

0309185

## ARREST / NOTICE TO APPEAR

943

OBTS Number		ARREST / NOTICE TO APPEAR							1	JUVENILE											
Agency ORI Number		Agency Name					Agency Report Number (N.T.A.'s only)														
0501700		Jupiter Police Department					5   4   17-002093		1707818												
Charge Type: Check as many as apply.		<input type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other					If Weapon Seized Enter Type <b>NONE</b>		Multiple Clearance Indicator 02												
Location of Arrest (Including Name of Business)		Location of Offense (Business Name, Address)																			
200 BLK MILITARY TRL, JUPITER FL		399 W INDIANTOWN RD/S LOXAHATCHEE DR, JUPITER, FL																			
Date of Arrest		Time of Arrest		Booking Date		Booking Time		Jail Date		Jail Time											
04/30/2017		00:56		04/30/2017		01:06				Location of Vehicle EAST COAST TOWING											
Name (Last, First, Middle) <b>GRIMPE, ERIC CHARLES</b>										Alias (Name, DOB, Soc. Sec. #, Etc.)											
Race W - White    1 - American Indian B - Black    0 - Oriental/Asian		Sex <b>W</b> <b>M</b>		Date of Birth <b>05/08/1967</b>		Height <b>6'03</b>		Weight <b>225</b>		Eye Color <b>BROWN</b>		Hair Color <b>BALD</b>		Complexion <b>LIGHT</b>		Build <b>Large</b>					
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)										Marital Status <b>D</b>		Religion		Indication of: Alcohol Influence <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk.		Drug Influence <input type="checkbox"/> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk.					
Local Address (Street, Apt. Number) <b>1 WINDSOR RD W, JUPITER, FL 33469</b>										(City)		(State)		(Zip)		Phone <b>(561) 234-9800</b>		Residence Type: 1. City    3. Florida 2. County    4. Out of State		1	
Permanent Address (Street, Apt. Number) <b>1 WINDSOR RD W, JUPITER, FL 33469</b>										(City)		(State)		(Zip)		Phone <b>(561) 234-9800</b>		Address Source		<b>DL</b>	
Business Address (Name, Street)										(City)		(State)		(Zip)		Phone		Occupation			
DL Number, State <b>G651203671680 / FL</b>		Soc. Sec. Number		INS Number				Place of Birth (City, State) <b>HACKENSACK, NJ</b>		Citizenship											
Co-Defendant Name (Last, First, Middle)										Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor					
Co-Defendant Name (Last, First, Middle)										Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor					
Name (Last, First, Middle) <b>10</b>										Residence Phone											
Address (Street, Apt. Number) <b>58</b>										Business Phone											
Notified by: (Name) <b>2</b>										Date		Time		JUVENILE DISPOSITION							
Released To: (Name) <b>2</b>										Relationship		Date		1. Handled/Processed within Department and Released    2. TOT JAC    3. Incarcerated							
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							
<input type="checkbox"/> 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 B. Buy P. Possess		R. Smuggle D. Deliver T. Traffic		K. Disperses/ 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	
C H A R G E		Charge Description <b>DUI-DAMAGE TO PERSON/PROPERTY</b>										Statute Violation Number <b>316.193(3)(C)(1)</b>				Violation of ORD #					
C H A R G E		Drug Activity <b>N</b>		Drug Type /		Amount / Unit		Offense # <b>17-002093</b>		Counts <b>1</b>		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Warrant / Capias Number				Bond			
C H A R G E		Charge Description <b>ACCIDENT - W/ PROPERTY DAMAGE, LEAVING THE SCENE</b>										Statute Violation Number <b>316.061(1)</b>				Violation of ORD #					
C H A R G E		Drug Activity <b>N</b>		Drug Type /		Amount / Unit		Offense # <b>17-002093</b>		Counts <b>1</b>		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Warrant / Capias Number				Bond			
C H A R G E		Charge Description										Statute Violation Number				Violation of ORD #					
C H A R G E		Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Warrant / Capias Number				Bond			
I N T A K E		Health / Apparent Physical Condition of Defendant										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:									
I N T A K E		Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> T.O.T. County Jail <input type="checkbox"/> Posted Bond <input type="checkbox"/> South County Mental Health										PROPERTY - Received By				Released By		Released To			
I N T A K E		Transported By										Date Transported <b>// : :</b>		Time Transported		Other					
N O T I C E		<input checked="" type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court <input type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.										Location (Court, Room) <b>North County</b> <b>PALM BEACH GARD</b> Court Date and Time <b>05/31/2017 08:30:00</b>				No Photo Available					
T O A P P E A R		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) <b>4/30/17</b>														Date Signed <b>2017</b>							
A D M I N		HOLD for Other Agency					Signature of Arresting Officer <b>G. BORROWS</b>					Name Verification (Printed by Arrestee) <b>2017</b>									
A D M I N		<input type="checkbox"/> Dangerous <input type="checkbox"/> Resident Arrest <input type="checkbox"/> Suicidal					Name of Arresting Officer (Print) <b>BORROWS, ANDREW</b>					I.D. # <b>1138</b>									
A D M I N		Intake Deputy <b>SSCANED</b>		Pouch # <b>SSCANED</b>		Transporting Officer <b>PFC BORROWS</b>		I.D. # <b>380</b>		Agency <b>JPD</b>		(PRINT)									
Witness here if subject signed with an "X".														PAGE <b>1 OF 1</b>							

## PROBABLE CAUSE AFFIDAVIT

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

1

JUVENILE

X

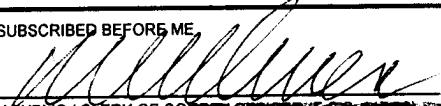
A D M I	OBTS Number <b>FL 0501700</b>	Agency Name <b>JUPITER POLICE DEPARTMENT</b>	Agency Report Number <b>5   4   17-002093</b>	
N	Charge Type: Check as many as apply. 1. Felony      3. Misdemeanor      5. Ordinance 2. Traffic Felony      4. Traffic Misdemeanor      6. Other	Special Notes:		
D E F	Name (Last, First, Middle) <b>GRIMPE, ERIC CHARLES</b>	Alias	Race <b>W</b>	Sex <b>M</b> Date of Birth <b>05/08/1967</b>
C H A R G E S	Charge Description <b>316.061(1) ACCIDENT - W/ PROPERTY DAMAGE, LEAVING THE</b>	Charge Description <b>316.193(3)(C)(1) DUI WITH PROPERTY DAMAGE</b>		
V I M	Charge Description	Charge Description		
V I M	Victim's Name (Last, First, Middle) <b>State Of Florida</b>	Race	Sex	Date of Birth
C T I M	Local Address (Street, Apt. Number) (City)      (State)      (Zip)	Phone	Address Source	
C T I M	Business Address (Name, Street) (City)      (State)      (Zip)	Phone	Occupation	
<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 _____ that he/she saw the arrested person committ the below acts.</p> <p><input type="checkbox"/> confessed to _____ admitting to the below facts.      <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the <u>30</u> day of <u>April</u> <u>2017</u> at <u>00:19</u> (Specifically include facts constituting cause for arrest.)</p>				

On the above date at approximately 0019 hours, I was dispatched to a crash that had just occurred in the area of West Indiantown Road and Loxahatchee Drive.

As the call was being dispatched to me, I was arriving on scene. I observed a black Ford Pickup truck bearing Florida License Plate ICIA23 crashed into a pole on the southwest corner of the intersection. There was an unidentified male on a bicycle and another male, identified to me as James Thompson IV running up to me on the sidewalk. No one else was in the area. The truck was still running. Both males stated that a male just left towards the west through the alleyway towards Burger King. The male on the bicycle advised me that the driver had nearly hit him as he traveled along West Indiantown Road. Thompson advised me that he heard a crash and went quickly to the scene. Thompson stated that he saw a 6 foot tall bald male walking around the truck and then leaving towards Burger King. The unidentified male on the bicycle stated that the male who walked through the alley towards Burger King was the driver of the vehicle. Both agreed that no one else was in the area in the area after the crash. The male on the bicycle stated that he wanted to leave and didn't want to be involved any further and left the scene.

I advised Jupiter Police Officers of the suspect's description and a short time later K-9 Officer Nicolson located the registered owner of the truck, Eric Grimpe, who closely matched the description given by both witnesses. Grimpe was just to the south of the Burger King Restaurant. Grimpe denied being involved in a crash and stated he had been eating at Burger King.

I became aware of another crash involving the same truck. The other vehicle was purportedly at the Circle K located at 126 West Indiantown Road. This crash had apparently happened immediately prior to the crash where I was located. Officer Yochum responded to that scene to investigate that crash (17-002094). Officer Yochum found

ADMINISTRATIVE	SWORN AND SUBSCRIBED BEFORE ME 	SIGNATURE OF ARRESTING / INVESTIGATING OFFICER 
NOTARY PUBLIC / CLERK OF COURT / CLERK OF RECORD / DEPUTY CLERK	NOTARY PUBLIC / CLERK OF COURT / CLERK OF RECORD / DEPUTY CLERK	SIGNATURE OF ARRESTING / INVESTIGATING OFFICER
04/30/2018	B. SUE OWEN State of Florida-Notary Public Commission # FF093160 My Commission Expires May 30, 2018	BORROWS, ANDREW (1138) NAME OF OFFICER (PLEASE PRINT)
DATE	DATE	04/30/2017
SCANNED	SCANNED	PAGE 1 OF 3

COURT

STATE ATTORNEY  
MAY 03 2018

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.

OBTS Number

PROBABLE CAUSE AFFIDAVIT  
SUPPLEMENT
 1. Arrest  
 2. N.T.A.  
 3. Request for Warrant  
 4. Request for Capias

1

JUVENILE

X

D A M I Agency ORI Number <b>FL 0501700</b>	Agency Name <b>JUPITER POLICE DEPARTMENT</b>	Agency Report Number <b>5 4 17-002093</b>
N Charge Type: Check as many as apply. <input type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other		Special Notes:
D E F Name (Last, First, Middle) <b>GRIMPE, ERIC CHARLES</b>	Alias	Race <b>W</b> Sex <b>M</b> Date of Birth <b>05/08/1967</b>

Grimpe to be at fault in that crash and issued Grimpe several citations.

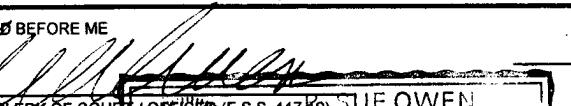
I transported Thompson to the area where Grimpe was. Thompson immediately and unequivocally confirmed that Grimpe was the man he had seen around the truck and leaving the scene immediately after the crash.

I returned to the scene. In my absence, Palm Beach County Fire Rescue had responded and turned the vehicle off. I observed a white cell phone on the front driver's side floorboard of the vehicle. Activating it revealed a photo of Grimpe with two children on the front screen. I took photos of the interior of the vehicle. Grimpe's vehicle had struck an FPL power pole and had run over a pedestrian traffic control signal.

I then returned to Grimpe's location on Military Trail. I noticed he was very unsteady on his feet, with a poor gait and he had bloodshot, glassy eyes. Grimpe had slurred speech. I set up my vehicle in order to interview Grimpe. He refused to walk to the front of it. Grimpe stated he was just eating at Burger King and was not anywhere near his truck and had no idea where it was. Grimpe refused to speak anymore to me or walk to the front of my vehicle. At that time, I placed Grimpe under arrest and directed him to place his hands behind his back. I secured Grimpe's hands in handcuffs which I checked for spacing and double locked.

I transported Grimpe to the Palm Beach County Breath Alcohol Testing Facility. I observed Grimpe for 20 minutes. During this time I researched Grimpe's home address in the Jupiter Police Department CAD /RMS system. Grimpe called Jupiter Police from (561) 234-9800 2/16/2016 at approximately 1544 hours (CAD #16042999). I called that number. The phone I recovered from the driver's side floorboard rang. Upon completion of the 20 minute observation period, I requested a sample of Grimpe's breath. At first he refused to talk, but then said that he would submit as I hadn't seen him driving. Grimpe did not provide adequate samples of his breath and did not even activate the tone on the instrument. Technician Owen advised me that Grimpe was not making any effort to provide a sample of his breath. I read Grimpe Implied Consent from a prepared text and advised him that continued refusal to provide a sample would be taken as a refusal. Grimpe again did not appear to make any genuine attempt to provide a sample of his breath. I took this lack of effort as a de facto refusal.

I then left the BAT with Grimpe in order to get Grimpe medically cleared. As I sat in my car to start it, Grimpe inquired as to the location of his vehicle. I advised Grimpe that it was towed by East Coast Towing. Grimpe then said that he had lent the truck to a friend and had no idea where it was and was never anywhere near it. I transported Grimpe to the Wellington Regional Medical Center for clearance. While at the Wellington Regional Medical Center, I asked Grimpe if he would provide a voluntary sample of his breath. He declined. Upon receiving medical clearance, I transported Grimpe back to the BAT Center to complete my paperwork. While processing Grimpe's property, I located

ADMINISTRATIVE	SWORN AND SUBSCRIBED BEFORE ME  	SIGNATURE OF ARRESTING / INVESTIGATING OFFICER  
	NOTARY PUBLIC / CLERK OF COURT / GREETER (F.S.S. 117.10) SUE OWEN State of Florida-Notary Public 04/30/2017 Commission # FF093160 DATE My Commission Expires	BORROWS, ANDREW (1138) NAME OF OFFICER (PLEASE PRINT) 04/30/2017 DATE

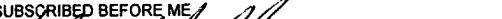
SCANNED  
COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P.I.O.  
MAY 03 2017

A D M I N		OBTS Number  <b>FL 0501700</b>	PROBABLE CAUSE AFFIDAVIT SUPPLEMENT		1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	<b>1</b>	JUVENILE	<b>X</b>
D E F		Agency ORI Number  <b>JUPITER POLICE DEPARTMENT</b>	Agency Name	Agency Report Number  <b>5 4 17-002093</b>					
D E F		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	Special Notes:						
D E F		Name (Last, First, Middle)  <b>GRIMPE, ERIC CHARLES</b>	Alias			Race  <b>W</b>	Sex  <b>M</b>	Date of Birth  <b>05/08/1967</b>	

a business card in Grimpe's name. It listed Grimpe's phone number as (561) 234-9800. I subsequently booked Grimpe into the Palm Beach County Jail, where he was charged with DUI with Property Damage per FSS 316.193(3)(C)(1) and Leaving the Scene of a Crash per FSS 316.061(1). Officer Yochum also charged Grimpe with a count of Leaving the Scene of a Crash with Property Damage per FSS 316.061(1).

PROBABLE CAUSE STATEMENT

NOT A CERTIFIED COPY

SWORN AND SUBSCRIBED BEFORE ME		 	
		 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER	
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S. 117.09) <b>SUE OWEN</b>  State of Florida-Notary Public Commission # FF093160 My Commission Expires May 30, 2018		<b>BORROWS, ANDREW (1138)</b> NAME OF OFFICER (PLEASE PRINT) <b>04/30/2017</b> DATE	
PAGE <b>3 OF 3</b>			

**COURT**

SCANNED  
STANLEY TORNEY

MAY 03 2017

## CENTRAL RECORDS

## JAIL

## CRIME ANALYSIS

P. I. O.

# TESTING FACILITY TASK REPORT

AGENCY: Jupiter P.D.  
SUBJECT: Grimpe, Eric Charles  
DATE: 04/30/17  
CASE NUMBER: 17-071023  
VIDEO TAPE NUMBER: DVD # 62546

BEGINNING TIME: 0203 ENDING TIME: 0211  
BREATH TESTS RESULTS: REFUSED TIME 0214 A.M./P.M.  
3) TIME A.M./P.M. 2) TIME A.M./P.M.  
4) TIME A.M./P.M.

BREATH OPERATOR: S. Owen #3184

MAINTENANCE TECHNICIAN: J. Karlecke #6467

## TESTING OFFICER'S OBSERVATIONS

SPEECH: \_\_\_\_\_

ATTITUDE: friendly, co-operative

CLOTHING: black shirt, jeans, blue LS shirt (knit)

MEDICAL CONDITIONS: non compacted cardio myopathy (heart defect)

MEDICATIONS: Seraldo <sup>2x day</sup>, Cardia <sup>2 1/2 day</sup>, 1 a day ramipril

OTHER: A in accident

COMMENTS: A/o & A arrived at 0137 hrs  
A/o observed 20 minutes (A would not answer  
A/o requested breath test, A refused <sup>intro</sup> questions  
As A was reading I/C A agreed to test  
(A said he was walking not in car when arrested)  
A held breath when trying to give breath  
Couldn't make even breath. A/o read I/C  
A kept saying he was trying. Continued to  
hold breath A/o called refusal.  
A/o read ch/w NO QSA  
A transported to hospital due to  
accident

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: 80-006029 Software: 8100.27  
Date of Test: 04/30/2017

Date of Last Agency Inspection: 04/21/2017  
Observation Period Began: 01:37  
Subject's Name: ERIC C GRIMPE

DOB: 05/08/1967 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	02:05
Air Blank	0.000	02:05
Control Test	0.081	02:06
Air Blank	0.000	02:06
Subject Sample #1	NSP*	02:09
Air Blank	0.000	02:10
Air Blank	0.000	02:12
Subject Sample #2	REF**	02:14
Air Blank	0.000	02:14
Control Test	0.080	02:15
Air Blank	0.000	02:15
Diagnostics Check	OK	02:15

\*No Sample Provided

\*\*Subject Test Refused

Cylinder Lot: 646645  
Exp: 12/05/2019

State of Florida, County of Palm Beach,

Personally appeared before me the undersigned authority, who  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: M. Miller

Date: 04/30/17

Signature

Sworn to (or affirmed) before me this 30<sup>th</sup> day of April, 2017

G. A. Borrows Ofc A. Borrows  
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.

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

I, PFC Andrew Borrows 380 / 1138, a duly certified Law Enforcement Officer or Correctional Officer,  
(Name of Officer reading Implied Consent Warning)

am a member of Jupiter Police Department, and I do swear  
(Name of law enforcement agency)

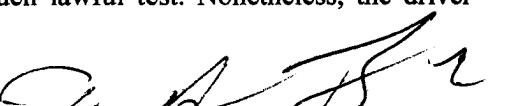
or affirm that on or about the 30th day of April, 20 17, at 0056  P.M.  A.M.

DRIVER Eric FIRST NAME Charles MIDDLE OR MAIDEN NAME Grimpe LAST NAME  
(Type or Print)

DL# G-651-203-67-168-0, state of Florida, was placed under lawful arrest for  
the offense of DUI With Property Damage by PFC Andrew Borrows 380 / 1138 and  
(Name of Arresting Officer)  
issued Citation # A7RX4VE.

That on or about the 30th day of April, 20 17, at 0214  P.M.  A.M.  
in Palm Beach County 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:

\_\_\_\_\_  
Signature of Attesting Officer

Title \_\_\_\_\_

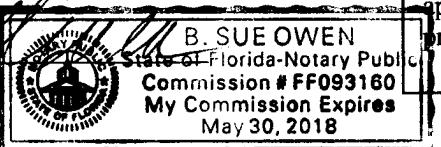
Date \_\_\_\_\_

(AFFIX SEAL)  
The foregoing instrument was sworn and subscribed before  
me this 30th day of April, 20 17,  
by PFC Andrew Borrows 380 / 1138,  
who is personally known to me or who has produced

PERSONALLY KNOWN

as identification

Notary Public



HSMV-BAR100 (REV. 10/2016)

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.

# 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? \_\_\_\_\_

WHERE WERE YOU GOING? \_\_\_\_\_

WHAT STREET OR HIGHWAY WERE YOU ON? \_\_\_\_\_

DIRECTION OF TRAVEL? \_\_\_\_\_ WHERE DID YOU START? \_\_\_\_\_

WHAT TIME DID YOU START? \_\_\_\_\_ WHAT TIME IS IT NOW? \_\_\_\_\_

WHAT IS TODAY'S DATE? \_\_\_\_\_ WHAT DAY OF THE WEEK IS IT? \_\_\_\_\_

WHAT COUNTY AND CITY ARE YOU IN NOW? \_\_\_\_\_

WHEN DID YOU LAST EAT? \_\_\_\_\_ WHAT DID YOU EAT? \_\_\_\_\_

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? \_\_\_\_\_

HOW MUCH DO YOU WEIGH? \_\_\_\_\_ HAVE YOU BEEN DRINKING? \_\_\_\_\_ WHAT? \_\_\_\_\_

HOW MUCH? \_\_\_\_\_ WHERE? \_\_\_\_\_ WITH WHOM? \_\_\_\_\_

WHEN DID YOU HAVE YOUR FIRST DRINK? \_\_\_\_\_ AND YOUR LAST DRINK? \_\_\_\_\_

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? \_\_\_\_\_

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? \_\_\_\_\_ ARE YOU UNDER THE INFLUENCE? \_\_\_\_\_

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? \_\_\_\_\_ HOW MUCH? \_\_\_\_\_

WHAT? \_\_\_\_\_ WHERE? \_\_\_\_\_ WHEN? \_\_\_\_\_

WHAT LINE OF WORK ARE YOU IN? \_\_\_\_\_ WHEN DID YOU LAST WORK? \_\_\_\_\_

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? \_\_\_\_\_ WHAT? \_\_\_\_\_

ARE YOU SICK OR INJURED? \_\_\_\_\_ WHAT'S WRONG? \_\_\_\_\_

DO YOU LIMP? \_\_\_\_\_ DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? \_\_\_\_\_

WERE YOU IN AN ACCIDENT TODAY? \_\_\_\_\_

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? \_\_\_\_\_ WHEN? \_\_\_\_\_

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? \_\_\_\_\_ WHO? \_\_\_\_\_ WHY? \_\_\_\_\_

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? \_\_\_\_\_ 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? \_\_\_\_\_

DO YOU TAKE INSULIN? \_\_\_\_\_ IF SO, WHEN WAS YOUR LAST INJECTION? \_\_\_\_\_

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? \_\_\_\_\_ WHERE? \_\_\_\_\_

INTERVIEWER: *John A. St. John, Jr.*

SUBJECT: \_\_\_\_\_ CASE NUMBER: \_\_\_\_\_ 3

## **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) \_\_\_\_\_

# WITNESS LIST

CASE NUMBER: 17-002093

ARRESTING OFFICER: PFC Andrew Borrows 380

ADDRESS: 210 Military Trail, Jupiter FL 33458

PHONE NUMBERS (HOME): \_\_\_\_\_ (WORK) 561 746-6201

CAN TESTIFY TO: PC

NAME: Officer Craig Yochum 383

ADDRESS: 210 Military Trail, Jupiter FL 33458

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) 561 746-6201

CAN TESTIFY TO: Other Crash investigation

NAME: Officer Michael Nicolson

ADDRESS 210 Military Trail, Jupiter FL 33458

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) 561 746-6201

CAN TESTIFY TO: Located suspect

NAME: James Thompson

ADDRESS 103 Greenbriar Drive, Jupiter FL 33458

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) 561 568 0858

CAN TESTIFY TO: Suspect ID

NAME: Ryan Adams

ADDRESS 11735 48th Pl N, Plymouth, MN 55442

PHONE NUMBERS (HOME) (612) 275-2500 (WORK) \_\_\_\_\_

CAN TESTIFY TO: First crash / driver of other vehicle

NAME: Jose Paniagua

ADDRESS 2549 SW 14 Terr, Pahokee, FL 33456

PHONE NUMBERS (HOME) (561) 914-4021 (WORK) \_\_\_\_\_

CAN TESTIFY TO: First Crash witness/ statement

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) SCANNED (WORK) \_\_\_\_\_

CAN TESTIFY TO: ..... 3 2017