BREATH TESTS RESULTS: 1) .129 TIME 01:54 A.M./P.M. 2) .123 TIME 01:57 A.M./P.M.

3) N/A TIME — A.M./P.M. 4) N/A TIME — A.M./P.M.

BREATH OPERATOR: T Lackey #19183

MAINTENANCE TECHNICIAN: J Kavlecka #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: thick rapid

ATTITUDE: talkative tight

CLOTHING: blue pants, white shirt, black jacket, black shoes

MEDICAL CONDITIONS: none

MEDICATIONS: none

OTHER: eyes glassy + bloodshot
odor of unknown alcoholic beverage on breath

COMMENTS: arrived at center - A/O conducted 20 minute observation period at 01:26 hrs

A agreed to perform breath test.

A/O read rights + A stated she understood rights

A invoked right to counsel

To read breath test results + A stated she understood breath test results.

SUBJECT: Penick, Bonny J CASE NUMBER: 19-152253

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: OE Fink 514

SUBJECT: Renck, Bonny J CASE NUMBER: H-152253

IMPLIED CONSENT FOR DUI IN A MOTOR VEHICLE

NOTE: READ ONLY THE PARAGRAPH APPLICABLE TO THE TYPE OF TEST YOU ARE REQUESTING.

I am now requesting that you submit to a lawful test of your BREATH for the purpose of determining its alcohol content.

-OR-

I am now requesting that you submit to a lawful test of your URINE for the purpose of detecting the presence of chemical or controlled substances.

-OR-

I am now requesting that you submit to a lawful test of your BLOOD for the purpose of detecting its alcohol content and the presence of chemical or controlled substances.

NOTE: READ ONLY IF THE SUBJECT DOES NOT COMPLY WITH YOUR REQUEST.

I am _____ of the _____.

If you fail to submit to the test I have requested of you, your privilege to operate a motor vehicle will be suspended for a period of one (1) year for a first refusal, or eighteen (18) months if your privilege has been previously suspended as a result of a refusal to submit to a lawful test of your breath, urine or blood. Additionally, if you refuse to submit to the test I have requested of you and if your driving privilege has been previously suspended for a prior refusal to submit to a lawful test of your breath, urine or blood, you will be committing a misdemeanor. Refusal to submit to the test I have requested of you is admissible into evidence in any criminal proceeding.

SUBJECT'S SIGNATURE: (X)_____

CONSTITUTIONAL WARNINGS

I AM REQUIRED TO WARN YOU BEFORE YOU MAKE ANY STATEMENTS THAT YOU HAVE THE FOLLOWING RIGHTS:

1. You have the right to remain silent and not answer any questions.
2. Any statement must be freely and voluntarily given.
3. You have the right to the presence of a lawyer of your choice before you make any statement and during any questioning.
4. If you cannot afford a lawyer, you are entitled to the presence of a court appointed lawyer before you make any statements and during any questioning.
5. If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent.
6. I can make no threats or promises to induce you to make a statement. This must be of your own free will.
7. Any statement can and will be used against you in a court of law.

SUSPECT'S SIGNATURE: (X) Renck on Renova

WHITE - STATE ATTY. YELLOW - DHSMV PINK - CENTRAL RECORDS GOLD - JAIL

PBSO #0129B REV. 06/11

PALM BEACH COUNTY
SHERIFF'S OFFICE
Florida State Statute Exemption Sheet

Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	☐	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	☐	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	☐	119.071(4)(c)	Undercover personnel.	
	☐	119.071(2)(f)	Confidential informants (CIs).	
	☐	119.071(2)(e)	Confession.	
Public Info. Exemptions	☐	985.04(1)	Juvenile offender records.	
	☐	119.071(h)(i)	Assets of a crime victim.	
	☐	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	☐	394.4615(7)	Mental health information.	
	☐	119.071(4)(d)(2)(a)	Home address, telephone, Social Security number, date of birth, or photos of active/former LE personnel, spouses, and children.	
Florida Rules of Judicial Administration 2.420 (Rule of 23)	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	☐	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	☐			
	☐			
	☐			
	☐			
	☐			
Other	☐	782.04 (FS)	Other: Witness	
	☐	415.107 (1)	Other: In order to protect the rights of the individual or other persons responsible for the welfare of a vulnerable adult, all records concerning reports of abuse, neglect, or exploitation of the vulnerable adult.	

REVIEW COMPLETED BY

Booking Number: 2019040913	**Date:** 12/25/2019
	Specialist Name/ID: M. Tooks #8557

FLINK
(514)

19007569

FLORIDA DUI UNIFORM TRAFFIC CITATION **A56H62E**

COUNTY OF: PALM BEACH 06	☐ (1) F.H.P. ☒ (2) P.D. ☐ (3) S.O. ☐ (4) OTHER
CITY (IF APPLICABLE): PALM BEACH GARDENS	AGENCY NAME: PALM BEACH GARDENS; AGENCY #: 78

IN THE COURT DESIGNATED BELOW THE UNDERSIGNED CERTIFIES THAT HE/SHE HAS JUST AND REASONABLE GROUNDS TO BELIEVE AND DOES BELIEVE THAT ON

COMPLAINT (RETAINED BY COURT)

DAY OF WEEK	MONTH	DAY	YEAR	TIME
WEDNESDAY	12	25	2019	12:52 ☒ A.M. ☐ P.M.

NAME (PRINT) FIRST	MIDDLE	LAST
BONNY	JEAN	RENICK

STREET: 149 WENTWORTH CT (IF DIFFERENT THAN ONE ON DRIVER LICENSE "X" HERE ▶)

CITY	STATE	ZIP CODE
JUPITER	FL	33458

TELEPHONE NUMBER	DATE OF BIRTH MO	DAY	YR	RACE	SEX	HGT
	04	20	1958	W	F	506

DRIVER LICENSE NUMBER: R520070586400

STATE	CLASS	CDL LICENSE	YR LICENSE EXP.	COMMERCIAL VEHICLE
FL	E	☐ Y ☒ N	2028	☐ YES ☒ NO

YR VEHICLE	MAKE	STYLE	COLOR	PLACARDED HAZARDOUS MATERIAL
2017	FORD	CV	WHI	☐ YES ☒ NO

VEHICLE LICENSE NO.	TRAILER TAG NO.	STATE	YEAR TAG EXPIRES	≥ 16 PASSENGERS
G02GRL		FL	2020	☐ YES ☒ NO

UPON A PUBLIC STREET OR HIGHWAY, OR OTHER LOCATION, NAMELY: 12000 N MILITARY TRL (Block BLK), PALM BEACH GARDENS

MOTORCYCLE: ☐ YES ☒ NO
COMPANION CITATION(S): ☐ 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 .129

COMMENTS PERTAINING TO OFFENSE (Only one offense each citation): DUI - DRIVING UNDER INFLUENCE | Driving Under

RE-EXAM: ☐ YES ☒ NO

☐ AGGRESSIVE DRIVER — PASSENGER < 18 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 — SERIOUS BODILY INJURY TO ANOTHER: ☐ YES ☒ NO — FATAL: ☐ YES ☒ NO

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

COURT DATE: 01/29/2020 TIME: 10:00 AM

A56H62E

COURT AND LOCATION: NORTH COUNTY GOVERNMENT CENTER
3188 PGA Boulevard PBG, FL 33410

ARREST DELIVERED TO: PBSO MAIN JAIL DATE: 12/25/2019

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: OVER .08
ELIGIBLE FOR PERMIT? ☒ YES ☐ NO REASON: VALID DL

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

SIGNATURE OF OFFICER	BADGE NO.	ID NO.	TROOP UNIT
	514		

HSMV 75904 (Rev. 10/14)

COMPLAINT

CASE NO. ________ DOCKET NO. ________ PAGE NO. ________

DATE	COURT ACTION AND OTHER ORDERS
	BAIL FIXED AT $ ______ OR CASH DEPOSIT OF $ ______ ______ SIGNATURE OF PERSON GIVING BAIL ______ SIGNATURE OF PERSON TAKING BAIL
	FINE IN THE AMOUNT OF $ ______ RECEIVED AS REQUIRED BY COURT SCHEDULE. ______ SIGNATURE OF CLERK
	CONTINUANCE TO ______ REASON ______
	CONTINUANCE TO ______ REASON ______
	BOND ESTREATED ______
	WARRANT ISSUED ______
	VIOLATOR FAILED TO APPEAR-DRIVER LICENSE SUSPENDED
	VIOLATOR ARRAIGNED ON ______ (DATE) PLEA: ______ FINDING: ______ ADJUDICATION: ______ SENTENCE: FINE ______ COST ______ JAILED ______ DAYS DRIVER IMPROVEMENT SCHOOL ______ OTHER ______ DRIVER LICENSE SUSPENDED OR REVOKED FOR ______ DAYS RECOMMEND DRIVER LICENSE SUSPENSION FOR ______ DAYS RECOMMEND RE-TEST ______ ______ SIGNATURE OF JUDGE
	TESTIMONY - JUDGE'S NOTES (OR OTHER COURT ORDERS):
	APPEAL BOND OF $ ______
	VIOLATOR'S FINGERPRINT WHEN APPLICABLE →