

ARREST / NOTICE TO APPEAR

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

JUVENILE

OBTS Number _____

Agency ORI Number **0500200** Agency Name **Boca Raton Police Department** Agency Report Number (N.T.A.'s only) **3, 2 2018-000240**

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

If Weapon Seized _____ Enter Type **None/not Applicable** Multiple Clearance Indicator _____

Location of Arrest (Including Name of Business) **99 E CAMINO REAL** Location of Offense (Business Name, Address) **99 E CAMINO REAL, BOCA RATON, FL 33432**

Date of Arrest **01/06/2018** Time of Arrest **02:07** Booking Date **01/06/2018** Booking Time **02:17** Jail Date **01/06/2018** Jail Time **03:05** Location of Vehicle **EMERALD**

Name (Last, First, Middle) **NOVAK, CHELSEY** Alias: _____ Alias (Name, DOB, Soc. Sec. #, Etc.) _____

Race **W - White** Sex **F** Date of Birth **07/08/1992** Height **5'00** Weight **110** Eye Color **BROWN** Hair Color **BROWN** Complexion **LIGHT** Build **Small**

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) _____ Marital Status **S** Religion **JEWISH** Indication of Alcohol Influence Yes No Unk. Drug Influence Yes No Unk.

Local Address (Street, Apt. Number) (City) (State) (Zip) Phone **(305) 318-7721** Residence Type: 1. City 3. Florida 2. County 4. Out of State **3**

Permanent Address (Street, Apt. Number) (City) (State) (Zip) Phone **(305) 318-7721** Address Source **DEFENDANT**

Business Address (Name, Street) (City) (State) (Zip) Phone _____ Occupation **Trainer**

D/L Number, State **NI20100927480 / FL** Soc. Sec. Number _____ INS Number _____ Place of Birth (City, State) **MIAMI, FL, United** Citizenship **US**

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

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

Parent Other: _____ Name (Last, First, Middle) _____ Residence Phone _____

Legal Custodian _____

Address (Street, Apt. Number) (City) (State) (Zip) Business Phone _____

Notified by: (Name) _____ Date _____ Time _____

Released To: (Name) _____ Relationship _____ Date _____ Time _____

JUVENILE DISPOSITION: 1. Handled/Processed within Department and Released 2. TOT IAC 3. Incarcerated

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 355-2526) informed of any change of address.

Property Crime? Yes No Description of Property _____ Value of Property _____

Drug Activity: N. N/A, S. Sell, T. Traffic, P. Possess, R. Smuggle, D. Deliver, E. Use, K. Disperses/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. Synthetic, U. Unknown, Z. Other _____

Charge Description **DUI** Statute Violation Number **316.193(1)** Violation of ORD # _____

Drug Activity **N** Drug Type _____ Amount / Unit _____ Offense # **2018-000240** Counts **1** Domestic Violence Y N Warrant / Capias Number _____ Bond _____

Charge Description _____ Statute Violation Number _____ Violation of ORD # _____

Drug Activity _____ Drug Type _____ Amount / Unit _____ Offense # _____ Counts _____ Domestic Violence Y N Warrant / Capias Number _____ Bond _____

Charge Description _____ Statute Violation Number _____ Violation of ORD # _____

Drug Activity _____ Drug Type _____ Amount / Unit _____ Offense # _____ Counts _____ Domestic Violence Y N Warrant / Capias Number _____ Bond _____

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

Check which applies: Released O.R. Released to Parent/Guardian T.O.T. County Jail Posted Bond South County Mental Health

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

Transported By **Heron 806** Date Transported **1/6/18** Time Transported **05:03** Other _____

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

Location (Court, Room) **South County 200 W Atlantic Ave Delray Beach, FL 33444**

Court Date and Time **02/05/2018 08:30:00**

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 COMTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.

Signature of Defendant (or Juvenile and Parent/Custodian) _____ Date Signed **1/6/18**

HOLD for Other Agency _____ Signature of Arresting Officer **label** Name Verification (Printed by Arrestee) **Chelsey Novak**

Dangerous Resisted Arrest Suicidal Other _____ Name of Arresting Officer (Print) **BISSOON, STEPHEN R.** ID # **664** (PRINT) _____

Intervenor **CPI Honca/72ae** Pouch # _____ Transporting Officer **Heron 422** ID # **906** Agency **BRPD** _____

Witness here if subject signed with an "X". _____

SCANNED

JAN 11 2018

0494690

Heron # 806

JAN 07 2018
CIRCUIT & COUNTY COURTS
(CRIMINAL DIV.) JAN 6 AM 6:24

PROBABLE CAUSE AFFIDAVIT

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

1 JUVENILE

OBTS Number	Agency ORI Number FL 0500200		Agency Name BOCA RATON POLICE DEPARTMENT	Agency Report Number 3 2 2018-000240
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				Special Notes:

Name (Last, First, Middle) NOVAK, CHELSEY	Alias	Race W	Sex F	Date of Birth 07/08/1992
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Charge Description 316.193(1) DUI	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) 100 NW 2ND AVE, BOCA RATON, FL 33432	Phone (561) -	Address Source	
Business Address (Name, Street) (City) (State) (Zip)	Phone (56) -	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 **SGT IMMLER** 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 **6** day of **January**, **2018** at **02:07** (Specifically include facts constituting cause for arrest.)

On 01/06/2017 I responded to 99 E Camino Real in reference to back up Sgt Immler made contact a white 2012 Honda bearing Fl tag#GEXR97. Sgt Immler observed the vehicle stopped in the middle of the intersection of Camino and N Federal Hwy as he was driving west bound on E Camino Real. Sgt Immler continued to observe the vehicle as he headed northbound on N Federal Hwy and saw that the vehicle was not moving from the intersection so he turned around and returned southbound to find the vehicle still in the intersection. Sgt Immler met with driver Chelsey Novak who stated that she was lost and trying to get back to Miami. Sgt Immler advised that Novak had an odor of an alcoholic beverage emanating from her person and he asked her if she had anything to drink and she initially stated no but then advised that she had one shot.

I then met with Chelsey Novak and asked her to exit the vehicle and walked her over to the front of my patrol. I then asked Novak why she was in the middle of the intersection and stayed in the intersection without moving. She stated that she was going to make an illegal turn because she was listening to the directions of her phone telling her which way to go. Novak stated that she lives in Miami and works at the Wish. I asked Novak if she had anything to drink and she stated that she took two shot at 9am this morning. I asked several times if she meant 9 am and she stated yes. She then stated that she got to work at 8 pm and that's where she took the shots around 9 pm. While speaking to Novak I could smell an odor of an alcoholic beverage emanating from her person, her eyes were blood shot and glossy and she was also slurring her speech.

Based on my observations I asked Novak if she would submit to roadside sobriety tasks to dispel my alarm that she was under the influence. Novak advised that she would submit to roadside tasks. I then walked her over to a well lit area and asked her if she had any medical problems or medical issues that would prevent her from doing the tasks. Novak advised that she had no medical or physical issues that would prevent her

SWORN AND SUBSCRIBED BEFORE ME	SIGNATURE OF ARRESTING / INVESTIGATING OFFICER <i>[Signature]</i>	
GRAHAM, KEITH T NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)	BISSOON, STEPHEN R (664) NAME OF OFFICER (PLEASE PRINT)	
01/06/2018 DATE	JAN 11 2018	01/06/2018 DATE

OBTS Number		PROBABLE CAUSE AFFIDAVIT SUPPLEMENT		1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	JUVENILE
Agency ORI Number	Agency Name	Agency Report Number					
FL 0500200	BOCA RATON POLICE DEPARTMENT	3 2 2018-000240					
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				Special Notes:			
Name (Last, First, Middle)				Alias	Race	Sex	Date of Birth
NOVAK, CHELSEY					W	F	07/08/1992

from conducting the tasks. She advised that she takes Adderall and Synthroid. The tasks that were conducted were the Walk and Turn, One Leg Stand, Finger to Nose, and the Rhomberg Alphabet. Ofc Saavedra and Ofc Calhoun were on scene as my backup.

The first SFST was the Walk and Turn. Novak could not maintain the starting position and started the task several times before being told to begin the task. Novak failed to walk heel to toe at any of the steps instead she took regular steps as she walked the line. She also made an improper turn by just turning around instead of the way that was demonstrated to her. On the way back she put her hands up like an airplane to maintain her balance.

The second SFST was the One Leg Stand. Novak started the task before being told to begin the task. She failed to keep her foot six inches off the ground. She put her foot down several times during the task and she was swaying during the task.

The third SFST was the Finger to Nose (L-R-L-R-R-L). Novak kept her finger on her nose on the first left for a while. I then asked her if she understood the directions and began again. The first left she kept her finger on her nose again. On the first right she used the pad of her finger. The second left she touched her right nostril. On the second and third right as well as the third left she used the pad of her finger to touch her nose. She also opened her eyes during the task.

The fourth SFST was the Rhomberg Alphabet which she was to be able to recite properly but opened her eyes during the task. She also sped through the alphabet.

Based on my investigation I placed Novak under arrest for DUI. I then transported her to BRPD.

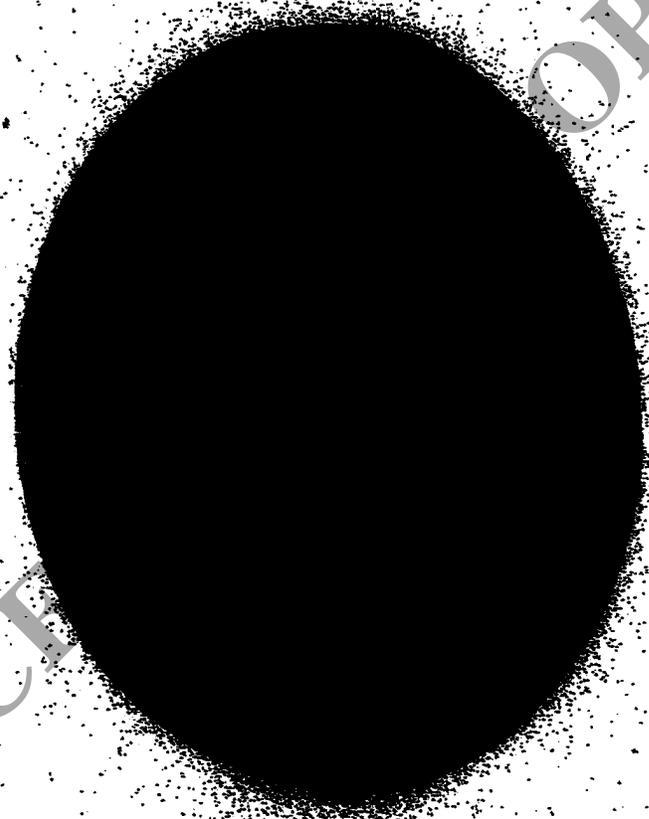
Ofc Genden responded to BRPD as my Breath Test Operator. Ofc Genden and I conducted the 20 minute observation and then she was taken into the BAT room. Novak provided two valid samples of .107 and .118. I also read Novak her Constitutional Rights which she advised she understood and would answer my questions without an attorney present. See DUI influence report.

Novak is being charged under F.S.S. 316.193(1) for DUI. Novak's vehicle was towed by Emerald. Novak was processed at BRPD and then transported to Palm Beach County Jail for final disposition.

ADMINISTRATIVE	SWORN AND SUBSCRIBED BEFORE ME		SIGNATURE OF ARRESTING / INVESTIGATING OFFICER	
	_____ GRAHAM, KEITH T #171		 _____	
	NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)		BISSOON, STEPHEN R (664) NAME OF OFFICER (PLEASE PRINT)	
	01/06/2018 DATE		01/06/2018 DATE	
		SCANNED JAN 11 2018		PAGE 2 OF 2

0139 / 0207 / 0231 /
STOP 1015 OBS

D. U. I. INFLUENCE REPORT



NOT A COPY

Boca Raton Police Services Department
100 Northwest Second Avenue
Boca Raton, Florida 33432

SCANNED
JAN 11 2018

Name: SGT Immler 713 Phone # Home _____ Work 5613381234

Address: 100 NW 2nd Ave, Boca Raton, FL 33432

Can testify to: See PC

Name: OFC Saavedra 777 Phone # Home _____ Work 5613381234

Address: 100 NW 2nd Ave, Boca Raton, FL

Can testify to: See PC

Name: OFC CalHoun 783 Phone # Home _____ Work 5613381234

Address: 100 NW 2nd Ave, Boca Raton, FL

Can testify to: See PC

Name: _____ Phone # Home _____ Work _____

Address: _____

Can testify to: _____

Name: _____ Phone # Home _____ Work _____

Address: _____

Can testify to: _____

Name: _____ Phone # Home _____ Work _____

Address: _____

Can testify to: _____

Name: _____ Phone # Home _____ Work _____

Address: _____

Can testify to: _____

NOT A CERTIFIED COPY

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JAN 11 2018

BOCA RATON POLICE DEPARTMENT

Agency Case# 2018-240

PART II D.U.I. REPORT
To be filled out at testing facility

I. INTRODUCTION (Instrument Operator faces video camera)

A. The day is: Saturday, January, 6, 2018
(day) (month) (date) (year)

B. The time is now approximately 02:52 (A)M / (P)M

C. The following is in reference to case number: 2018-240

D. Present at this time is Off. Missoon + Off. Gendern of the Boca Raton Police
Department. (Officer's Name)

E. Officer Missoon, Have you arrested Chelsey Novak
(Defendant's name)
In violation of Florida State Statute 316.193?

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

G. Ms Novak, I am required to
Inform you these proceedings are being video taped.

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

SCANNED
JAN 11 2018

H. 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.

2. 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 signature: _____

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.

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

(IF REFUSAL THEN)

At this time Mr/Mrs/Ms. _____ has refused to submit to a breath test.

The date is _____ (Month) _____ (Day) _____ (Year) and the time _____ AM/PM

A refusal form will be completed by the arresting officer.

BOCA RATON POLICE DEPARTMENT
TESTING FACILITY TASK REPORT

SUBJECT: Chelsey Novak
CASE #: 18-240 DATE: 1/6/18

BREATH TESTS RESULTS

1) TIME 107 02:56 (AM/PM) 2) TIME 118 3:01 (AM/PM)
3) TIME _____ AM/PM 4) TIME _____ AM/PM

BREATH OPERATOR: ~~Paul 671~~ Genden 680

MAINTENANCE TECHNICIAN: Paul 671

TESTING OFFICER'S OBSERVATIONS

SPEECH: Slurred

ATTITUDE: Good

CLOTHING: Black tights / sweater

MEDICAL CONDITION: NONE

OTHER: Glossy eyes, crying, strong Alcoholic beverage smell

COMMENTS: Adderall / Synthroid

NOT A

ADULT CONSTITUTIONAL WARNINGS
(Juvenile warning on reverse side)

"I am required to warn you before you make any statement that you have the following 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 the right to the presence of a lawyer 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 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.

DO YOU UNDERSTAND THESE RIGHTS AS I HAVE READ THEM TO YOU AND DO YOU WISH TO SPEAK TO ME?

(X) On Video

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? _____

SCANNED
JAN 11 2018

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 affects of alcohol? Yes No
Have you consumed alcohol since the accident? Yes No
Can you feel the affects 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? _____ Did you get a bump on the head? _____
Were you involved in an accident today? _____
Have you taken any drugs or smoked marijuana today? _____
What? _____ When? _____
Have you seen a doctor or dentist today? _____ Who? _____
Are you taking any prescription medicines? 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 eye 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 videotaping. The time now is approximately 0304 AM/PM
The date is: January (month) 6 (day) 2018 (year).

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JAN 11 2018