

019449-174

# Arrest Report

19CT16175

FLORIDA HIGHWAY PATROL  
P.O. BOX 540007, GREENACRES, FL 33454

Report Date / Time 9/1/2019 02:38 PM	Report Number FHP99ARR806393	Case Number/Cad Number FHPL19OFF058066 / LWRC19CAD160526	Reporting Officer Name S.S. LALJIE
Originating Agency ORI	Occur Date Time Range 09/01/2019 13:10:35 -	Jurisdiction	Clearance

### Location of Occurrence

County PALM BEACH	Location Type PUBLIC PLACE	Location Description SR9 SB @ SR706			
Street Number SR9	Street SB S OF SR706	Apt/Lot/Bldg PALM BEACH GARDENS	City PALM BEACH GARDENS	State FL	Zip Code 33418

### Defendant

First Name DANIEL	Middle Name JASON	Last Name DODGE	Suffix	Race WHITE	Sex MALE	Height 507	Weight 115	Hair BRO	Eyes BLU
MNI #	SSN	Date of Birth 08/25/1973	Age 46	Place of Birth HAGERSTOWN MD USA	Drivers License or other ID D320170733050	State FL	ID Type E		
Address * / 2001 SW GOLF LN , BOYNTON BEACH, FL 33426 /									

### Arrest

Arrest Date/Time 9/1/2019 2:08:56 PM	Arrest Location Type PUBLIC PLACE	Arrest Location Description DONALD ROSS RD E OF SR9				
Street Number DONALD ROS	Street E E OF SR9	Apt/Lot/Bldg	County PALM BEACH	City PALM BEACH GARDENS	State FL	Zip Code

### Charge : S

Counts 1	Charge 316.193.1	Bond Amount \$0.00	<input type="checkbox"/> No Bond
Charge Degree N	Charge Level MISDEMEANOR	General Offense Code DUI-UNLAW BLD ALCH	
Charge Description DUI ALCOHOL OR DRUGS			

### Bond Set by Court

Bond Amount	<input type="checkbox"/> No Bond
Bond Type(s)	

### Probable Cause

On Sunday September 1st, 2019 at approximately 1:11 PM, I was on routine patrol on Interstate 95 (SR9) traveling southbound from the Martin County / Palm Beach County Line. As I came over Indiantown Road (SR706) I observed several vehicles stopping and a black vehicle with front end damage facing northbound in the southbound travel lanes outside center lane. I activated my

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SEP 02 2019

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emergency lights and exited my patrol vehicle to check on the people. I met with several witnesses, who advised me of what happened. Based on the crash damage and witnesses, I ascertained that the black Jetta entered the right shoulder and collided with the guardrail. Subsequently, the vehicle entered the center lane and the front of the vehicle collided with a black Nissan on the front right side. The Nissan came to a stop on the left shoulder and the Jetta came to a stop on the outside center lane facing northbound in the southbound lanes. I arrived on scene and met with a witness identified by NJ license as Hector Villa, License Number V43513206111742. Mr. Villa advised me that he observed the Black Jetta weaving in and out of the lanes and driving on the shoulder. Mr. Villa advised that the Black Jetta crashed into the guardrail and then hit the Black Nissan. Mr. Villa advised that the Black Jetta was occupied by only one person and described him as a white male, skinny and wearing a white shirt and camo pants. Mr. Villa advised that the driver of the Black Jetta took a cooler and beers and put it on the right grassy shoulder. Upon completing my traffic crash investigation, I determined all of the events described to me being accurate and exactly what my traffic crash investigation concluded. The driver who was identified to me by FL DL as Daniel Jason Dodge had a very strong, obvious and distinct odor of an unknown alcoholic beverage emitting from his breath as he spoke. Mr. Dodge was very unsteady on his feet and swayed from side to side and front to back as he stood and leaned against his vehicle for balance. Mr. Dodge's eyes were glassy and watery and his face was flushed. Mr. Dodge was transported off of the highway by Tpr. A. Fernandez to a roadway just east of SR9 on Donald Ross Road to conduct Field Sobriety Exercises. I informed Mr. Dodge that my crash investigation was complete and that I would now be conducting a criminal investigation for DUI. I read Mr. Dodge, Miranda Warnings and he advised that he understood and would speak with me. I asked Mr. Dodge where he was coming from and where he was going to. Mr. Dodge advised that he was coming from Woolbright and passed his exit because he was going to a hotel. I asked Mr. Dodge if he had anything to drink and he advised yes and that he had a couple beers a couple hours ago. I then asked Mr. Dodge if he would submit to Field Sobriety and he said yes. I asked Mr. Dodge if he had any medical issues, any issues with his eyes, any issues with neck, back, feet or hips and he advised no that he is healthy. I then asked Mr. Dodge if he was taking any medication and he advised no.

#### Roadside Tasks

Performed on a side street that was flat, free of any debris and utilizing a solid white line.

HGN:- While standing Mr. Dodge had to be told several times not to move his head. Mr. Dodge was unsteady on his feet and swayed from side to side and front to back in a circular motion.

Left eye- lack of smooth pursuit

Right eye- lack of smooth pursuit

Left eye- Distinct and sustained nystagmus at maximum deviation

Right eye- Distinct and sustained nystagmus at maximum deviation

Left eye- onset of nystagmus prior to 45 degrees

Right eye- onset of nystagmus prior to 45 degrees

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**Walk and Turn-** I explained and demonstrated this task to Mr. Dodge and he advised that he understood and could complete the task.

Mr. Dodge could not maintain starting position while I was explaining and demonstrating this exercise. Mr. Dodge attempted to start before asked to begin the exercise. Mr. Dodge stopped walking and raised his arms from his sides throughout this task to steady and balance himself. Mr. Dodge stepped off of the line on steps two going out and coming back. Mr. Dodge took the incorrect number of steps 11 going out and 12 coming back. Mr. Dodge lost balance while making the turn. Mr. Dodge did not step heel to toe on any of his steps but stepped more with the side of his toes to the side of his heels. Mr. Dodge did not count his steps out loud.

**One Leg Stand-** I explained and demonstrated this task to Mr. Dodge and he advised that he understood and could complete the task.

Mr. Dodge could not maintain starting position and attempted to begin before being advised to do so. Mr. Dodge was very unsteady on his feet and swayed from side to side and front to back in a circular motion. Mr. Dodge picked his foot up and put it down on the count of 1 due to losing balance. Mr. Dodge picked his foot up again and put it down after the count of 1. Mr. Dodge picked his foot up again and placed it down after the count of 1. Mr. Dodge then asked if he could turn and I stated yes. Mr. Dodge turned and picked his foot up again. Mr. Dodge got to the count of 5 before losing balance again and placing his foot down.

Upon completion of the roadside exercises and the totality of the circumstances, I placed Mr. Dodge under lawful arrest for DUI at 2:08 PM and he was transported to the PBSO BAT by Tpr. A. Fernandez. We arrived at the BAT at 2:30 PM, and I began a 20-minute observation. During that time Mr. Dodge did not have anything by mouth or regurgitate. Mr. Dodge was walked into the Breathalyzer room and agreed to a sample of his breath. Mr. Dodge provided two samples .117 at 3:05 PM and .126 at 3:08 PM. Mr. Dodge was then booked in to PBSO Jail for DUI. The crash scene and the roadsides were captured on FHP 1684 in car camera and have been transmitted to the server. There is video of the Breathalyzer room at PBSO. All of the events occurred within Palm Beach County, State of Florida.

**Jail Bookin Facility**

Booking Date/Time	Booking County	Booking Facility	Booking Facility Phone Number
0.0000	PALM BEACH	PALM BEACH COUNTY CORRECTIONS	(561) 688-4400

Booking Facility Location

3228 GUN CLUB ROAD WEST PALM BEACH, FLORIDA 33406

Booking Number

Booking Comments

**Court**

Court County	Court Location
PALM BEACH	3228 GUN CLUB ROAD WEST PALM BEACH, FL 33406

SC  
SEP 17


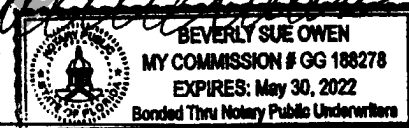
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Court CRIMINAL JUSTICE COMPLEX	Court Phone 561-355-2994	Court Appearance Date / Time 10/02/2019 1:00P	Court Fine
Comments			

Officer Name Rank / ID #	Involvement On Report / Reporting Role	Officer Agency Org/Unit
A. FERNANDEZ TROOPER 2932		FLORIDA HIGHWAY PATROL FHPL1LWRC1PALM BEACHSR702 TO MARTIN LN
S.S. LALJIE TROOPER 2834	REPORTING OFFICER	FLORIDA HIGHWAY PATROL FHPL1LWRC1PALM BEACHK9

The undersigned certifies and swears that he/she has just and reasonable grounds to believe that the above named Defendant, committed violation(s), of law, on the below date(s) and time(s), as listed in the probable cause associated with this report:

**Reporting Officer**

Officer Name S.S. LALJIE	Office Rank TROOPER	Officer ID No. 2834	Sworn and subscribed before me, the undersigned authority This the <u>1st</u> day of <u>September</u> <u>2019</u> DEPUTY OF THE COURT, NOTARY OR LAW ENFORCEMENT
Officer Agency FLORIDA HIGHWAY PATROL	 		
Officer Signature <i>SS</i>			

NOT A CERTIFIED COPY

SEP 02 2019

**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: 80-006240 Software: 8100.27  
Date of Test: 09/01/2019

Date of Last Agency Inspection: 08/16/2019  
Observation Period Began: 14:30  
Subject's Name: DANIEL JASON DODGE

DOB: 08/25/1973 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	15:02
	Air Blank	0.000	15:03
	Control Test	0.082	15:03
	Air Blank	0.000	15:04
	Subject Sample #1	0.117	15:05
	Air Blank	0.000	15:06
	Air Blank	0.000	15:07
	Subject Sample #2	0.126	15:08
	Air Blank	0.000	15:09
	Control Test	0.081	15:09
	Air Blank	0.000	15:10
	Diagnostics Check	OK	15:10

Cylinder Lot: 00919080A3  
Exp: 03/05/2021

State of Florida, County of Palm Beach

Personally appeared before me the undersigned authority, who (4 is personally known to me or (  ) produced \_\_\_\_\_ as identification, and who after being placed under oath, states:

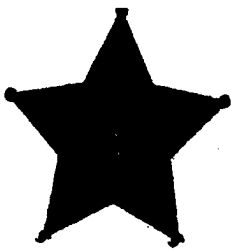
I SUE OWEN, hold a valid Breath Test Operator permit issued by the Florida Department of Law Enforcement, I administered the above breath test to the subject named above in accordance with Chapter 11D-8, Florida Administrative Code, and this form is a true and accurate report of that breath test.

Breath Test Operator: Sue Owen Date: 09/01/19  
Signature

Sworn to (or affirmed) before me this 1ST day of September 2019

Signature of Notary Public-State of Florida: [Signature] Printed Name of Notary Public-State of Florida: S. Laljie

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 316.1934(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 322.2615, F.S.



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

PBSO CASE # 19-110551 PBSO ZONE 3-16

AGENCY CASE # FHPL19OFF058066 CRASH CASE # \_\_\_\_\_

TIME OF STOP/CRASH 1:08 PM DATE 9/1/19 DAY Sunday

SUBJECT'S NAME Daniel Dodge RACE W SEX M

HGT 507 WGT 115 DOB 9/25/73

LOCATION Donald Ross E of SR 9

ARRESTING OFFICER'S NAME & ID TPR. S. Laljie 938 AGENCY FHP-L

DIVISION: L

NOTIFIED BY COMMO yes call in

ARRIVAL AT FACILITY 2:30 PM

Arrest Time 2:08 PM

BREATH RESULTS:

1. .117
2. .126
3. /
4. /

TESTING OFFICER'S ID 8184 PBSO VIDEOTAPE # N/A

NOT A CERTIFIED

SEP 02 2019

# TESTING FACILITY TASK REPORT

AGENCY: \_\_\_\_\_

CASE NUMBER: 17-11557

VIDEO TAPE NUMBER: \_\_\_\_\_

START TIME: 15:00 ENDING TIME: \_\_\_\_\_

TESTS RESULTS: 1) \_\_\_\_\_ TIME \_\_\_\_\_ A.M./P.M. 2) \_\_\_\_\_ TIME \_\_\_\_\_ A.M./P.M.  
3) \_\_\_\_\_ TIME \_\_\_\_\_ A.M./P.M. 4) \_\_\_\_\_ TIME \_\_\_\_\_ A.M./P.M.

OPERATOR: \_\_\_\_\_

ENGINEER/TECHNICIAN: \_\_\_\_\_

OFFICER'S OBSERVATIONS

CONDITIONS: \_\_\_\_\_

REMARKS: \_\_\_\_\_

NOT A CERTIFIED COPY

SCANNED  
SEP 02 2017

# WITNESS LIST

Name <u>SEAN LALJIE</u>	On Scene <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Statement <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Home Address <u>N/A</u>		
Place of Employment <u>FHP</u>		
Employment Address <u>P.O. BOX 540007 GREENACRES FL. 33454</u>		
Phone Numbers: Primary <u>(561) 357-4000</u>	Work <u>          </u>	Secondary <u>          </u> <span style="float: right;">Select One</span>
Can Testify To: <u>CRASH INVESTIGATION, DUI INVESTIGATION</u>		
Name <u>HECTOR VILLA</u>	On Scene <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Statement <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Home Address <u>75 EDWIN ST. RIDGEFIELD PAR. NJ. 07660</u>		
Place of Employment <u>          </u>		
Employment Address <u>          </u>		
Phone Numbers: Primary <u>646-961-8267</u>	Mobile <u>          </u>	Secondary <u>          </u> <span style="float: right;">Select One</span>
Can Testify To: <u>WHEEL WITNESS</u>		
Name <u>ALAIN FERNANDEZ</u>	On Scene <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Statement <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Home Address <u>          </u>		
Place of Employment <u>FHP</u>		
Employment Address <u>PO BOX 540007 GREENACRES FL. 33454</u>		
Phone Numbers: Primary <u>561-357-4000</u>	Work <u>          </u>	Secondary <u>          </u> <span style="float: right;">Select One</span>
Can Testify To: <u>TRANSPORT</u>		
Name <u>          </u>	On Scene <input type="checkbox"/> Yes <input type="checkbox"/> No	Statement <input type="checkbox"/> Yes <input type="checkbox"/> No
Home Address <u>          </u>		
Place of Employment <u>          </u>		
Employment Address <u>          </u>		
Phone Numbers: Primary <u>          </u>	Select One <u>          </u>	Secondary <u>          </u> <span style="float: right;">Select One</span>
Can Testify To: <u>          </u>		

Case Number: FHPL19OFF058066

THI Case Number: N/A

Page 1

SCA  
SEP 02 2009

SUBJECT: \_\_\_\_\_ 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) \_\_\_\_\_

SCAN  
SEP 02 11



**Palm Beach County Sheriff's Office – Arrests Only**

	X	Florida State Statute	Description	Page Number(s)
I/E Exemptions	<input type="checkbox"/>	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	<input type="checkbox"/>	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	<input type="checkbox"/>	119.071(4)(c)	Undercover personnel.	
	<input type="checkbox"/>	119.071(2)(f)	Confidential informants (CIs).	
	<input type="checkbox"/>	119.071(2)(e)	Confession.	
Public Info. Exemptions	<input type="checkbox"/>	985.04(1)	Juvenile offender records.	
	<input type="checkbox"/>	119.071(h)(i)	Assets of a crime victim.	
	<input type="checkbox"/>	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	<input type="checkbox"/>	394.4615(7)	Mental health information.	
	<input type="checkbox"/>	119.071(4)(d)(2)(a)	Home address, telephone, Social Security number, date of birth, or photos of active/former LE personnel, spouses, and children.	
Florida Rules of Judicial Administration 2.420 (Rule of 23)	<input checked="" type="checkbox"/>	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	<input type="checkbox"/>	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	<input type="checkbox"/>	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	<input type="checkbox"/>	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2019028627	Date: 09/02/2019
	Specialist Name/ID: AM/31562

SCAF  
 SEP 02