

ARREST / NOTICE TO APPEAR

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

1

JUVENILE

OBTS Number			ARREST / NOTICE TO APPEAR												
Agency ORI Number			Agency Name		17CT3388					Agency Report Number (N.T.A.'s only)					
0500200			Boca Raton Police Department		3 2 2017-002668										
Charge Type:			<input type="checkbox"/> 1. Felony	<input type="checkbox"/> 3. Misdemeanor	<input type="checkbox"/> 5. Ordinance						If Weapon Seized				
Check as many as apply:			<input type="checkbox"/> 2. Traffic Felony	<input type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 6. Other						Enter Type None/not Applicable				
Location of Arrest (Including Name of Business)			Location of Offense (Business Name, Address)												
1400 NW 15TH AVE, BOCA RATON, FL			1400 NW 15TH AVE, BOCA RATON, FL 33486												
Date of Arrest		Time of Arrest		Booking Date		Booking Time		Jail Date		Jail Time		Location of Vehicle			
02/21/2017		03:23		02/21/2017		03:33		02/21/2017		00:00		WESTWAY TOWING			
Name (Last, First, Middle) SALDIVAR, DEMY TAYS															
Race		Sex		Date of Birth		Height		Weight		Eye Color		Hair Color		Complexion	Build
W - White B - Black		I - American Indian O - Oriental/Asian		W F		02/28/1994		5'01		115		BROWN BLACK		MEDIUM	Small
Scars, Marks, Unique Physical Features (Location, Type, Description)															
Marital Status		Religion													
S		CATHOLIC													
Local Address (Street, Apt. Number)			(City)		(State)		(Zip)		Phone		Residence Type:				
1580 NW 15TH AVE 8, BOCA RATON, FL 33486									(401) 365-8340		1. City 3. Florida 2. County 4. Out of State				
Permanent Address (Street, Apt. Number)			(City)		(State)		(Zip)		Phone		Address Source				
1580 NW 15TH AVE 8, BOCA RATON, FL 33486									(401) 365-8340		FL DL				
Business Address (Name, Street)			(City)		(State)		(Zip)		Phone		Occupation				
DUFFYS,											Server				
D/L Number, State			Soc. Sec. Number		INS Number			Place of Birth (City, State)			Citizenship				
S431178945681 / FL								SANTO DOMINGO,			US				
Co-Defendant Name (Last, First, Middle)															
Race		Sex		Date of Birth											
Co-Defendant Name (Last, First, Middle)															
Race		Sex		Date of Birth											
Name (Last, First, Middle)															
Residence Phone															
□ Parent <input type="checkbox"/> Other: _____															
□ Legal Custodian															
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 <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															
□ 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															
Drug Activity			S. Sell		R. Smuggle		K. Dispenses/ Distribute		M. Manufacture/ Produce/ Cultivate		Z. Other		Drug Type		
N. N/A			B. Buy		D. Deliver								B. Barbiturate C. Cocaine A. Amphetamine		
P. Possess			T. Traffic		E. Use								H. Hallucinogen M. Marijuana O. Opium/Deriv.		
													P. Paraphernalia/ Equipment S. Synthetic		
													U. Unknown Z. Other		
C H A R G E															
Charge Description															
DUI															
Drug Activit		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence		Warrant / Capias Number		Statute Violation Number	
N				/		2017-002668		1		<input type="checkbox"/> Y <input checked="" type="checkbox"/> N				316.193(1)	
Bond															
C H A R G E															
Charge Description															
Drug Activit		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence		Warrant / Capias Number		Statute Violation Number	
				/										Violation of ORD #	
Bond															
C H A R G E															
Charge Description															
Drug Activit		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence		Warrant / Capias Number		Statute Violation Number	
				/										Violation of ORD #	
Bond															
I N T A K E															
Health / Apparent Physical Condition of Defendant															
GOO															
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:															
Check whicelopies: <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 VAN CAMP Released By VAN CAMP Released To PBCJ															
Transported by															
Date Transported		Time Transported		Other											
02/21/2017		00:00													
N O T I C E															
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) South County 200 W Atlantic Ave Delray Beach, FL 33444															
Court Date and Time 03/27/2017 08:30:00															
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															
HOLD for other Agency															
Signature of Arresting Officer															
74															
Name of Arresting Officer (Print) VAN CAMP, JEFFERY A.															
ID. # 747															
(PRINT)															
Transporting Officer KRIGER 474															
Agency BRC															
Name Verification (Printed by Arrestee) 74															
Multiple Clearance Indicator N															
Witnessed that defendant signed with an "X".															
No Photo Available															
PAGE 1 OF 1															
6 SCANNED															

A D M I N	OBTS Number		PROBABLE CAUSE AFFIDAVIT					1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	JUVENILE
	Agency ORI Number		Agency Name			Agency Report Number					
FL 0500200	BOCA RATON POLICE DEPARTMENT			3 2 2017-002668		Special Notes:					
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									
Name (Last, First, Middle)		Alias			Race		Sex	Date of Birth			
SALDIVAR, DEMY TAYS					W		F	02/28/1994			
C H A R G E S	Charge Description		Charge Description								
	316.193(1) DUI										
V I C T I M	Charge Description		Charge Description								
Victim's Name (Last, First, Middle)					Race		Sex	Date of Birth			
STATE OF FLORIDA,					U						
Local Address (Street, Apt. Number)		(City)	(State)	(Zip)	Phone		Address Source				
100 NW 2ND AVE, BOCA RATON, FL 33432					(561) -						
Business Address (Name, Street)		(City)	(State)	(Zip)	Phone		Occupation				
					(561) -						
<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 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><input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the <u>21</u> day of <u>February</u>, <u>2017</u> at <u>01:39</u> (Specifically include facts constituting cause for arrest.)</p>											
<p>On 2-21-2017 at 0136 hours, while on routine patrol, I observed a Black Honda Civic bearing Fl Tag# ERA C12 traveling westbound on NW 13th St. I began following the vehicle and saw that the car was failing to maintain a single lane. I turned on my in-car camera to capture the vehicle's driving pattern. At one point while following the car, the vehicle swerved out of the roadway and into the grass. The vehicle also had an obstructed license plate. I then conducted a traffic stop on the car, it stopped at 1400 NW 15th Ave. I approached the driver's side portion of the car and made contact with a W/F driver identified as Demy Salvidar. Upon speaking with Salvidar, I immediately detected the odor coming from her person. Salvidar had a slurred speech and her eyes were red/bloodshot. I asked Salvidar where she was coming from, Salvidar first advised that she was coming from "Bru's Room," she quickly changed her story and said she was coming from The Ninja, which is a local restaurant. Salvidar further stated that she is almost home and is very tired. Ofc. K. Cohen arrived on scene a short time later to provide back-up.</p>											
<p>At this point I asked Salvidar to exit her car so that I could ask her further questions. Salvidar exited her vehicle and walked to the front of my marked police vehicle. While there, Salvidar advised that she just got off from work and was driving home before I stopped her. I informed Salvidar that she just told me that she was coming from The Ninja. Salvidar seemed confused and could not provide a valid timeline as to what time she got off from work and when she went to The Ninja. Salvidar advised that she had consumed, "two glasses of wine" while at dinner. A short time later, Salvidar changed her story and said she only drank one and a half glasses of wine. It should be noted that while speaking with Salvidar outside of the vehicle, I continued to smell the odor of alcohol coming from her breath. Salvidar was also slightly swaying while speaking with me.</p> <p>I informed Salvidar of my observations and requested that she submit to the standard roadside exercises to dispel my alarm she was driving impaired. She informed me she did</p>											
ADMINISTRATIVE	<p>SWORN AND SUBSCRIBED BEFORE ME</p> <p><u>DUBINSKY, SETH W</u> </p> <p>NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)</p> <p>SCANNED</p> <p>02/21/2017</p> <p>DATE</p> <p>FEB 23 2017</p> <p>SIGNATURE OF ARRESTING / INVESTIGATING OFFICER</p> <p><u>VAN CAMP, JEFFERY ALAN (747)</u></p> <p>NAME OF OFFICER (PLEASE PRINT)</p> <p>02/21/2017</p> <p>DATE</p>										
PAGE 1 OF 2											

COURT

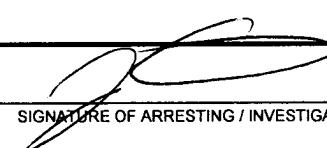
STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.

A D M I N I S T R A T I V E	OBTS Number Agency ORI Number FL 0500200	PROBABLE CAUSE AFFIDAVIT SUPPLEMENT Agency Name BOCA RATON POLICE DEPARTMENT	1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias 1	JUVENILE	
N	Charge Type: Check as many as apply. <input type="checkbox"/> 1. Felony <input type="checkbox"/> 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	Agency Report Number 3 2 2017-002668	Special Notes:	
D E F	Name (Last, First, Middle) SALDIVAR, DEMY TAYS	Alias	Race W	Sex F	Date of Birth 02/28/1994
<p>not have any injuries. Salvidar said that she takes medication for depression but she could not name the name of the medication.</p> <p>I explained and demonstrated each task before she performed them.</p> <p>The first task was the Horizontal Gaze Nystagmus. While observing HGN, each eye had a constant jerking while at maximum deviation. Lack of smooth pursuit was present in both eyes. Onset prior to 45 degrees was also present. While performing this task, Salvidar stated that she could feel herself "swaying."</p> <p>The second task was the Walk and Turn. She did not maintain the starting position by falling off the line several times. While performing the task she used her arms for balance. She did not go heel to toe the entire time. After walking her first 9 steps, she asked me if she should turn.</p> <p>The third task was the One Leg Stand. She did not follow the instructions and initially had her leg bent. I had to stop the exercise and re-explain the task. Salvidar used her arms for balance while performing the task. She also fell off the line and lost her balance. She counted the number 16 twice. She did not count out loud as instructed the entire time.</p> <p>The fourth task was the Finger to Nose (L-R-L-R-R-L). L- Salvidar raised her right index finger to her nose instead of her left. She was swaying. She held her finger to her nose and I had to remind her to bring it directly back down to her side. R- Missed the tip of her nose. L- no issue. R- No issue. L- No issue.</p> <p>The fifth task was the Rhomberg Alphabet. Salvidar stated she could complete the task without incident. Salvidar stated the Alphabet as follows: V, H, I, J, K, I, N, G, H, I. Salvidar then said, "fuck" and "sorry." She continued the Alphabet with L, M, N, O, P, R, S, T, U, V. Salvidar stopped and could not finish the exercise.</p> <p>Based on my investigation, I placed Salvidar under arrest for DUI per F.S.S. 316.193(1) and transported her to the Boca Raton Police Dept. for processing. Ofc. Reissi conducted the Intoxilyzer Testing. While in the DUI room, Salvidar refused to provide a breath sample. I read her implied consent and again she refused to provide a breath sample.</p> <p>Salvidar was later transported to the Palm Beach County Jail for final disposition. The vehicle was towed by Westway Towing. The video of the roadside exercises were uploaded into BRPD Evidence.</p>					
ADMINISTRATIVE	<p>SWORN AND SUBSCRIBED BEFORE ME</p> <p>DUBINSKY, SETH W </p> <p>NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)</p> <p>02/21/2017</p> <p>DATE</p>				
	<p>SIGNATURE OF ARRESTING / INVESTIGATING OFFICER</p> <p></p> <p>VAN CAMP, JEFFERY ALAN (747)</p> <p>NAME OF OFFICER (PLEASE PRINT)</p> <p>02/21/2017</p> <p>DATE</p>				
	<p>PAGE 2 OF 2</p>				

COURT

STATE ATTORNEY

CENTRAL RECORDS

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CRIME ANALYSIS

P. I. O.

FEB 23 2017