

#0429342

P#3468

## ARREST / NOTICE TO APPEAR

Juvenile Referral Report

1. Arrest

3. Request for Warrant

2. N.T.A.

4. Request for Capias

Juvenile

1

OBTS Number			
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Agency Name

PALM BEACH COUNTY SHERIFF'S OFFICE

Agency Report Number (N.T.A.'s only)

06-

17066333

ADMINISTRATIVE	Agency ORI Number		Agency Name		Agency Report Number (N.T.A.'s only)						
	FLO 500000		PALM BEACH COUNTY SHERIFF'S OFFICE		06-		17066333				
Charge Type: Check as many as apply.		<input type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Weapon Seized / Type		Multiple Clearance Indicator					
Location of Arrest (Including Name of Business)		Haverhill Rd at Bowman Lake Worth FL 33415		Location of Offense (Business Name, Address)		Haverhill Rd at Bowman Lake Worth FL 33415					
Date of Arrest 4/19/17		Time of Arrest 02:58		Booking Date	Booking Time	Jail Date	Jail Time				
						Location of Vehicle Released to family					
Name (Last, First, Middle)		Alias (Name, DOB, Soc. Sec. #, Etc.)									
Ortega, Emanuel											
Race W - White 1 - American Indian B - Black 0 - Oriental/Asian		Sex W M		Date of Birth 6/26/1985	Height 5'11	Weight 170	Eye Color Bro	Hair Color Bla	Complexion Med	Build Med	
Scars, Tattoos, Unique Physical Features (Location, Type, Description)				Marital Status Married		Religion CHRISTIAN		Indication of: Alcohol Influence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N Drug Influence <input type="checkbox"/> <input checked="" type="checkbox"/> Unk.			
Local Address (Street, Apt. Number)		(City)		(State)		(Zip)		Phone ( )		Residence Type: 1. City <input type="checkbox"/> 3. Florida 2. County <input type="checkbox"/> 4. Out of State <input type="checkbox"/>	
5503 Channel Dr Grenacres FL 33463										2	
Permanent Address (Street, Apt. Number)		(City)		(State)		(Zip)		Phone ( )		Address Source FL DL	
Business Address (Name, Street)		(City)		(State)		(Zip)		Phone ( )		Occupation Painter	
D/L Number, State 0632200852260		Soc. Sec. Number		INS Number				Place of Birth (City, State) Puerto Rico		Citizenship US	
Co-Defendant Name (Last, First, Middle)				Race	Sex	Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 2. At Large <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"/> 3. Felony <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile			
<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other:		Name (Last) <i>OR</i> (First) (Middle)						Residence Phone ( )			
Address (Street, Apt. Number)		(City)		(State)		(Zip)		Business Phone ( )			
Notified by: (Name)		Date		Time		Juvenile Disposition		2. TOT HRS / DYS 3. Incarcerated			
Released To: (Name)		Relationship						Date		Time	
The above address 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 (Phone 355-2526) informed of any change of address. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)						School Attended		Grade			
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property				Value of Property					
CODE CHARGE CODE CHARGE CHARGE CHARGE CHARGE CHARGE CHARGE CHARGE NOTICE TO APPEAR	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. Synthetics	U. Unknown Z. Other
	Charge Description DUI				Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number 316.193(1)		Violation of ORD #		
Drug Activity N		Drug Type N	Amount / Unit	Offense # 17066333		Warrant / Capias Number		Bond			
Charge Description				Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation of ORD #			
Drug Activity		Drug Type	Amount / Unit	Offense #		Warrant / Capias Number		Bond			
Charge Description				Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation of ORD #			
Drug Activity		Drug Type	Amount / Unit	Offense #		Warrant / Capias Number		Bond			
Charge Description				Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number		Violation of ORD #			
Drug Activity		Drug Type	Amount / Unit	Offense #		Warrant / Capias Number		Bond			
Location (Court, Room Number, Address)		3228 Gun Club Rd West Palm Beach FL 33406									
Court Date and Time Month May Day 11 Year 2017 Time 08:30		APR 24 2017 AP 9									
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 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											
Signature of Defendant (or Juvenile and Parent/Custodian) Date Signed											
HOLD for other Agency Name: <i>Ortega, Emanuel</i>		Signature of Arresting Officer X		Name Verification (Printed by Arrestee)							
<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other:		Name of Arresting Officer (Print) J. Schneider #8501		I.D. # 8501							
Intake Deputy <i>Cpl. Hardmon 4716</i> I.D. # <i>4716</i> Pouch #		Transporting Officer J. Schneider 8501		ID # Agency PBSO							
						Witness here if subject signed with an -X- <i>Ortega, Emanuel</i>					

DISTRIBUTION: WHITE - COURT COPY

GREEN - STATE ATTORNEY

YELLOW - AGENCY

PINK - AGENCY

GOLD - DEFENDANT (N.T.A.'s ONLY)



# D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 19 DAY OF April 20 17, AT 02:17  AM PM  
SUBJECT: Ortega, Emanuel CASE NUMBER: 17066333  
AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: Inv. J. Schneider  
**PERSONAL CONTACT**

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

D/S Norris observed a blue minivan fail to stop for a stop sign at the intersection of Haverhill Rd and Bowman Street. D/S Norris stated the following in a sworn affidavit:

On 04-19-17 at approximately 0218 hours while traveling South on S Haverhill Rd at the intersection of Bowman St., Palm Beach County, Greenacres, FL 33463, I observed a blue Dodge Caravan bearing FL tag Y61EBD exit onto S Haverhill Rd pulling out into my lane of travel almost striking my marked patrol vehicle. I initiated my lights in an attempt to stop the vehicle for the traffic violation. The vehicle traveled south approximately an eight of a mile before stopping at Lake Worth Rd and S Haverhill Rd. I approached the vehicle and made contact with the driver later identified by his FL ID as W/M Emanuel Ortega 06-26-85. He had blood shot watery eyes and a smell of an unknown alcoholic beverage coming from his person. When I asked for his drivers license and registration, Ortega advised me that his license was on the floor board. I then asked him to grab his license and as he opened the drivers side door, I observed a small "New Amsterdam" vodka bottle. I then contacted Dui Investigator Schneider #8501 who assumed the investigation. This ended my involvement in the case.

## OBSERVATION OF DRIVER:

As I arrived at 02:38 I found Ortega standing at the rear of his vehicle. Coming into close proximity to Ortega I immediately noticed the odor of a unknown alcoholic beverage coming from his person. Engaging in conversation with Ortega I noticed the odor of a unknown alcoholic beverage also came from his breath. While speaking with Ortega I noticed his speech was slurred and he had red, bloodshot, and watery eyes.

## DRIVER'S STATEMENTS:

You saved my life man. I have a alcohol problem.

## ODORS:

Distinct and profound odor of a unknown alcoholic beverage

## **GENERAL OBSERVATIONS**

SPEECH: **Slurred**

ATTITUDE: **Cooperative**

CLOTHING: **Black sweater, camo pants, sandals**

## MEDICAL/OTHER:

STATE OF FLORIDA  
COUNTY OF PALM BEACH

Inv. J. Schneider

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 19 day of April 20 17 by Inv. J. Schneider

(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)



Samantha Palmer  
Commission # FF172377  
Expires: OCT 28, 2018  
BONDED THRU  
1ST FLORIDA NOTARY, LLC

## ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

LT EYE-LACK OF SMOOTH PURSUIT  
 LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION  
 LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

RT EYE-LACK OF SMOOTH PURSUIT  
 RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION  
 RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

**Other Observations:**

Ortega swayed while standing stationary. He had difficulty in keeping his head still and had to be reminded several times to do so and departed the resting position on multiple occasions.

**WALK & TURN:**

Ortega was unable to maintain the resting position and had to be repositioned several times. Beginning the task Ortega stumbled on step four and raised his right arm on step five. He nearly fell while turning. Returning Ortega stumbled on step three and then raised his arms more than two inches from steps four to nine.

**ONE LEG STAND:**

Ortega swayed while standing in the resting position. Upon beginning the task he was unable to keep either foot elevated for the duration of thirty seconds and also failed to continue looking at his foot.

**FINGER TO NOSE:**

Ortega swayed while standing in the resting position. Beginning the task Ortega failed to close his eyes as instructed and had to be reminded to do so. The first left he touched the tip of his finger to the tip of his nose. The left he touched the tip of his finger to the side of his nose. The second left and right he touched the tip of his finger to the tip of his nose. The third right he touched the tip of his finger to the tip of his nose. The third left he touched the side of his finger to the tip of his nose.

**ROMBERG ALPHABET:**

Ortega swayed while standing in the resting position. Beginning the task Ortega failed to keep his eyes closed as instructed.

**BREATH TEST RESULTS:** 1) Ref 2) Ref 3) 4)

STATE OF FLORIDA  
COUNTY OF PALM BEACH

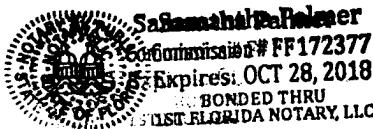
Inv. J. Schneider

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 19 day of April 2017 by Inv. J. Schneider

(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)



# WITNESS LIST

17066333

CASE NUMBER: \_\_\_\_\_

ARRESTING OFFICER: **Inv. J. Schneider**

ADDRESS: 3228 Gun Club Rd West Palm Beach FL 33406

PHONE NUMBERS (HOME): \_\_\_\_\_ (WORK) **561 688 3000**

CAN TESTIFY TO: **DUI Investigation**

NAME: **D/S A. Norris #24996**

ADDRESS: 3228 Gun Club Rd West Palm Beach FL 33406

PHONE NUMBERS (HOME): \_\_\_\_\_ (WORK) **561 688 3000**

CAN TESTIFY TO: **Initial Stop**

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: \_\_\_\_\_

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NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE NUMBERS (HOME): \_\_\_\_\_ (WORK): \_\_\_\_\_

CAN TESTIFY TO: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE NUMBERS (HOME): \_\_\_\_\_ (WORK): \_\_\_\_\_

CAN TESTIFY TO: \_\_\_\_\_

SCANNED

APR 24 202

# TESTING FACILITY TASK REPORT

AGENCY: PBSO

SUBJECT: ORTEGA, EMANUEL

CASE NUMBER: 17-066333

DATE: 04/19/2017

VIDEO DVD NUMBER: 62472

BEGINNING TIME: 0351

ENDING TIME: 0402

BREATH TESTS RESULTS: 1) R  TIME  0353 A.M.  P.M.  2) XX  TIME  XX A.M.  P.M.   
3) XX  TIME  XX A.M.  P.M.  4) XX  TIME  XX A.M.  P.M.

BREATH OPERATOR: J. BIGGS #7607

MAINTENANCE TECHNICIAN: D/S J Karklecke #6467

## TESTING OFFICER'S OBSERVATIONS

SPEECH: MUMBLED

ATTITUDE: CALM, COOPERATIVE, TALKATIVE

CLOTHING: BLACK HOODIE JACKET, CAMO SHORTS, BLACK SANDALS

MEDICAL CONDITIONS: EPILEPSY

MEDICATIONS: NONE/ FANAPT DURING Q&A

## OTHER:

EYES GLASSY AND RED

## COMMENTS:

ARRESTING OFFICER CONDUCTED THE 20 MINUTE OBSERVATION BEGINNING AT 0320  
SUBJECT REFUSED TO TAKE BREATH TEST

A/O READ IC, SUBJECT STATED HE UNDERSTOOD.

A/O READ RIGHTS, SUBJECT STATED HE UNDERSTOOD HIS RIGHTS

A/O CONDUCTED Q&A, SUBJECT ANSWERED QUESTIONS

Scanned by  
APP 2020

## **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. Schneider 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  
APR 24 2016*

**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? Home

WHAT STREET OR HIGHWAY WERE YOU ON? Halechill Rd

DIRECTION OF TRAVEL? S WHERE DID YOU START? Bowman Ave

WHAT TIME DID YOU START? Just before stop WHAT TIME IS IT NOW? Un

WHAT IS TODAY'S DATE? 18th WHAT DAY OF THE WEEK IS IT? Tue / Wed morning

WHAT COUNTY AND CITY ARE YOU IN NOW? Palm Beach

WHEN DID YOU LAST EAT? 4pm WHAT DID YOU EAT? CC's pizza

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? See friend

HOW MUCH DO YOU WEIGH? 170 HAVE YOU BEEN DRINKING? Yes WHAT? Vodka - new Amsterdam

HOW MUCH? 2 shots - min. bottles WHERE? At friends WITH WHOM? 1 friend

WHEN DID YOU HAVE YOUR FIRST DRINK? 3pm AND YOUR LAST DRINK? 1 shot before I left

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? out of mini bottle

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

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

WHAT? No WHERE? N/A WHEN? N/A

WHAT LINE OF WORK ARE YOU IN? Painter WHEN DID YOU LAST WORK? Yesterday

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? No WHAT? N/A

ARE YOU SICK OR INJURED? No WHAT'S WRONG? N/A

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? N/A

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

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? Yes WHAT? Seizure Med WHEN? N/A

DO YOU HAVE: EPILEPSY? Yes

GLASS EYE? No

FALSE TEETH? No

EAR INFECTION? No

INNER EAR TROUBLE? No

DIABETES? No

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? No

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

INTERVIEWER: INV. Schneidler

WHITE - STATE ATTY.

YELLOW - DHSMV

PINK - CENTRAL RECORDS

GOLD - JAIL

SCANNED  
APR 24 2017

Florida *The Sunshine State*

DRIVER LICENSE CLASS E

EMANUEL  
ORTEGA

1503 CHANNEL DR  
GLENDALE, FL 33463-0000  
008-0000005 SEX: M  
2013 HG 13  
2021

DRIVER'S LICENSE

Operation of a motor vehicle constitutes consent to any sobriety test required by law.

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APR 24 2017