0508538

19CT10511

ARREST / NOTICE TO APPEAR

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

1 JUVENILE

ADMINISTRATION

OBTS Number

Agency ORI Number: 0500800

Agency Name: West Palm Beach Police Department

Agency Report Number (N.T.A.'s only): 9 | 4 | 2019-0009966

Charge Type: Check as many as apply. ☐ 1. Felony ☐ 2. Traffic Felony ☒ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

If Weapon Seized, Enter Type: NOT APPLICABLE

Multiple Clearance Indicator

Location of Arrest (Including Name of Business): 1800 BLK PALM BEACH LAKES BLVD

Location of Offense (Business Name, Address): 1800 BLK PALM BEACH LAKES BLVD, WEST PALM BEACH,

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
06/08/2019	02:01					

DEFENDANT

Name (Last, First, Middle): TORRANCE, DAVID L

Alias: Alias (Name, DOB, Soc. Sec. #, Etc.)

Race (W - White, B - Black, I - American Indian, O - Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	M	05/31/1959	5'07	250	GREEN	BROWN	FAIR	Heavy

Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description)

Marital Status | Religion

Indication of: Alcohol Influence ☒ Yes ☐ No ☐ Unk. ☐ Drug Influence

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

19490 SARA LANE, FLINT, TX 75762

Residence Type: 1. City 2. County 3. Florida 4. Out of State: 4

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

19490 SARA LANE, FLINT, TX 75762

Address Source: TX DL

Business Address (Name, Street) (City) (State) (Zip) Phone

Occupation

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
29100611 / TX			PASADINA, CA	

CO-DEF

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 ☐ Other: ☐ Legal Custodian

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 Department and Released 2. TOT JAC 3. Incarcerated

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

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.

☐ Yes, by: ☐ No:

School Attended | Grade

Property Crime? ☐ Yes ☒ No | Description of Property | Value of Property

CODE

Drug Activity: N. N/A P. Possess S. Sell B. Buy 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. Synthetic U. Unknown Z. Other

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #
DUI PROPERTY DAMAGE	316.193(3)(c)1	316.193(1)(3)(4)(1)

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
	N	/		1	☐ Y ☒ N		

CHARGE

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		/			☐ Y ☐ N		

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #

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		/			☐ Y ☐ N		

INTAKE

Health / Apparent Physical Condition of Defendant

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 ☐ Postal Bond ☐ South County Mental Health

PROPERTY - Received By | Released By | Released To

Transported By | Date Transported | Time Transported | Other

NOTICE TO APPEAR

☒ 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): Criminal Justice CRIMINAL JUSTICE COMPLEX
Court Date and Time: 07/11/2019 08:30:00 3228 GUN CLUB ROAD

2019 JUN -8 AM 8:2

No Photo Available

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

ADMIN

HOLD for Other Agency

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other

Intake Deputy I.D. # Pouch #

Signature of Arresting Officer: 2064

Name of Arresting Officer (Print): BUTLER, JAMES I.D. # 02064

Transporting Officer: J. Butler I.D. # 2064 Agency WPBPD

Name Verification (Printed by Arrestee) (PRINT)

Witness here if subject signed with an "X".

380

PAGE 1 OF 1

☐ COURT ☐ STATE ATTORNEY ☐ AGENCY ☐ CENTRAL RECORDS ☐ JAIL ☐ CRIME ANALYSIS ☐ P.I.O. ☐ DEFENDANT

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 8 DAY OF June 2019 AT 2204 hours A.M./P.M.:

SUBJECT: Torrance, David CASE NUMBER: 20190009966

AGENCY: ***West Palm Bch. Police Dept.*** ARRESTING OFFICER: ***J. Butler #2064***

PERSONAL CONTACT

DRIVING PATTERN: ACTUAL PHYSICAL CONTROL (PHYSICAL EVIDENCE PUTTING DRIVER BEHIND THE WHEEL)

I arrived on scene to investigate a two vehicle traffic crash. Once I arrived on scene I made contact with one of the involved parties driving vehicle two, white male Zawada, Joseph DOB: 06/15/94. Zawada stated that he was driving east bound on Palm beach Lakes Blvd in the far left lane of travel approaching Congress avenue. Zawada advised the defendant Torrance, David was traveling West Bound on Palm Beach Lakes in Vehicle one in the far left lane. Zawada advised he observed from his rear veiw passenger mirror Torrance strike the center median curb then enter Zawada's lane of travel. Zawada advised Torrance then collided with his vehicle, striking his vehicles drivers side front and rear door with Vehicles one's front passenger bumper. Both drivers came to a complete stop and exited their vehicles. Zawada advised Torrance stumbled getting out of the vehicle, had disheveled clothing, and his breath wreaked of alcohol. Zawada advised Torrance was the sole occupant of vehicle one and he can identify him as the driver of vehicle one that crashed into him. Zawada contacted Police Dispatch and notified Dispatch he was involved in traffic accident and he believes Torrance is driving intoxicated.

OBSERVATION OF DRIVER: I observed Torrance had glossy eyes and very disheveled clothing while on scene. Torrance could not recall being involved in a traffic accident. and handed Officer K.Elliot an insurance card instead of the drivers rental agreement as asked. Torrance breathe smelled like an moderate odor of an unknown alcoholic beverage. Torrance was swaying while standing up and was having a hard time focusing and completing simple task during the crash investigation.

DRIVER'S STATEMENTS: Torrance advised he was just leaving Best Buy and headed back to his hotel room. Torrance also advised he was unaware he was involved in a traffic accident and doesnt know how his drivers side front tire blew out. Torrance stated he could not recall hitting Zawada's vehicle during the traffic accident.

ODORS: Torrance, David had a strong odor of an unknown alcoholic beverage coming from his breathe

GENERAL OBSERVATIONS

SPEECH: Appeared Normal

ATTITUDE: Passive

CLOTHING: blue dress shirt/black dress pants, dress shoes

MEDICAL PROBLEMS: None

MEDICATIONS: None

OTHER: Requested two adequate samples of his breath at which point he submitted. Two samples were obtained, .177/.179. Miranda read, subject selectively answered questions. Please see video and Q&A sheet.

Lighting: ☐ Streetlights ☐ Headlights ☐ Daylight
Weather: ☐ Clear ☐ Cloudy ☐ Raining ☐ Overcast ☐ Windy
W n T: ☐ Sidewalk ☐ Pavement ☐ Concrete ☐ Line ☐ No Line

SUBJECT: Torrance, David CASE NUMBER: 20190009966

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

☒ LEFT EYE DOES NOT FOLLOW SMOOTHLY

☒ RIGHT EYE DOES NOT FOLLOW SMOOTHLY

☒ LEFT EYE JERKS AT 45 DECREE ANGLE OR LESS

☒ RIGHT EYE JERKS AT 45 DEGREE ANGLE OR LESS

☒ DISTINCT JERKING LEFT EYE MAXIMUM DEVIATION

☒ DISTINCT JERKING RIGHT EYE MAXIMUM DEVIATION

Torrance, David was swaying and moving his head after being given numerous instructions to only follow the tip of the pen with his eyes. Torrance was unable to complete this task and had to use his hands to keep his head still. Torrance failed to follow the tip of the pen completely and would stop following the pen several times and just stop and stare at me.

WALK AND TURN: Torrance, David Missed the heel to toe on all nine steps and walked off of the line with his left and right foot on steps 2,3,4,5,6,7,8,9 and did not complete the turn as instructed to do so. Torrance used his arms for balance during the whole duration of the exercise and was instructed not to do so.

ONE LEG STAND: Torrance refused to perform the one leg stand and advised he would do very bad. I asked Torrance why and he advised he is just not good at it and would fall and hurt himself.

FINGER TO NOSE: Torrance, David was unable to keep his eyes closed during the exercise and never used the tip of his finger to touch the tip of his nose as instructed to do so. Torrance advised he understood the exercise and I demonstrated for him the exercise prior to asking him to perform the task.

ROMBERG/ALPHABET: Torrance, David was unable to recite the alpha bet from A through Z and lost track several times and was unable to complete the alphabet correctly. Torrance recited the alphabet as A,B,C,D,E,F,G,H,I,L,M,N,T,M,N,O,T,S,R,. Torrance really struggled with this exercise and ended the Alpha Bet with the letter T. Torrance advised before he began the exercise that he has a masters degree as his highest level of education and could perform the exercise with no problems.

BREATH TEST RESULTS:	.0177	0.179	None

STATE OF FLORIDA
COUNTY OF PALM BEACH

THE FOLLOWING INSTRUMENT WAS NOTARIZED OR SWORN BEFORE ME THIS 6/8/19 (DATE)

1732 CT

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

FLORIDA DEPARTMENT OF LAW ENFORCEMENT
ALCOHOL TESTING PROGRAM
BREATH ALCOHOL TEST AFFIDAVIT

Instrument Type: Intoxilyzer 8000
Instrument Registered To: WEST PALM BEACH PD
Instrument Serial Number: 80-001235 Software: 8100.27
Date of Test: 06/08/2019

Date of Last Agency Inspection: 05/31/2019
Observation Period Began: 00:10
Subject's Name: DAVID TORRANCE DOB: 05/31/1959 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	00:33
Air Blank	0.000	00:33
Control Test	0.080	00:33
Air Blank	0.000	00:34
Subject Sample #1	0.177	00:34
Air Blank	0.000	00:35
Air Blank	0.000	00:37
Subject Sample #2	0.179	00:37
Air Blank	0.000	00:38
Control Test	0.081	00:38
Air Blank	0.000	00:39
Diagnostics Check	OK	00:39

Cylinder Lot: 24818080A2
Exp: 10/05/2020

State of Florida, County of PALM BEACH

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

I ROBERT H HEISSER, 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: _____ Date: 6/8/19
Signature

Sworn to (or affirmed) before me this 8 day of JUNE, 2019

JAMES BUTLER 2061 J. BUTLER
Signature of Notary Public-State of Florida 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 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.

FDLE/ATP FORM 38 – MARCH 2004, Ref. 11D-8.007

WITNESS LIST

CASE NUMBER: **20190009966**

ARRESTING OFFICER: **J.Butler**

ADDRESS: **West Palm Beach Police Dept 600 Banyan Blvd West Palm Beach Florida**

PHONE NUMBERS: (HOME) N/A (WORK) **(561) 822-1635**

CAN TESTIFY TO: **Drivers Actions and Roadsides**

NAME: **R.Heisser**

ADDRESS **c\o 600 Banyan Blvd**

PHONE NUMBERS (HOME) (WORK)

CAN TESTIFY TO: **Breathe Tech**

NAME: **R.Secord**

ADDRESS **c\o 600 Banyan Blvd**

PHONE NUMBERS (HOME) (WORK)

CAN TESTIFY TO: **Maintenance Tech**

NAME: **K.Elliot**

ADDRESS **c\o 600 Banyan Blvd**

PHONE NUMBERS (HOME) (WORK)

CAN TESTIFY TO: **Drivers actions/Wheel witness**

NAME: **Zawada, Joseph**

ADDRESS **2808 AMALEI DR 301**

PHONE NUMBERS (HOME) **610-393-2825** (WORK)

CAN TESTIFY TO: **Wheel Witness**

NAME:

ADDRESS

PHONE NUMBERS (HOME) (WORK)

CAN TESTIFY TO:

NAME:

ADDRESS

PHONE NUMBERS (HOME) (WORK)

CAN TESTIFY TO:

NAME:

ADDRESS

PHONE NUMBERS (HOME) (WORK)

CAN TESTIFY TO:

NAME:

ADDRESS

PHONE NUMBERS (HOME) (WORK)

CAN TESTIFY TO:

NAME:

ADDRESS

PHONE NUMBERS (HOME) (WORK)

CAN TESTIFY TO:

TESTING FACILITY TASK REPORT

AGENCY: WEST PALM BEACH POLICE

SUBJECT: TORRANCE, DAVID CASE NUMBER: 19 9966

DATE: 6/8/19 VIDEO TAPE NUMBER DIGITAL

BREATH TESTS RESULTS: 1) .177 % TIME 0037 A.M./P.M. 2) .179 % TIME 0037 A.M./P.M.

3) _____ % TIME _____ A.M./P.M. 4) _____ % TIME _____ A.M./P.M.

BREATH OPERATOR: HESSLER

MAINTENANCE TECHNICIAN: SECOND

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED NORMAL

ATTITUDE: POSTIVE POLITE

CLOTHING: DRESS PANTS BLUE L/S SHIRT

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER: CODE 20 MIN STARTED
OBSERVATION A/E COMPLETED

COMMENTS: A/S REQUESTED TWO SAMPLES OF BREATH AT WHICH POINT HE SUBMITTED A/S HESITATION
.177 6/21 L
.179 6/21 L

MEDICATE ODOR OF ALCOHOL

SCAN
JUN - 9

DISTRIBUTION: WHITE - [illegible] YELLOW - DHSMV PINK - [illegible] GOLDENROD - Jail FD594 (REV)

SUBJECT: Terrence D CASE NUMBER: [redacted]

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) on VIDEO

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.

SCANNED JUN

SUSPECT'S SIGNATURE: (X) on VIDEO

WHITE - STATE ATTY. YELLOW - DHSMV PINK - CENTRAL RECORDS GOLD - JAIL

WPBPD

SUBJECT: [redacted] CASE NUMBER: [redacted]

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? No comment

WHERE WERE YOU GOING? Back to the Hotel

WHAT STREET OR HIGHWAY WERE YOU ON? No comment

DIRECTION OF TRAVEL? [redacted] WHERE DID YOU START? [redacted]

WHAT TIME DID YOU START? [redacted] WHAT TIME IS IT NOW? [redacted]

WHAT IS TODAY'S DATE? [redacted] WHAT DAY OF THE WEEK IS IT? [redacted]

WHAT COUNTY AND CITY ARE YOU IN NOW? [redacted]

WHEN DID YOU LAST EAT? [redacted] WHAT DID YOU EAT? [redacted]

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? [redacted]

HOW MUCH DO YOU WEIGH? [redacted] HAVE YOU BEEN DRINKING? [redacted] WHAT? [redacted]

HOW MUCH? [redacted] WHERE? [redacted] WITH WHOM? [redacted]

WHEN DID YOU HAVE YOUR FIRST DRINK? [redacted] AND YOUR LAST DRINK? [redacted]

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? [redacted]

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? [redacted] ARE YOU UNDER THE INFLUENCE? [redacted]

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? [redacted] HOW MUCH? [redacted]

WHAT? [redacted] WHERE? [redacted] WHEN? [redacted]

WHAT LINE OF WORK ARE YOU IN? [redacted] WHEN DID YOU LAST WORK? [redacted]

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? [redacted] WHAT? [redacted]

ARE YOU SICK OR INJURED? [redacted] WHAT'S WRONG? [redacted]

DO YOU LIMP? [redacted] DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? [redacted]

WERE YOU IN AN ACCIDENT TODAY? No comment

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? No WHEN? [redacted]

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? [redacted] WHO? [redacted] WHY? [redacted]

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? [redacted] WHAT? [redacted] WHEN? [redacted]

DO YOU HAVE:
- EPILEPSY? [redacted]
- GLASS EYE? [redacted]
- FALSE TEETH? [redacted]
- EAR INFECTION? [redacted]
- INNER EAR TROUBLE? [redacted]
- DIABETES? [redacted]

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? [redacted]

DO YOU TAKE INSULIN? [redacted] IF SO, WHEN WAS YOUR LAST INJECTION? [redacted]

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? [redacted] WHERE? [redacted]

INTERVIEWER: [redacted]