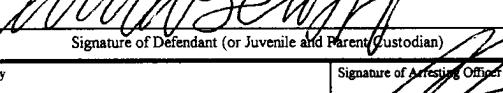


ARREST / NOTICE TO APPEAR				1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	JUVENILE																
Agency ORI Number <b>0500200</b>		Agency Name <b>Boca Raton Police Department</b>				Agency Report Number (N.T.A.'s only) <b>3 2 2017-000600</b>																			
Charge Type: Check as many as apply: 1. Felony 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				If Weapon Seized Enter Type <b>None/not Applicable</b>		Multiple Clearance Indicator																	
Location of Arrest (Including Name of Business) <b>1299 NW 12TH AVE BOCA RATON, FL</b>				Location of Offense (Business Name, Address) <b>1299 NW 12TH AVE, BOCA RATON, FL 33486</b>																					
Date of Arrest <b>01/13/2017</b>	Time of Arrest <b>02:29</b>	Booking Date <b>01/13/2017</b>	Booking Time <b>02:39</b>	Jail Date <b>01/13/2017</b>	Jail Time <b>02:39</b>	Location of Vehicle <b>WESTWAY TOWING</b>																			
Name (Last, First, Middle) <b>BERGIN, CONNER FLYNN</b>										Alias (Name, DOB, Soc. Sec. #, Etc.)															
Race W - White B - Black		Sex <b>W</b>	Date of Birth <b>01/15/1995</b>	Height <b>6'00</b>	Weight <b>180</b>	Eye Color <b>BROWN</b>	Hair Color <b>BROWN</b>	Complexion <b>LIGHT</b>	Build <b>Medium</b>																
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) <b>None</b>						Marital Status <b>S</b>	Religion <b>CHRISTIAN</b>	Indication of: Alcohol Influence Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk. Drug Influence Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk.																	
Local Address (Street, Apt. Number) <b>430 E LAKESHORE DR, CLERMONT, FL 34711</b>				(City) <b>CLERMONT</b>	(State) <b>FL</b>	(Zip) <b>34711</b>	Phone <b>(321) 332-5006</b>	Residence Type: 1. City <b>3. Florida</b> 2. County <b>4. Out of State</b> <b>3</b>																	
Permanent Address (Street, Apt. Number) <b>430 E LAKESHORE DR, CLERMONT, FL 34711</b>				(City) <b>CLERMONT</b>	(State) <b>FL</b>	(Zip) <b>34711</b>	Phone <b>(321) 332-5006</b>	Address Source <b>DEFENDANT</b>																	
Business Address (Name, Street) <b>FAU,</b>				(City) <b>FAU</b>	(State) <b>FL</b>	(Zip) <b>33464</b>	Phone	Occupation <b>Student</b>																	
D/L Number, State <b>625106950150 / FL</b>		Soc. Sec. Number [REDACTED]		INS Number		Place of Birth (City, State) <b>WINTERPARK, FL,</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																		
Name (Last, First, Middle) <input type="checkbox"/> Parent <input type="checkbox"/> Other: _____ <input type="checkbox"/> Legal Custodian										Residence Phone															
Address (Street, Apt. Number) (City) <b>CLERMONT</b> (State) <b>FL</b> (Zip) <b>34711</b>										Business Phone															
Notified by: (Name)				Date	Time	JUVENILE DISPOSITION																			
				Date	Time	1. Handled/Processed within Department and Released 2. TOT JAC 3. Incarcerated																			
Released To: (Name)				Relationship	Date	Time																			
The above address was 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's Office (Phone 355-2526) informed of any change of address.				School Attended				Grade																	
<input type="checkbox"/> Yes, by: <input type="checkbox"/> No:				Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				Description of Property				Value of Property													
C O D E F J U V E N I L E D E						Drug Activity S. Sell N. N/A P. Possess		R. Smuggle B. Buy T. Traffic		K. Dispenses/ D. Deliver E. Use		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	
C H A R G E						Charge Description <b>DUI- PROPERTY DAMAGE/ INJURY TO PROPERTY OR PERSON ENHANCED</b>						Statute Violation Number <b>316.193(3C1)</b>				Violation of ORD #									
D r u g A c t i v i t y						Drug Type <b>N</b>		Amount / Unit <b>/</b>		Offense # <b>2017-000600</b>		Counts <b>1</b>	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant / Capias Number		Bond									
C H A R G E						Charge Description						Statute Violation Number				Violation of ORD #									
D r u g A c t i v i t y						Drug Type <b>N</b>		Amount / Unit <b>/</b>		Offense #		Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Warrant / Capias Number		Bond									
C H A R G E						Charge Description						Statute Violation Number				Violation of ORD #									
D r u g A c t i v i t y						Drug Type <b>N</b>		Amount / Unit <b>/</b>		Offense #		Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Warrant / Capias Number		Bond									
I N T A K E						Health / Apparent Physical Condition of Defendant <b>INTOXICATED</b>						Any knowledge of the following: <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries Explain: <b>N/A</b>													
C H A R G E						Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input checked="" type="checkbox"/> T.O.T. County Jail <input type="checkbox"/> Posted Bond <input type="checkbox"/> South County Mental Health						PROPERTY - Received By <b>683</b>		Released By <b>683</b>		Released To <b>CJ</b>									
E						Transported By						Date Transported	Time Transported	Other											
N O T I C E						INSTRUCTION NO. 1 - Mandatory appearance in court <input checked="" type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.						Location (Court, Room) <b>South County 200 W Atlantic Ave Delray Beach, FL 33444</b>													
												Court Date and Time <b>02/13/2017 08:30:00</b>													
T O A P P E A R A R						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.																			
 <b>Conner Bergin</b> Signature of Defendant (or Juvenile and Parent/Custodian)																Date Signed <b>JAN 16 2017</b>									
HOLD for Other Agency <b>N/A</b>						Signature of Arresting Officer <b>CRAWFORD, ANDREW</b>						Finger Verification (Printed by Arrestee) <b>Conner Bergin</b>													
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other						Name of Arresting Officer (Print) <b>CRAWFORD, ANDREW</b>						I.D. # <b>683</b>				(PRINT)									
Intake Deputy						I.D. #		Pouch #		Transporting Officer <b>Pratt</b>		I.D. # <b>542</b>		Agency <b>BRPD</b>											
																Witness here if subject signed with an "X".									

OBTS Number		PROBABLE CAUSE AFFIDAVIT			1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	JUVENILE				
A	Agency ORI Number		Agency Name		Agency Report Number							
D	FL 0500200		BOCA RATON POLICE DEPARTMENT		3   2   2017-000600							
M	Charge Type: Check as many as apply:		<input type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input checked="" type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other		Special Notes:							
I	Name (Last, First, Middle)		Alias		Race	Sex	Date of Birth					
E	BERGIN, CONNER FLYNN				W	M	01/15/1995					
F	Charge Description		Charge Description									
H	316.193(3C1) DUI- PROPERTY DAMAGE											
A	Charge Description		Charge Description									
R												
G												
E												
S												
V	Victim's Name (Last, First, Middle)				Race	Sex	Date of Birth					
I	State Of Florida											
C	Local Address (Street, Apt. Number)		(City)	(State)	(Zip)	Phone	Address Source					
T												
I	Business Address (Name, Street)		(City)	(State)	(Zip)	Phone	Occupation					
M												
<p>The undersigned certifies and swears that he/she has just and resonable grounds to believe, and does believe that the above named Defendant committed the following violation of law.</p> <p>The Person taken into custody . . .</p> <p><input checked="" type="checkbox"/> committed the below acts in my presence.      <input type="checkbox"/> was observed by _____ who told _____</p> <p><input type="checkbox"/> confessed to _____ that he/she saw the arrested person committ the below acts.</p> <p>admitting to the below facts.      <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the <u>13</u> day of <u>January</u> <u>2017</u> at <u>01:38</u> (Specifically include facts constituting cause for arrest.)</p>												
<p>On 01/13/17, at approximately 0138 hours, I responded to a vehicle crash at 1299 NW 12th Avenue reference a report of a possible impaired driver. Upon my arrival, I met with Officer's Jesionek and Tyson.</p> <p>According to Officer Jesionek, a blue Ford F150 pickup truck bearing Florida tag 488MZC drove past the flashing red traffic signal southbound on NW 12th Avenue at the intersection with NW 13th Street and crashed into a black Chrysler Sebring bearing Florida tag CLYT34. The Ford was driven by a white male identified by his Florida driver license as Conner Bergin and the Chrysler was driven by another white male identified by his Florida driver license as Oliver Russell. There were no reported injuries.</p> <p>I then met with Oliver Russell. According to Russell, he was heading westbound on NW 13th Street when he approached the intersection of NW 12th Avenue. Russell proceeded through the intersection because he had a flashing yellow traffic signal. As soon as Russell entered the intersection, he crashed into Bergin's Ford pickup truck which was traveling southbound on NW 12th Avenue. It should be noted Bergin had a flashing red traffic signal that Bergin failed to stop for, causing him to crash into Russell. Russell identified Bergin as the driver of the Ford. Russell provided a written statement.</p> <p>I then met with Conner Bergin. According to Bergin, he was traveling southbound on NW 12th Avenue approaching the intersection of NW 13th Street when he stated he had a green traffic signal. Bergin proceeded through the intersection and crashed into Russell. Bergin admitted after the fact that he mistakenly thought the traffic signal was green; however, it was really flashing red. While speaking with Bergin, I could smell an odor of alcoholic beverage emanating from his breath; his eyes were also glassy and bloodshot. I advised Bergin that the crash investigation was now complete and I was</p>												
A	SWORN AND SUBSCRIBED BEFORE ME				SIGNATURE OF ARRESTING / INVESTIGATING OFFICER							
D	<i>Sgt K. Shifflett</i>				<i>CRAWFORD, ANDREW (683)</i>							
M	SHIFFLETT, KELLY D				NAME OF OFFICER (PLEASE PRINT)							
I	NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)											
E												
01/13/2017		DATE		01/13/2017		DATE		1 of 3				
01/13/2017		DATE		01/13/2017		DATE		1 of 3				
COURT			STATE ATTORNEY			CENTRAL RECORDS			JAIL	CRIME ANALYSIS		P. I. O.

SCANNED  
JAN 16 2017

OBTS Number
-------------

PROBABLE CAUSE AFFIDAVIT  
SUPPLEMENT

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

**1**

JUVENILE

A D M I	Agency ORI Number <b>FL 0500200</b>	Agency Name <b>BOCA RATON POLICE DEPARTMENT</b>	Agency Report Number <b>3   2   2017-000600</b>	
N	Charge Type: Check as many as apply. 1. Felony <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor <input checked="" type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other <input type="checkbox"/>	Special Notes:		
D E F	Name (Last, First, Middle) <b>BERGIN, CONNER FLYNN</b>	Alias	Race <b>W</b>	Sex <b>M</b>

beginning a criminal DUI investigation. I advised Bergin of his constitutional rights for which he stated he understood and was willing to speak with me. According to Bergin, he was originally coming from Rockin Angels, an establishment that serves alcoholic beverages where he consumed a homemade mixture of Gatorade and vodka at approximately 2230 hours before driving and getting into the crash. Bergin also admitted to using Adderall at approximately 1930 hours which he stated he is prescribed. Bergin again admitted he thought the traffic signal was green was he was driving through and while standing and talking with him he admitted that the traffic signal was actually flashing red for his direction and flashing yellow for Russell's direction.

I then asked Bergin if he would participate in roadside exercises. He replied yes. The exercises were performed on a flat and level surface, free of debris. He advised he did not have any physical injuries or disabilities that would prohibit him from completing the exercises.

HGN: There was lack of smooth pursuit seen in both eyes. There was distinct and sustained nystagmus seen in both eyes at maximum deviation. Onset of nystagmus was also seen prior to 45 degrees. Vertical nystagmus was not seen. He had a slight sway and had to be told not to move his head or anticipate the movement of my pen light. I also had him sit on my bumper due to his height.

Walk and turn: He swayed during the instruction stance where he almost lost his balance. Several of his steps were not heel to toe as seen by my hand gesture on video tape. He also wobbled.

One Leg Stand: He stated that he understood the instructions and had no questions; however, he never raised his foot at first because he stated he was waiting on me to tell him which foot to raise because I allegedly told him I would tell him; however, I never said that and I had told him to raise whichever foot he wanted to. He swayed. He leaned back to compensate for his lack of balance.

Finger to Nose: R,L, R,L,L,R. With his first movement with his right finger, he touched the tip of his nose; however, he forgot to return it to his side as instructed. He instead kept it in place for several minutes until I had to tell him to put it back to his side. The rest of his fingers he touched the tip. Eyelid tremors were also seen. Bergin admitted to using marijuana in the past.

Numbers: He was instructed to count from 25 to 75. He had a slight sway. Eyelid tremors were also seen again.

Based upon my investigation, I have probable cause to believe that Conner Bergin unlawfully did drive or be in actual physical control of a vehicle while under the

ADMINISTRATIVE	SWORN AND SUBSCRIBED BEFORE ME  <i>Sgt K. Shifflett</i> <b>SHIFFLETT, KELLY D</b>
	NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)
	<b>01/13/2017</b>
	DATE

SIGNATURE OF ARRESTING/INVESTIGATING OFFICER	
<i>Crawford, Andrew</i>	
<b>CRAWFORD, ANDREW (683)</b>	
NAME OF OFFICER (PLEASE PRINT)	
<b>01/13/2017</b>	
DATE	
PAGE	1 OF 3

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P.I.O.

OBTS Number

PROBABLE CAUSE AFFIDAVIT  
SUPPLEMENT
 1. Arrest      3. Request for Warrant  
 2. N.T.A.      4. Request for Capias
**1**

JUVENILE

A D M I	Agency ORI Number <b>FL 0500200</b>	Agency Name <b>BOCA RATON POLICE DEPARTMENT</b>	Agency Report Number <b>3   2   2017-000600</b>	
N	Charge Type: Check as many as apply. 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance 2. Traffic Felony <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other		Special Notes:	
D E F	Name (Last, First, Middle) <b>BERGIN, CONNER FLYNN</b>		Alias	
		Race <b>W</b>	Sex <b>M</b>	Date of Birth <b>01/15/1995</b>

influence of alcoholic beverages, or chemical substances as set forth in F.S. 877.111, or any substance controlled under Chapter 893 or any combination thereof, to the extent that his normal faculties were impaired, or while having a blood or breath alcohol level of .08 or higher, and during the course of driving a vehicle while under the influence of alcoholic beverages, or chemical substances as set forth in F.S. 877.111, or any substance controlled under Chapter 893 or any combination thereof, did cause or contribute to the cause of damage to the property of Oliver Russell, contrary to Florida Statute 316.193(3)(a), (b) and (c)(1). At approximately 0229 hours, I placed Conner Bergin under arrest for DUI. Officer Tyson also cited him for running past the flashing red traffic signal causing the crash.

I transported Bergin to the Boca Raton Police Department for breath alcohol testing. Officer Deen performed the twenty minute observation and conducted the breath testing process. I asked Bergin if he would provide a sample of his breath for breath alcohol testing and he said yes. Breath results were .060 and .060 at 0315 and 0318 hours. The signs of impairment that I observed during the roadside exercises did not correlate with Bergin's breath results; I subsequently requested Bergin provide a urine sample for drug testing; he replied yes. At 0330 hours, Bergin provided a urine sample which I collected and submitted into evidence to be sent to the Palm Beach County Sheriff's Office Lab for a urine drug screen. I then again advised Bergin of his constitutional rights for which he stated that he understood; see the DUI Influence packet for his answers to my questions. Bergin was medically cleared at Boca Raton Regional Hospital and then transferred to the Palm Beach County Jail.

P  
R  
O  
A  
B  
L  
E  
E  
A  
U  
S  
E  
S  
T  
A  
T  
E  
M  
E  
N  
TA  
D  
M  
I  
N  
I  
S  
T  
R  
A  
T  
I  
V  
E

SWORN AND SUBSCRIBED BEFORE ME

*Sgt K. Shifflett*  
**SHIFFLETT, KELLY D**

NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

**01/13/2017**

DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

*Crawford, Andrew*  
**CRAWFORD, ANDREW (683)**

NAME OF OFFICER (PLEASE PRINT)

**01/13/2017**

DATE

*JAN 16 2017*  
**SCANNED**PAGE  
**3 OF 3**

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P.I.O.