

ARREST / NOTICE TO APPEAR				1. Arrest 2. N.T.A. 4. Request for Capias		3. Request for Warrant 5. Ordinance 6. Other		1 JUVENILE													
OBTS Number 0501700		Agency Name Jupiter Police Department		170 7618		Agency Report Number (N.T.A.'s only) 5 4 17-001980															
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 NONE		Multiple Clearance Indicator													
Location of Arrest (Including Name of Business) 1699 S CENTRAL BLVD/INDIAN CREEK DR EAST				Location of Offense (Business Name, Address) 1699 S CENTRAL BLVD/INDIAN CREEK DR E, JUPITER, FL																	
Date of Arrest 04/24/2017		Time of Arrest 00:47		Booking Date		Booking Time		Jail Date													
Jail Time		Location of Vehicle																			
Name (Last, First, Middle) JACKSON, ERIC NICHOLAS																					
Alias: Alias:																					
Race W - White B - Black		Sex I - American Indian O - Oriental/Asian		Date of Birth 07/02/1982		Height 5'11		Weight 240													
Eye Color BLUE		Hair Color BROWN		Complexion FAIR		Build Large															
Marital Status S Religion OTHER								Indication of: Alcohol Influence Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk. <input type="checkbox"/> Drug Influence Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk. <input type="checkbox"/>													
Local Address (Street, Apt. Number) 2208 MYRTLEWOOD CIR E, PALM BEACH GARDENS, FL 33418				(City) (State)		(Zip) (561) 568-0859		Phone													
Permanent Address (Street, Apt. Number) 2208 MYRTLEWOOD CIR E, PALM BEACH GARDENS, FL 33418				(City) (State)		(Zip) (561) 568-0859		Phone													
Business Address (Name, Street)				(City) (State)		(Zip) (561) 630-7099		Phone													
D/L Number, State J250214822420 / FL		Soc. Sec. Number		INS Number		Place of Birth (City, State) WEST PALM BEACH, US		Occupation Sales													
Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth													
Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth													
<input type="checkbox"/> Parent <input type="checkbox"/> Other: _____		Name (Last, First, Middle)								Residence Phone											
<input type="checkbox"/> Legal Custodian		(City) (State) (Zip)								Business Phone											
Notified by: (Name)				Date		Time		JUVENILE DISPOSITION													
Released To: (Name)				Relationship		Date		I. 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 N. N/A P. Possess		S. Sell B. Buy T. Traffic		R. Smuggle D. Deliver		K. Disperses/ Distribute		M. Manufacture/ Produce/ Cultivate		Z. Other									
Drug Type N		Amount / Unit /		Offense # 17-001980		Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Warrant / Capias Number		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 DUI - DRIVING WHILE UNDER INFLUENCE										Statute Violation Number 316.193(1)		Violation of ORD #							
Drug Activity N		Drug Type /		Amount / Unit /		Offense # 17-001980		Counts 1		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 #							
Drug Activity N		Drug Type /		Amount / Unit /		Offense #		Counts		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 #							
Drug Activity N		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:									
Check which applies:		<input type="checkbox"/> Released O.R. <input type="checkbox"/> Posted Bond		<input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> South County Mental Health		<input type="checkbox"/> T.O.T. County Jail		PROPERTY - Received By		Released By		Released To									
Transported By						Date Transported		Time Transported		Other		2017									
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) North County PALM BEACH GARD				APR 24 2017		No Photo Available									
T O A P P E A R		Court Date and Time 05/24/2017 08:30:00				Date Signed 4/24/17		APR 24 2017													
HOLD for Other Agency		Signature of Arresting Officer 340				Name Verification (Printed by Arrestee) Eric Jackson				APR 24 2017											
A D M I N		Name of Arresting Officer (Print) FANDREY, CHRISTOPHER				I.D. # 1182		(PRINT) Eric Jackson		PAGE 1 OF 1											
Inmate Deputy		ID # 10170017204		Pouch #		Transporting Officer Fandrey		I.D. # 340 JPD		Agency											
Witness here if subject signed with an "X".																					

03/17/2017
334

MAY 01 2017

04/24/2017 08:30:00

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 24 DAY OF April 20 17, AT 0033 AM PM

SUBJECT: Eric N. Jackson CASE NUMBER: 17-001980

AGENCY: JUPITER POLICE DEPARTMENT ARRESTING OFFICER: Ofc. Fandrey #340
PERSONAL CONTACT

DRIVING PATTERN: ACTUAL PHYSICAL CONTROL (PHYSICAL EVIDENCE OR STATEMENTS PUTTING DEF. BEHIND WHEEL OF VEHICLE)
White Lexus vehicle bearing FL tag #054HND was driving north on S. Central Blvd at Indian Creek Parkway. The vehicle continued around the round about west on Indian Creek Parkway and then continued around north on S. Central Blvd. The vehicle swerved across the solid white line on the right side of the roadway and then the dotted white line on the left side of the roadway multiple times. The vehicle was not able to maintain its lane.

OBSERVATION OF DRIVER:

I made contact with the driver and sole occupant of the vehicle who was positively identified him by FL DL as W/M Eric N. Jackson (7/02/1982). Jackson had red bloodshot glassy eyes and I noticed the odor of an unknown alcoholic beverage coming from his person. Jackson was mumbling and was trying to avoid eye contact while seated in the car. The odor of an unknown alcoholic beverage grew stronger as I spoke with Jackson. Located in the back seat floor board there was a plastic cup with a black straw coming from it that contained an unknown beverage. The cup was located in such a manner that it did not appear that the cup would be able to sit right while driving.

DRIVER'S STATEMENTS:

Jackson stated that he had a few drinks. When asked how many he continued to say a few. Jackson then advised he had been coming from hanging out with friends at a bar. Jackson stated that he had too much to drink. I asked Jackson on a scale of 1-10 with 1 being completely sober and 10 being the most drunk he has ever been in his life where he believed he was at, to which he replied a 6. I asked Jackson if he thought he should be driving and he said no.

ODORS:

Odor of an unknown alcoholic beverage coming from his person.

GENERAL OBSERVATIONS

SPEECH: **Mumbling**

ATTITUDE: **Upset, emotional, quite**

CLOTHING: **Pink shirt, Blue jeans, flip flops**

MEDICAL/OTHER: **Would not state**

STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 24 day of April 20 17 by Ofc. Fandrey #340

(Print name of Arresting/Investigative Officer) who is personally known to me and/or produced identification. Type of identification produced _____

Notary Public, Clerk of Court, Officer (F.S.S. 117.10)



SCANNED
MAY 01 2017

SUBJECT: Eric N. Jackson

CASE NUMBER 17-001980

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:

swaying side to side, unsteady on feet, red bloodshot glassy eyes.

WALK & TURN

Refused

ONE LEG STAND:

Refused

FINGER TO NOSE:

Refused

ROMBERG ALPHABET:

Refused

BREATH TEST RESULTS: Refused

Refused

STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

340

The foregoing instrument was sworn to or affirmed and subscribed before me this 24 day of April 2017 by Ofc. Fandrey #340

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced _____

Notary Public, Clerk of Court, Officer (F.S.S. 117.10)



SCANNED
MAY 01 2017

WITNESS LIST

CASE NUMBER: 17-001980

ARRESTING OFFICER: Ofc. Fandrey #340

ADDRESS: 210 Military Trail Jupiter FL 33458

PHONE NUMBERS (HOME) _____ (WORK) 561-746-6201

CAN TESTIFY TO: See PC

NAME: Ofc. Quiros #305

ADDRESS: 210 Military Trail Jupiter FL 33458

PHONE NUMBERS (HOME) _____ (WORK) 561-746-6201

CAN TESTIFY TO: Assisting on scene

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: _____

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PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

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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: _____

SCANNED

MAY 01 2017

TESTING FACILITY TASK REPORT

AGENCY: JPD

SUBJECT: JACKSON, ERIC N

CASE NUMBER: 17-068385

DATE: 04/24/2017

VIDEO DVD NUMBER: 62509

BEGINNING TIME: 0145

ENDING TIME: 0147

BREATH TESTS RESULTS: 1) R TIME 0146 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: S. PALMER #24520

MAINTENANCE TECHNICIAN: J Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: MUMBLED

ATTITUDE: UPSET, CRYING, QUIET

CLOTHING: PINK SHIRT, BLUE JEANS, FLIP FLOPS

MEDICAL CONDITIONS: ANXIETY AND DEPRESSION

MEDICATIONS: KIND OF PRIVATE

OTHER:

EYES GLASSY AND BLOODSHOT, UNSTEADY ON FEET, SWAYING

COMMENTS:

ARRESTING OFFICER CONDUCTED THE 20 MINUTE OBSERVATION BEGINNING AT 0123. SUBJECT REFUSED TO ANSWER CAMERA FORMAT QUESTIONS AND REFUSED TO TAKE BREATH TEST. A/O READ I/C, SUBJECT STATED HE UNDERSTOOD AND REFUSED TO TAKE TEST. A/O READ RIGHTS, SUBJECT STATED HE UNDERSTOOD HIS RIGHTS. A/O ATTEMPTED Q&A, SUBJECT REFUSED TO ANSWER QUESTIONS WITHOUT COUNSEL

SCANNED
MAY 01 2017

SUBJECT: Jackson, Eric N.

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 OTC. Tandy N. Pac of the Turner ID

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

MAY 01 2017

SUBJECT: JACKSON, ERIC N.

CASE NUMBER: _____

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: CAC. POLYGRAPH 340

SCANNED
MAY 01 2017

NOT A CERTIFICATE

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MAY 01 2017