

ARREST / NOTICE TO APPEAR Juvenile Referral Report

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

1

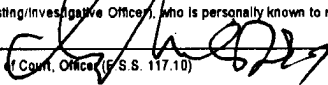
Juvenile

n

ADMINISTRATIVE	OBTS Number		Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06-19-078101	
	Charge Type: Check as many as apply		☐ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☒ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other		Weapon Seized / Type 2 1. Yes 2. No		Multiple Clearance Indicator	
	Location of Arrest (Including Name of Business) FOREST HILL BLVD/SOUTH SHORE BLVD, Wellington FL				Location of Offense (Business Name, Address) FOREST HILL BLVD/SOUTH SHORE BLVD, Wellington FL			
	Date of Arrest 06/03/2019	Time of Arrest 0230	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle PRIORITY	
DEFENDANT	Name (Last, First, Middle) Hill, Corbin, M				Alias (Name, DOB, Soc. Sec. #, Etc.)			
	Race W - White I - American Indian B - Black O - Oriental/Asian W	Sex M	Date of Birth 10/13/1995	Height 6'00	Weight 150	Eye Color BLU	Hair Color BROWN	Complexion FAIR
	Build THIN				Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) NONE			
	Local Address (Street, Apt. Number) 370 Farrell St 301, S Burlington, VT 05403		(City)	(State)	(Zip)	Phone (802) 881 9545		Indication of: Alcohol Influence Drug Influence Y ☐ N ☐ ☐
	Permanent Address (Street, Apt. Number)		(City)	(State)	(Zip)	Phone		Residence Type: 1. City 2. County 3. Florida 4. Out of State 1
	Business Address (Name, Street)		(City)	(State)	(Zip)	Phone		Address Source DEFENDANT
	D/I Number, State 22734261, VT		Soc. Sec. Number		INS Number	Place of Birth (City, State) BURLINGTON VT		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
	Parent / Legal Custodian / Other: Name (Last) (First) (Middle) Address (Street, Apt. Number) (City) (State) (Zip) Business Phone				Residence Phone			
JUVENILE	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 355-2528) informed of any change of address. ☐ Yes, by: (Name) ☐ No: (Reason)				School Attended		Grade	
	Property Crime? ☐ Yes ☐ No		Description of Property		Value of Property			
	Property Crime? ☐ Yes ☐ No		Description of Property		Value of Property			
CHARGE	Drug Activity S. Sell N. N/A P. Possess 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 Description DUI		Counts 1	Domestic Violence ☐ Y ☒ N
	Statute Violation Number 316.193(1)		Violation of ORD #		Warrant / Capias Number		Bond	
	Charge Description		Counts	Domestic Violence ☐ Y ☒ N	Statute Violation Number		Violation of ORD #	
CHARGE	Drug Activity		Drug Type		Amount / Unit		Offense #	Warrant / Capias Number
	Charge Description		Counts	Domestic Violence ☐ Y ☒ N	Statute Violation Number		Violation of ORD #	
	Drug Activity		Drug Type		Amount / Unit		Offense #	Warrant / Capias Number
	Charge Description		Counts	Domestic Violence ☐ Y ☒ N	Statute Violation Number		Violation of ORD #	
	Drug Activity		Drug Type		Amount / Unit		Offense #	Warrant / Capias Number
CHARGE	Charge Description		Counts	Domestic Violence ☐ Y ☒ N	Statute Violation Number		Violation of ORD #	
	Drug Activity		Drug Type		Amount / Unit		Offense #	Warrant / Capias Number
	Charge Description		Counts	Domestic Violence ☐ Y ☒ N	Statute Violation Number		Violation of ORD #	
	Drug Activity		Drug Type		Amount / Unit		Offense #	Warrant / Capias Number
	Charge Description		Counts	Domestic Violence ☐ Y ☒ N	Statute Violation Number		Violation of ORD #	
NOTICE TO APPEAR	Location (Court, Room Number, Address) Criminal Justice Complex, 3228 Gun Club Road, West Palm Beach, FL 33406 - Ph: (561) 688-4600							
	Court Date and Time Month 6 Day 27 Year 19 Time 8:30 AM ☒ 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 06/03/2019							
	Signature of Defendant (or Juvenile and Parent / Custodian)				Date Signed			
	HOLD for other Agency Name:				Signature of Arresting Officer X			
ADMIN	Name Verification (Printed by Arrestee) JUN - 3 2019		Name of Arresting Officer (Print) A SOLOWAY 8586		I.D. # 8586		PAGE 1	
	Witness here if subject signed with an "X"		Agency PBSO		I.D. #		PAGE	
	Witness here if subject signed with an "X"		Agency PBSO		I.D. #		PAGE	
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PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	Juvenile
OBTS Number		Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 06- 19078101	
Charge Type: Check as many as apply.		☐ 1. Felony ☐ 2. Traffic Felony ☒ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other		Special Notes:			
Name (Last, First, Middle) Hill Corbin M		Alias		Race W		Sex M	
				Date of Birth 10/13/1995			
Charge Description 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)	
Business Address (Name, Street)		(City)		(State)		(Zip)	
				Phone		Address Source	
				Phone		Occupation GOVERNMENT	
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. ☐ committed to _____ admitting to the below facts. ☐ was observed by _____ who told that he/she saw the arrested person commit the below acts. ☒ was found to have committed the below acts, resulting from my (described) investigation.							
On the 3RD day of JUNE , 20 19 at 02:05 ☒ A.M. ☐ P.M. (Specifically include facts constituting cause for arrest.)							
On 06/03/2019 at approximately 01:50 hrs, while conducting selective traffic enforcement in the area of Forest hill Blvd / Stribbling Way, which is located in the Village of Wellington, Palm Beach County, Florida I initiated a traffic stop on the defendant's vehicle, a Blue Infiniti G37X bearing Vermont Tag GWE471, for speeding 60 MPH in a 45 MPH zone, also vehicle almost struck the curb during initiation of the traffic stop. The driver was identified as Corbin Hill, by their Vermont driver license. Hill was the sole occupant of the vehicle. Upon making contact with the driver, I immediately detected an obvious and strong odor of an unknown alcoholic beverage emitting from his person and face area. This odor intensified as I spoke to Hill. Hill had glassy, glazed, and blood shot eyes. Hill's speech was slurred, slow, thick, and at times difficult to understand. Hill's movements were (slow, deliberate, lethargic) with poor coordination. Hill was wearing a black t-shirt, brown pants, and black shoes. Corbin Hill showed signs of possible impairment so I requested a DUI Unit to conduct an assessment. This affidavit is for supplemental purposes only.							
STATE OF FLORIDA COUNTY OF PALM BEACH  D/S G. PALMER 2: (Signature of Arresting/Investigative Officer)							
The foregoing instrument was sworn to or affirmed and subscribed before me this 3RD day of JUNE , 20 19 by D/S G. PALMER 25514 (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) 							

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 03 DAY OF JUNE 20 19, AT 0155 ✓ AM PM

SUBJECT: Hill, Corbin, M CASE NUMBER: 19-078101

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: A SOLOWAY 8586

PERSONAL CONTACT

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

Upon arrival I met with D/S Palmer #25514 who advised me of the following:

On 06/03/2019 at approximately 01:50 hrs, while conducting selective traffic enforcement in the area of Forest hill Blvd / Stribling Way, which is located in the Village of Wellington, Palm Beach County, Florida I initiated a traffic stop on the defendant's vehicle, a Blue Infiniti G37X bearing Vermont Tag GWE471, for speeding 60 MPH in a 45 MPH zone, also vehicle almost struck the curb during initiation of the traffic stop. The driver was identified as Corbin Hill, by their Vermont driver license. Hill was the sole occupant of the vehicle.

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OBSERVATION OF DRIVER:

Upon my arrival the driver was sitting in the driver's seat of his vehicle. I spoke with him and immediately noticed a strong odor of an unknown alcoholic beverage coming from within the vehicle. When the driver exited his vehicle, I noticed an odor of an unknown alcoholic beverage coming from the driver's breath. The driver's eyes were red and glassy. The driver repeated many of the things I said to him.

DRIVER'S STATEMENTS:

The driver stated he drank a few beers. He then said he had 1 or 2. At the BAT he said he drank 3 Corona beers.

ODORS:

Obvious odor of an unknown alcoholic beverage coming from the driver's breath.

GENERAL OBSERVATIONS

SPEECH:

ATTITUDE: TALKATIVE

CLOTHING: BLACK T SHIRT, TAN PANTS, GREEN SHOES

MEDICAL/OTHER: STATED NONE

STATE OF FLORIDA
COUNTY OF PALM BEACH

A SOLOWAY 8586

Signature of Arresting/Investigative Officer

I, the foregoing instrument was sworn to or affirmed and subscribed before me this 3 day of JUNE 20 19 by A SOLOWAY 8586

Print name of Arresting/Investigative Officer, who is personally known to me and/or produced identification. Type full name and address. KNOWN LEO

Paris Pound (#24639)

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

Notary Public State of Florida
Paris Pound
My Commission GG 200028
Expires 03/25/2022

SCANNED

JUN - 3 2019

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 03 DAY OF JUNE 20 19, AT 0155 ✓ AM PM
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AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: A SOLOWAY 8586

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CLOTHING: BLACK T SHIRT, TAN PANTS, GREEN SHOES

MEDICAL/OTHER: STATED NONE

STATE OF FLORIDA
COUNTY OF PALM BEACH

A SOLOWAY 8586

Signature of Arresting/Investigative Officer)

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Paris Pound (#24639)

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

Notary Public State of Florida
Paris Pound
My Commission CG 200028
Expires 03/25/2022

SCANNED

JUN 3 2019

SUBJECT: Hill, Corbin, M

CASE NUMBER 19-078101

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:

REFUSED

WALK & TURN:

REFUSED

ONE LEG STAND:

REFUSED

FINGER TO NOSE:

REFUSED

ROMBERG ALPHABET:

REFUSED

BREATH TEST RESULTS:

**STATE OF FLORIDA
COUNTY OF PALM BEACH**

A SOLOWAY 8586

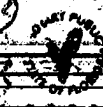
Signature of Arresting/Investigative Officer)

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Print name of Arresting/Investigative Officer, who is personally known to me and/or produced identification. Type of identification produced: KNOWN LEO

Paris Pound (#24639)

Notary Public, Clerk of Court, Officer (F.S.S. 117.50)



Notary Public State of Florida
Paris Pound
My Commission GG 200028
Expires 03/25/2022

SCANNED
JUN - 3 2019

SUBJECT: Hill, Corbin, M

CASE NUMBER 19-078101

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:

REFUSED

WALK & TURN:

REFUSED

ONE LEG STAND:

REFUSED

FINGER TO NOSE:

REFUSED

ROMBERG ALPHABET:

REFUSED

BREATH TEST RESULTS:

STATE OF FLORIDA
COUNTY OF PALM BEACH

A SOLOWAY 8586

Signature of Arresting/Investigative Officer

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

Paris Pound (#24639)

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

Notary Public State of Florida
Paris Pound
My Commission GG 200028
Expires 03/25/2022

SCANNED
JUN - 3 2019

WITNESS LIST

CASE NUMBER: 19-078101

ARRESTING OFFICER: A SOLOWAY 8586

ADDRESS: PBSO

PHONE NUMBERS (HOME): _____ (WORK) _____

CAN TESTIFY TO: DUI INVESTIGATION

NAME: D/S G PALMER #25514

ADDRESS: PBSO

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: STOPPING DEPUTY

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) 0

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

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NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

SCANNED

JUN - 3 2019

TESTING FACILITY TASK REPORT

AGENCY: PBSO

SUBJECT: HILL, CORBIN M

CASE NUMBER: 19-078101

DATE: 06/03/19

VIDEO TAPE NUMBER: N/A

BEGINNING TIME: 03:20

ENDING TIME: 03:36

BREATH TESTS RESULTS: 1) R TIME 03:26 AM/P.M. 2) N/A TIME — A.M./P.M.

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

BREATH OPERATOR: P. POUND # 24639

MAINTENANCE TECHNICIAN: J. LARLECK # 6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: CALM

CLOTHING: TAN PANTS, BLACK SHIRT, GREEN SNEAKERS

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER: EYES

ODOR OF UNKNOWN ALCOHOLIC BEVERAGE ON BREATH.

A. STATED HE HAD A FEW BEERS IN Q1A

COMMENTS: ARRIVED AT CENTER A/O BEGAN THE 20
MINUTE OBSERVATION PERIOD AT 02:58 HRS.

A. STATED HE WAS NOT SURE TO TAKING TEST

A/O. READ I/C AND EXPLAINED IT. A. STATED
HE UNDERSTOOD I/C THEN STATED HE DIDN'T UNDERSTAND

I/C. A. THEN STATED HE DIDN'T UNDERSTAND I/C AGAIN.

A/O. READ I/C AGAIN A. THEN STATED HE UNDERSTOOD I/C
AND WOULD REFUSE TEST.

A/O. READ RIGHTS

A. STATED HE UNDERSTOOD RIGHTS

A/O. CONDUCTED Q1A

A. ANSWERS QUESTIONS.

REFUSED
SCANNED

JUN - 3 2019

SUBJECT: HILL, CORBIN M CASE NUMBER: 19-078101

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 Inv. A. Solloway of the PBSO

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) _____

READ ON CAMERA

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

SCANNED

SUBJECT: HILL, CORBIN M CASE NUMBER: 19-078101

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? Yes

WHERE WERE YOU GOING? Cond.

WHAT STREET OR HIGHWAY WERE YOU ON? St Andrews

DIRECTION OF TRAVEL? _____ WHERE DID YOU START? CR Church Hill after "Business"

WHAT TIME DID YOU START? 4:45 WHAT TIME IS IT NOW? 4:45

WHAT IS TODAY'S DATE? 6/3/19 WHAT DAY OF THE WEEK IS IT? Mon

WHAT COUNTY AND CITY ARE YOU IN NOW? 4th Flr

WHEN DID YOU LAST EAT? late Afternoon WHAT DID YOU EAT? Chicken

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? Hang out with friends

HOW MUCH DO YOU WEIGH? 150 HAVE YOU BEEN DRINKING? Yes WHAT? Cerveza Pilsa

HOW MUCH? 3 WHERE? Home WITH WHOM? Friends

WHEN DID YOU HAVE YOUR FIRST DRINK? 2:30 AND YOUR LAST DRINK? 10:00 P

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? 5 P

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? No ARE YOU UNDER THE INFLUENCE? No

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? No HOW MUCH? _____

WHAT? _____ WHERE? _____ WHEN? _____

WHAT LINE OF WORK ARE YOU IN? Part Time WHEN DID YOU LAST WORK? _____

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? No WHAT? _____

ARE YOU SICK OR INJURED? No WHAT'S WRONG? _____

DO YOU LIMP? No DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? No

WERE YOU IN AN ACCIDENT TODAY? No

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? No WHEN? _____

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? No WHO? _____ WHY? _____

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? No 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? No

DO YOU TAKE INSULIN? No IF SO, WHEN WAS YOUR LAST INJECTION? _____

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? No WHERE? _____

INTERVIEWER: _____

SCANNED
JUN - 3 2019

STATE OF FLORIDA
DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES
AFFIDAVIT OF REFUSAL TO SUBMIT TO
BREATH AND/OR URINE TEST

19-078101

I, A SOLOWAY 8586, a duly certified Law Enforcement Officer or Correctional Officer,

(Name of Officer reading Implied Consent Warning)

am a member of Palm Beach County Sheriff's Office, and I do swear

(Name of law enforcement agency)

or affirm that on or about the 3 day of June, 20 19, at 0230 ☐ P.M. ☒ A.M.

DRIVER Corbin M Hill
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# 22734261, state of Vermont, was placed under lawful arrest for

the offense of DUI by A SOLOWAY 8586 and
(Name of Arresting Officer)
issued Citation # _____

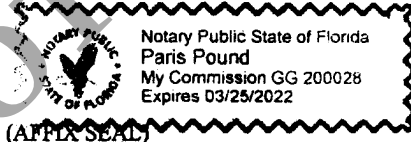
That on or about the 3 day of JUNE, 20 19, at 0326 ☐ P.M. ☒ A.M.

in Palm Beach County,

I requested that the driver submit to a ☒ breath and/or ☐ urine test to determine his or her blood alcohol level and/or the presence of chemical or controlled substances. I informed the driver that the refusal to submit to such test(s) would result in the suspension of his or her driving privilege for a period of one (1) year for a first refusal, or for a period of eighteen (18) months if his or her driving privilege had been previously suspended for refusing to submit to a breath, urine or blood test. I also informed the driver that he or she commits a misdemeanor by refusing to submit to a lawful test as requested above if his or her driving privilege has been previously suspended for refusal to submit to a lawful test of his or her breath, urine, or blood. Additionally, I informed the driver that if he or she holds a CDL, or was operating a CMV, refusal will result in the disqualification of the Commercial Driver's License/driving privilege for a period of one (1) year in the case of a first refusal or permanently if he or she has previously been disqualified as a result of a refusal to submit to any such lawful test. Nonetheless, the driver refused to submit to the test(s) requested.

Signature of Law Enforcement Officer or
Correctional Officer

THE AFFIDAVIT MUST BE NOTARIZED OR ATTESTED TO (F.S. 117.10)



The foregoing instrument was sworn and subscribed before me:

The foregoing instrument was sworn and subscribed before

me this 3 day of JUNE, 20 19,

by A SOLOWAY 8586,

who is personally known to me or who has produced

KNOWN LEO as identification

Notary Public Paris Pound (#24639)

Signature of Attesting Officer

Title _____

Date _____

Note: Mail or hand deliver to the designated Bureau of Administrative Reviews office, Department of Highway Safety and Motor Vehicles, with the driver's license, the appropriate copy of the UTC, and the probable cause affidavit.



**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	☐	539.001 FS	Other: All records relating to pawnbroker transactions.	
	☐	119.0712(2)	Other: Personal information contained within a motor vehicle record	

REVIEW COMPLETED BY

Booking Number: 2019018272

Date: 2019018273

Specialist Name/ID: howardt/7185

SCANNED
JUN - 3 2019