

UJL1222

ARREST / NOTICE TO APPEAR  
Juvenile Referral Report

18CT16064 1654  
1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias 1 Juvenile

OBTS Number	Agency ORI Number <b>FLO 500000</b>		Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>		Agency Report Number (N.T.A.'s only) <b>06-18118082</b>	
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 1. Yes 2. No		Multiple Clearance Indicator
Location of Arrest (Including Name of Business) <b>Okeechobee Blvd east of SR7 West Palm Beach FL 33411</b>			Location of Offense (Business Name, Address) <b>Okeechobee Blvd @ SR7 West Palm Beach FL 33411</b>			
Date of Arrest <b>09/08/2018</b>	Time of Arrest <b>02:03</b>	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle

Name (Last, First, Middle) <b>Samial Chantal Sita</b>		Alias (Name, DOB, Soc. Sec. #, Etc.)						
Race W - White I - American Indian B - Black O - Oriental/Asian <b>W</b>	Sex <b>F</b>	Date of Birth <b>10/07/1990</b>	Height <b>5'7</b>	Weight <b>150</b>	Eye Color <b>Bru</b>	Hair Color <b>Blk</b>	Complexion <b>Med</b>	Build <b>Med</b>
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)						Martial Status <b>Single</b>	Religion <b>Unk</b>	Indication of: Alcohol Influence <input type="checkbox"/> Drug Influence <input type="checkbox"/>
Local Address (Street, Apt. Number) <b>15808 85th Rd N</b>		(City) <b>Loxahatchee FL</b>	(State) <b>FL</b>	(Zip) <b>33470</b>	Phone	Residence Type 1. City 2. County 3. Florida 4. Out of State <b>2</b>		
Permanent Address (Street, Apt. Number)		(City)	(State)	(Zip)	Phone	Address Source <b>FL DL</b>		
Business Address (Name, Street)		(City)	(State)	(Zip)	Phone	Occupation <b>Cust Service</b>		
DL Number, State <b>S544117908670</b>	Soc. Sec. Number	INS Number	Place of Birth (City, State) <b>Transbago, Canada</b>		Citizenship <b>US</b>			

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

<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other	Address (Street, Apt. Number)		(City)	(State)	(Zip)	Residence Phone	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 <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				

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. Synthetica	U. Unknown Z. Other
Charge Description <b>DUI</b>		Counts <b>1</b>	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number <b>316.193(1)</b>		Violation of ORD #				
Drug Activity <b>N</b>	Drug Type <b>N</b>	Amount / Unit	Offense # <b>18118082</b>	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				

Location (Court Room Number, Address) <b>PALM BEACH COUNTY COURTHOUSE CRIMINAL JUSTICE COMPLEX, 3228 GUN CLUB RD, WEST PALM BEACH, FL 33408 - PH: (561) 355-2996</b>					
Court Date and Time Month <b>October</b> Day <b>4</b> Year <b>2018</b> Time <b>08:30</b> 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)				Date Signed <b>09/08/2018</b>	

HOLD for other Agency Name	Signature of Arresting Officer <b>J. Schneider</b>	Name Verification (Printed by Arrestee) <b>SEP 8 AM 3:59</b>
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal	<input type="checkbox"/> Restricted Arrest <input type="checkbox"/> Other	(PRINT)
Name of Arresting Officer (Print) <b>Inv. J. Schneider</b>	ID # <b>8501</b>	PAGE <b>1 of 1</b>
Transporting Officer <b>Inv. J. Schneider</b>	ID # <b>8501</b>	Agency <b>PBSO</b>
Witness here if subject is not a minor		

# D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 8 DAY OF September 20 18 AT 01:40  AM  PM  
SUBJECT: Samlal Chantal Sita CASE NUMBER: 18118082

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: Inv. J. Schneider

## PERSONAL CONTACT

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

I was traveling west on Okeechobee Blvd when a white Saturn SUV passed me two lanes on my right. I observed the vehicle swerving wildly left to right in and out of its lane and over the shoulder markings. I activated my in car radar and heard a audio doppler tone in the mid sixty mile per hour range. I visually estimated the speed to be 65 miles per hour and upon looking at the display found a true speed reading of 65 miles per hour. I continued to watch the vehicle travel west and its driving pattern continued. Becoming concerned the driver was impaired I activated my emergency lights and performed a traffic stop just east of State Road 7.

### OBSERVATION OF DRIVER:

As I arrived at the driver's side windows I immediately noted that the driver had red, bloodshot and glossy eyes. She had a blue wristband on her right wrist and upon speaking I heard a distinct slur in her speech. While retrieving her vehicle documents and license her movements were slow, lethargic and uncoordinated.

### DRIVER'S STATEMENTS:

I'm sorry. When asked if she was sorry because she was drunk she stated yes.

### ODORS:

Distinct odor of a unknown alcoholic beverage.

## GENERAL OBSERVATIONS

SPEECH: Slurred

ATTITUDE: Cooperative and apologetic

CLOTHING: Blue shirt, blue jean pants, black boots

MEDICAL/OTHER: None

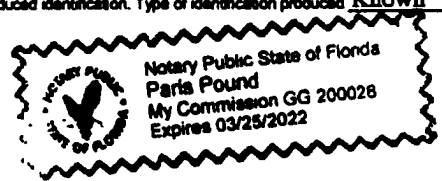
STATE OF FLORIDA  
COUNTY OF PALM BEACH

Inv. J. Schneider  
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 8 day of September 20 18 by Inv. J. Schneider

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

[Signature]  
Notary Public, Clerk of Court, Officer (F S S 117 10)



SCANNED  
SEP 12 2018

SUBJECT Samlal

Chantal

CASE NUMBER 18118082

**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:**

**Had to be reminded numerous times to keep her head still and follow the stimulus.**

**WALK & TURN:**

**Unable to maintain the instructional stance. Ultimately she separated her feet to stand while I was providing the instructions. While walking she failed to touch heel to toe on any occasion, took too many steps, turned improperly, and kept her arms raised. Returning she took too many steps, failed to touch heel to toe on any occasion and kept her arms raised.**

**ONE LEG STAND:**

**Distinct sway while standing stationary in the instructional position. While attempting this task she was unable to keep her foot elevated and began to apologize. She attempted this task numerous times however after multiple attempts she was unable to perform this task.**

**FINGER TO NOSE:**

**Distinct sway while standing stationary in the instructional position. Performing this task she missed the tip of her finger to the tip of her nose numerous times. She stumbled backwards at one point and had to reset herself.**

**ROMBERG ALPHABET:**

**Distinct sway while standing stationary in the instructional position. Performing this task she attempted to recite the alphabet backwards despite being advised to to perform this task starting with A and ending with Z.**

**BREATH TEST RESULTS: .259 .242**

STATE OF FLORIDA  
COUNTY OF PALM BEACH

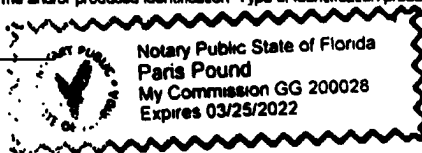
**Inv. J. Schneider**

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 8 day of September 2018 by Inv. J. Schneider

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

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



**SCANNED**  
**SEP 12 2018**



**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"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

**REVIEW COMPLETED BY**

Booking Number: 2018030154	Date: 09/09/2018
	Specialist Name/ID: AM/31562

**SCANNED**  
**SEP 12 2018**