

0345931

2019CT072093ANB P#2120
ARREST / NOTICE TO APPEAR
Juvenile Referral Report

ADMINISTRATIVE	OBTS Number		Agency ORI Number FLO 502600		Agency Name PALM BEACH GARDENS POLICE DEPARTMENT		Agency Report Number (N.T.A.'s only) 78- 19007024													
	Charge Type 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		Multiple Clearance Indicator		1 Arrest 2 NTA 3 Request for Warrant 4 Request for Capias 1		Juvenile N											
	Location of Arrest (Including Name of Business) 4150 PGA BLVD, PBG, FL				Location of Offense (Business Name Address) 4150 PGA BLVD, PBG, FL				Location of Vehicle KAUFFS TOWING & RECOVERY 4301 East Avenue, West Palm Beach, FL 33405											
	Date of Arrest 12/01/2019		Time of Arrest 03:21		Booking Date		Booking Time		Jail Date		Jail Time									
DEFENDANT	Name (Last, First, Middle) RAMIRO, CHRISTOPHER, JAVIER										Alias (Name DOB Soc Sec # Etc)									
	Race W - White 1 - American Indian B - Black 0 - Oriental/Asian W		Sex M		Date of Birth 06/28/1983		Height 5'11		Weight 165		Eye Color BRO		Hair Color BRO		Complexion LIGHT		Build MEDIUM			
	Scars Marks Tattoos, Unique Physical Features (Location, Type, Description) TAT- BOTH ARMS, LEFT CHEST, ABDOMEN										Mental Status SINGLE		Religion NONE		Indication of Alcohol Influence 1 City 2 County 3 Florida 4 Out of State 2		Residence Type 2			
	Local Address (Street Apt Number) 5105 PALM HILL DR Y360, WEST PALM BEACH, FL, 33415										(City)		(State)		(Zip)		Phone (561) 315-0022		Address Source VERBAL	
	Permanent Address (Street Apt Number) 5105 PALM HILL DR Y360, WEST PALM BEACH, FL, 33415										(City)		(State)		(Zip)		Phone ()		Occupation INSURANCE	
	Business Address (Name Street) ()										(City)		(State)		(Zip)		Phone ()		Citizenship US	
	D/L Number, State R560110832280 FL										Soc Sec Number ()		INS Number		Place of Birth (City, State) SANTA CRUZ, CA		Citizenship US			
	Co-Defendant Name (Last, First Middle)										Race		Sex		Date of Birth		☐ 1 Arrested ☐ 2 At Large		☐ 3 Felony ☐ 4 Misdemeanor ☐ 5 Juvenile	
	Co-Defendant Name (Last, First Middle)										Race		Sex		Date of Birth		☐ 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 1		Grade				
Released To (Name) ()										Relationship		Date		Time		Value of Property				
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		Value of Property		Grade				
Property Crime? ☐ Yes ☐ No										Description of Property		Value of Property		Grade		Grade				
Drug Activity N N/A S Sell B Buy P Possess 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		Statute Violation Number 316.193(1)		Violation of ORD #						
Charge Description DRIVING UNDER THE INFLUENCE										Counts 1		Domestic Violence ☐ Y ☒ N		Warrant / Capias Number		Bond ER				
Drug Activity N										Drug Type N		Amount / Unit		Offense #		Statute Violation Number 316.193(4)		Violation of ORD #		
Charge Description DUI ENHANCED OVER .15										Counts 1		Domestic Violence ☐ Y ☒ N		Warrant / Capias Number		Bond ER				
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D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 1ST DAY OF DECEMBER 20 19, AT 0313 ☒ AM ☐ PM
SUBJECT: RAMIRO, CHRISTOPHER, JAVIER CASE NUMBER: 19007024
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)

I was called to the Shell service station in regard to a vehicle that may have collided with a pole. Upon further investigation, the vehicle had not struck any objects. Inside the vehicle was an unconscious white male in the driver seat. I advised dispatch to make fire rescue aware of the call, in the event the individual was having a medical episode. I made contact with the driver, identified via Florida Driver License photo, Christopher Ramiro, while he was still in the driver seat of the vehicle, which was on, running and in gear.

OBSERVATION OF DRIVER:

Ramiro appeared disoriented, had bloodshot watery eyes, slurred speech, flushed red face and the strong odor of an unknown alcoholic beverage emanating from his breath at conversational distance. Upon exiting the vehicle, Ramiro was off balance.

DRIVER'S STATEMENTS:

Ramiro said he was coming from "no where". Ramiro also said he was not driving, rather he was parked.

ODORS:

Unknown alcoholic beverage

GENERAL OBSERVATIONS

SPEECH: Slurred

ATTITUDE: Compliant

CLOTHING: Red shirt, grey shorts, grey shoes.

MEDICAL/OTHER: None stated.

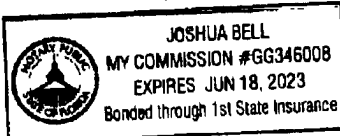
STATE OF FLORIDA
COUNTY OF PALM BEACH

Signature of Arresting/Investigative Officer

The foregoing instrument was sworn to or affirmed and subscribed before me this 1st 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)



SUBJECT: RAMIRO, CHRISTOPHER, JAVIER CASE NUMBER 19007024

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- | | |
|--|--|
| ☒ LT EYE-LACK OF SMOOTH PURSUIT | ☒ RT EYE-LACK OF SMOOTH PURSUIT |
| ☒ LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX DEVIATION | ☒ RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX DEVIATION |
| ☒ LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES | ☒ RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES |

Other Observations:

Swaying while balancing and Vertical Gaze Nystagmus observed.

WALK & TURN:

During the instructional phase, Ramiro stepped off the line and did not maintain the starting position. Ramiro also started the exercise early, before being told to do so. On the fourth step, Ramiro crossed over, missed the line and missed heel-to-toe. Also during the exercise, Ramiro walked with his arms raised in a "T" fashion, well over six inches from his sides. On the 14th step, Ramiro stepped off the line. Ramiro took a total of 15 steps, rather than nine as instructed. Ramiro executed an improper turnaround, not as instructed. On the return set, Ramiro stepped off the line on the first and fifth steps respectively.

ONE LEG STAND:

During the exercise, Ramiro put his right foot down three times total. On the third time, he lost his balance and stepped to his left. Ramiro was swaying throughout the exercise.

ROMBERG ALPHABET:

Not performed

FINGER TO NOSE:

Not performed

BREATH TEST RESULTS:

1) .226 2) .240 3) 4)

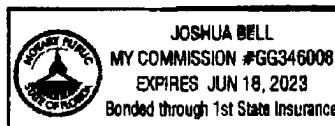
STATE OF FLORIDA
COUNTY OF PALM BEACH

Signature of Arresting/Investigative Officer

The foregoing instrument was sworn to or affirmed and subscribed before me this 1st 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)



**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: 80-006029 Software: 8100.27
Date of Test: 12/01/2019

Date of Last Agency Inspection: 11/15/2019

Observation Period Began: 04:05

Subject's Name: CHRISTOPHER J RAMIRO

DOB: 06/28/1983 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		04:30
	Air Blank	0.000	04:30
	Control Test	0.082	04:30
	Air Blank	0.000	04:31
	Subject Sample #1	0.226	04:33
	Air Blank	0.000	04:32
	Air Blank	0.000	04:35
	Subject Sample #2	0.240	04:36
	Air Blank	0.000	04:37
	Control Test	0.079	04:37
	Air Blank	0.000	04:38
	Diagnostics Check OK		04:38

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 JOSHUA J BELL, 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: [Signature] Date: 12/01/19
Signature

Sworn to (or affirmed) before me this 01 day of December, 2019

[Signature]
Signature of Notary Public-State of Florida

OFC. Flink #514
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 115.1934(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 322.161 F.S.



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

PBSO CASE # 19-143247 PBSO ZONE 3-13

AGENCY CASE # 190070241 CRASH CASE # _____

TIME OF STOP/CRASH 0313 DATE 12/01/2019 DAY Sunday

SUBJECT'S NAME Ramirez, Christopher Jose RACE W SEX M

HGT 5'11 WGT 165 DOB 6/25/1983

LOCATION 4150 PGA Blvd, PBG, FL

ARRESTING OFFICER'S NAME & ID Andrew Fluk 514 AGENCY PBGPD

DIVISION: Patrol

NOTIFIED BY COMMO Yes

ARRIVAL AT FACILITY 0405

BREATH RESULTS:

Arrest Time 0321

1. .226

2. .240

3. N/A

4. N/A

TESTING OFFICER'S ID 8656 PBSO VIDEOTAPE # N/A

TESTING FACILITY TASK REPORT

AGENCY: PBG

SUBJECT: RAMIRO, CHRISTOPHER J

CASE NUMBER: 19-143247

DATE: 12/01/19

VIDEO TAPE NUMBER: N/A

BEGINNING TIME: 0428

ENDING TIME: 0443

BREATH TESTS RESULTS: 1) 226 TIME 0433 A.M./P.M. 2) 240 TIME 0436 A.M./P.M.
3) N/A TIME XX A.M./P.M. 4) N/A TIME XX A.M./P.M.

BREATH OPERATOR: J. BELL #8656

MAINTENANCE TECHNICIAN: J. KARLECKE #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: QUIET, COOPERATIVE, POLITE

CLOTHING: RED TEE SHIRT, GREY CARGO SHORTS, GREY SNEAKERS

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER: EYES.BLOODSHOT, GLASSY

ODOR OF AN UNKNOWN ALCOHOLIC BEVERAGE COMING FROM BREATH

SUBJECT STATED HE DRANK A COUPLE BEERS (Q AND A)

COMMENTS: ARRIVED AT CENTER AVO BEGAN 20 MIN OBSERVATION AT 0405 HRS

SUBJECT STATED HE WOULD TAKE BREATH TEST

A/O READ RIGHTS

SUBJECT STATED HE UNDERSTOOD HIS RIGHTS

TECH READ BREATH TEST RESULTS

SUBJECT STATED HE UNDERSTOOD BREATH TEST RESULTS

A/O CONDUCTED Q AND A

SUBJECT ANSWERED QUESTIONS

SUBJECT: Ramirez, Christopher J CASE NUMBER: _____

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? 1

WHERE WERE YOU GOING? _____

WHAT STREET OR HIGHWAY WERE YOU ON? 1

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: Dfc. Flak #514

SUBJECT: Room 10, Christopher J CASE NUMBER: _____

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) Read on camera



**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	☐		Other:	
	☐		Other:	

REVIEW COMPLETED BY

Booking Number: 2019038459

Date: 12/02/2019

Specialist Name/ID: AM/31562

FLINK
(514)

19007024



COMPLAINT

FLORIDA DUI UNIFORM TRAFFIC CITATION

A56H5IE

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 HEREIN HAS BEEN JUSTLY AND REASONABLY GROUNDED TO BELIEVE AND DOES BELIEVE THAT ON			
COMPLAINT (RETAINED BY COURT)			
DAY OF WEEK SUNDAY	BIRTH 12	DAY 01	YEAR 2019 03:21 ☒ A.M. ☐ P.M.
NAME (PRINT) FIRST CHRISTOPHER LAST RAMIRO			
STREET 5105 PALM HILL DR - Y360			
CITY WEST PALM BEACH		STATE FL	ZIP CODE 33415
TEL. DRIVER NUMBER	DATE OF BIRTH 06	DAY 28	YEAR 1983 W M 511
DRIVER LICENSE NUMBER R 5 6 0 1 1 0 8 3 2 2 8 0	STATE FL	CLASS E	CDL LICENSE ☐ Y ☒ N 2024
VEHICLE 2017	MAKE MAZD	STYLE 4D	COLOR BLU
VEHICLE LICENSE NO 2R0ME	TRAILER TAG NO	STATE FL	YEAR TAG EXPIRES 2021
UPON A PUBLIC STREET OR HIGHWAY, OR OTHER LOCATION, NAMELY 4150 PGA BLVD, PALM BEACH GARDENS			
MOTORCYCLE ☐ YES ☒ NO			
COMPLAINT CITATION ☐ YES ☒ NO			
FT _____ INCHES _____ OF NOSE _____			

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 **.240**

DO NOT - DRIVING UNDER INFLUENCE | Driving Under ☐ YES ☒ NO

☐ AGGRESSIVE DRIVER ☐ YES ☒ NO ☐ DAMAGE TO OTHER PROPERTY ☐ YES ☒ NO ☐ BLIND TO ANOTHER ☐ YES ☒ NO ☐ SECONDARY BODILY INJURY TO ANOTHER ☐ YES ☒ NO ☐ FATAL ☐ YES ☒ NO

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

01/08/2020 10:00 AM

A56H5IE

COURT DATE
NORTH COUNTY GOVERNMENT CENTER
3188 PGA Boulevard PBG, FL 33410

ARREST DELIVERED TO **PBSO MAIN JAIL** DATE **12/01/2019**

I HEREBY CERTIFY THAT I HAVE READ AND UNDERSTAND THE CHARGES AND INSTRUCTIONS SPECIFIED IN THIS CITATION, WILL FULLY ACCEPT AND SIGN THE CITATION, AND WILL REMAIN AVAILABLE FOR INTERVIEW AND APPEARANCE IN COURT. I UNDERSTAND THAT MY SIGNATURE IS NOT AN ADMISSION OF GUILT OR WAIVER OF RIGHTS. IF YOU NEED REASONABLE FACILITY ASSISTANCE/ACCOMMODATION, PLEASE 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 322.2815, 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 60 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.

NAME, SIGNATURE OF OFFICER **514** BADGE NO _____ ID NO _____ TROOP UNIT _____
HSMV 73904 (Rev. 10/14)

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 _____

19007024



CASE NO _____ DOCKET NO _____ PAGE NO _____

A56H5JE

COUNTY OF PALM BEACH 06		☐ (1) FHP ☐ (2) PD ☐ (3) SO ☐ (4) OTHER	
CITY (IF APPLICABLE) PALM BEACH GARDENS		AGENCY NAME PALM BEACH GARDENS AGENCY # 78	
COMPLAINT (RETAINED BY COURT)			
IN THE COURT DESIGNATED BELOW THE UNDERSIGNED CERTIFIES THAT HE/SH HAS JUST AND REASONABLY GROUNDED TO BELIEVE AND DOES BELIEVE THAT ON			
DAY OF WEEK SUNDAY	MONTH 12	DAY 01	YEAR 2019
			03:21 ☐ A.M. ☒ P.M.
NAME (PRINT) FIRST CHRISTOPHER LAST RAMIRO			
STREET 5105 PALM HILL DR - Y360			
IF DIFFERENT THAN ONE ON DRIVER LICENSE "X" HERE			
CITY WEST PALM BEACH		STATE FL	ZIP CODE 33415
TELEPHONE NUMBER	DATE OF BIRTH 06 28 1983	SEX W	RACE M
DRIVER LICENSE NUMBER R 5 6 0 1 1 0 8 3 2 2 8 0	STATE FL	CLASS E	CDL LICENSE ☐ Y ☒ N
YEAR LICENSE EXP 2024	COMMERCIAL VEHICLE ☐ YES ☒ NO		
TYR VEHICLE 2017	MAKE MAZD	STYLE 4D	COLOR BLU
VEHICLE LICENSE NO 2R0ME	TRAILER TAG NO	STATE FL	YEAR TAG EXPIRED 2021
UPON A PUBLIC STREET OR HIGHWAY, OR OTHER LOCATION, NAMELY 4150 PGA BLVD, PALM BEACH GARDENS			MOTORCYCLE ☐ YES ☒ NO
			COMPANION CITATION ☐ YES ☒ NO

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 may be checked)

DUI - BAC/BRAC OVER .15 -OR- MINOR IN VEHICLE | **RE-ORAN** ☒ YES ☐ NO

ADMISSIBLE DRIVER ☒ YES ☐ NO | **STATE STATUTE** **316.193** | **SUB-SECTION** **(4)**

CRIME ☐ YES ☒ NO | **DAMAGE TO OTHER PROPERTY** ☒ YES ☐ NO | **INJURY TO ANOTHER** ☒ YES ☐ NO | **DEGRADE BODY INJURY TO ANOTHER** ☒ YES ☐ NO | **FATAL** ☐ YES ☒ NO

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

01/08/2020

10:00 AM

A56H5JE

PERMIT DATE

NORTH COUNTY GOVERNMENT CENTER

3188 PGA Boulevard PBG, FL 33410

PBSO MAIN JAIL

DATE 12/01/2019

ARREST DEL MONDO 19

1. 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.

1. 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 18TH 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 DWI RELATED OFFENSE. SEE REVERSE SIDE.

RAM: MINA FIRE DE TRENCA

HSNY 7304 (Rev. 10/14)

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 _____	