

0485562

2726

ARREST / NOTICE TO APPEAR  
Juvenile Referral Report1. Arrest  
2. N.T.A.  
3. Request for Warrant  
4. Request for Capias

Juvenile

1

ADMINISTRATIVE	OBTS Number		Agency ORI Number <b>FLO 500000</b>		Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>		Agency Report Number (N.T.A.'s only) <b>06-17-043221</b>	
	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		Weapon Seized / Type 2 <input type="checkbox"/> 1. Yes <b>NONE</b> <input type="checkbox"/> 2. No	
	Location of Arrest (Including Name of Business) <b>10TH AVENUE N &amp; S. MILITARY TRAIL, GREENACRES, FL 33463</b>		Location of Offense (Business Name, Address) <b>10TH AVENUE N &amp; S. MILITARY TRAIL, GREENACRES, FL 33463</b>		Multiple Clearance Indicator <b>01</b>			
	Date of Arrest <b>02/22/2017</b>	Time of Arrest <b>23:06</b>	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle <b>PRIORITY TOWING</b>	
DEFENDANT	Name (Last, First, Middle) <b>PATEL, HITESH, JIVANBHAI</b>						Alias (Name, DOB, Soc. Sec. #, Etc.)	
	Race W - White I - American Indian B - Black O - Oriental/Asian <b>W</b>	Sex <b>M</b>	Date of Birth <b>09/29/1967</b>	Height <b>5'10"</b>	Weight <b>185</b>	Eye Color <b>BROWN</b>	Hair Color <b>BLACK</b>	Complexion <b>TAN</b>
	Build <b>LARGE</b>			Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) <b>N/A</b>		Marital Status <b>MARRIED</b>	Religion <b>NONE</b>	Indication of: Alcohol Influence <input checked="" type="checkbox"/> Drug Influence <input type="checkbox"/>
	Local Address (Street, Apt. Number) <b>722 N. DIXIE HIGHWAY, LAKE WORTH, FL 33460</b>		(City) <b>LAKE WORTH</b>	(State) <b>FL</b>	(Zip) <b>33460</b>	Phone <b>(561) 582-6931</b>	Residence Type: 1. City <input checked="" type="checkbox"/> 2. County <input type="checkbox"/> 3. Florida <input type="checkbox"/> 4. Out of State <input type="checkbox"/>	
	Permanent Address (Street, Apt. Number) <b>722 N. DIXIE HIGHWAY, LAKE WORTH, FL 33460</b>		(City) <b>LAKE WORTH</b>	(State) <b>FL</b>	(Zip) <b>33460</b>	Phone <b>(561) 582-6931</b>	Address Source <b>DEFENDANT'S FL D/L</b>	
	Business Address (Name, Street) <b>N/A</b>		(City) <b>N/A</b>	(State) <b>N/A</b>	(Zip) <b>N/A</b>	Phone <b>( ) N/A</b>	Occupation <b>MOTEL OWNER</b>	
	D/L Number, State <b>P340330673490, FL</b>		Soc. Sec. Number <b>[REDACTED]</b>		INS Number		Place of Birth (City, State) <b>BAROLEE, INDIA</b>	Citizenship <b>U.S.</b>
	Co-Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large		<input type="checkbox"/> 3. Felony <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"/> 2. At Large		<input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile
	JUVENILE	Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other: Name (Last) (First) (Middle) Address (Street, Apt. Number) (City) (State) (Zip)		Residence Phone ( ) ( ) ( )		Business Phone ( ) ( ) ( )		
Notified by: (Name)		Date	Time	Juvenile Disposition 1. Handled / processed within Dept. and Released. 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				
Drug Activity N. N/A S. Sell B. Buy P. Possess 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 <b>D.U.I.</b>		Counts <b>01</b>	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number <b>316.193(1)</b>		Violation of ORD #		
Drug Activity <b>N</b>		Drug Type <b>N</b>	Amount / Unit <b>N/A</b>	Offense # <b>17-043221</b>	Warrant / Capias Number		Bond	
CHARGE	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 #	
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	Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number		Bond	
NOTICE TO APPEAR	Location (Court, Room Number, Address) <b>CRIMINAL JUSTICE COMPLEX 3228 GUN CLUB ROAD, WEST PALM BEACH, FL 33406</b>							
	Court Date and Time Month <b>MARCH</b> Day <b>23RD</b> Year <b>2017</b> Time <b>8:30</b> AM <input checked="" type="checkbox"/> PM <input type="checkbox"/>							
	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 CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED							
	Signature of Defendant (or Juvenile and Parent /Custodian) <b>[Signature]</b>				Date Signed <b>2-23-17</b>			
ADMIN	HOLD for other Agency Name:		Signature of Arresting Officer <b>[Signature]</b>		Name Verification (Printed by Arrestee) <b>HITESH PATEL</b>			PAGE
	<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal		<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:		(PRINT) <b>HITESH PATEL</b>			OF 1
	Inmate Deputy <b>[Signature]</b>	I.D. # <b>101106126</b>	Pouch #	Transporting Officer <b>A. SENTMANAT</b>	ID # <b>#24968</b>	Agency <b>PBSO</b>	Witness here if subject signed with a	SCANNED
	DISTRIBUTION: WHITE - COURT COPY		GREEN - STATE ATTORNEY		YELLOW - AGENCY		PINK - AGENCY	

# D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 22ND DAY OF FEBRUARY 20 17, AT 22:40 PM ☒

SUBJECT: PATEL, HITESH, JIVANBHAI CASE NUMBER: 17-043221

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: A. SENTMANAT

## PERSONAL CONTACT

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

On Wednesday February 22, 2017 at approximately 2234hrs I was on a traffic stop on 10th Avenue N and South Military Trail, Greenacres, FL 33463 when I heard brakes screeching as a gray 2016 Hyundai Tusan bearing Florida tag #080RZE nearly strikes my marked unit (the overhead emergency lights were activated). The driver attempted to reverse the vehicle when I asked him to stop.

## OBSERVATION OF DRIVER:

After nearly striking my marked unit I walked over to the driver's side window. The driver (later identified by his Florida driver's license) O/M Hitesh Jivanbhai Patel (09/29/67) had glassy bloodshot eyes, and he seemed a little confused at first. Patel exited the vehicle and he used the door to steady himself.

## DRIVER'S STATEMENTS:

Patel explained that he had been playing volleyball with friends and that they had won the game. Patel cheered and stretched out his arms. He said that after winning he had several beers with his friends but that it was "okay" because he lived just two minutes away.

## ODORS:

Patel had a very strong odor of an unknown alcoholic beverage coming from his breath/person.

## GENERAL OBSERVATIONS

SPEECH: Slightly slurred

ATTITUDE: Cooperative

CLOTHING: Blue short, gray sneakers, and a gray t-shirt

MEDICAL/OTHER: None. Had six or seven pins in his right ankle.

STATE OF FLORIDA  
COUNTY OF PALM BEACH

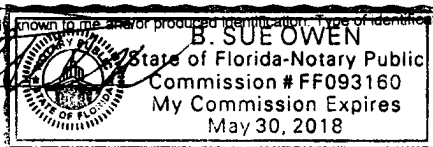
A. SENTMANAT

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 22nd day of February 20 17 by A. Sentmanat #24968

(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)



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FEB 27 2017

**SUBJECT:** PATEL, HITESH, JIVANBHAI **CASE NUMBER** 17-043221

**ROADSIDE TASKS**

**HORIZONTAL GAZE NYSTAGMUS:**

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> LT EYE-LACK OF SMOOTH PURSUIT                           | <input checked="" type="checkbox"/> RT EYE-LACK OF SMOOTH PURSUIT                           |
| <input checked="" type="checkbox"/> LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION | <input checked="" type="checkbox"/> RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION |
| <input checked="" type="checkbox"/> LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES          | <input checked="" type="checkbox"/> RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES          |

**Other Observations:**

**While Patel was standing in the starting positions he would be swaying side to side.**

**WALK & TURN:**

**As Patel got into the starting position he immediately started the task without being told to or explained what he needed to do. Patel twice came out of the starting position. On step one Patel stepped and appeared to be steadying himself. He made an improper turn and on step three he stumbled to the left.**

**ONE LEG STAND:**

**While in the starting position Patel began this task three times after each time being told not to start until he was told to. After demonstrating this task Patel started by raising his right leg behind him and used his arms out to help balance himself. Patel improperly counted and was leaning to the left.**

**FINGER TO NOSE:**

**While Patel was in the starting position he was swaying side to side. Patel missed twice with his left hand and four times with his right. He would either touch below the nose or above the tip.**

**ROMBERG ALPHABET:**

**Patel completed this task and while standing there I observed him swaying in a star light pattern.**

**BREATH TEST RESULTS:** 1) 0.208 2) 0.194 3) 4)

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**FEB 27 2017**

STATE OF FLORIDA  
COUNTY OF PALM BEACH

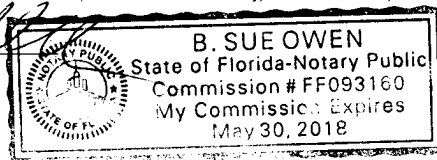
A. SENTMANAT

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 22nd day of February, 20 17 by A. Sentmanat #24968

(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

CASE NUMBER: 17-043221

ARRESTING OFFICER: A. SENTMANAT

ADDRESS: 2995 South Jog Road, Greenacres, FL 33467

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

CAN TESTIFY TO: Driving pattern, roadsides, and B.A.T.

NAME: D/S P. Sanchez #24967

ADDRESS: 2995 South Jog Road, Greenacres, FL 33467

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) 561-688-3000

CAN TESTIFY TO: Driving pattern

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

ADDRESS \_\_\_\_\_

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

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

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

ADDRESS \_\_\_\_\_

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

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

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

ADDRESS \_\_\_\_\_

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

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

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

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

ADDRESS \_\_\_\_\_

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

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

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FEB 27 2017

# TESTING FACILITY TASK REPORT

AGENCY: PBSO  
SUBJECT: Patel, Hitesh Jivanshai CASE NUMBER: 17-043221  
DATE: 02/22/17 / 2/23/17 VIDEO TAPE NUMBER: DVO # 62180  
BEGINNING TIME: 2345 ENDING TIME: 0001  
BREATH TESTS RESULTS: 1) .208 TIME 2353 A.M./P.M. 2) .194 TIME 2356 A.M./P.M.  
3)            TIME            A.M./P.M. 4)            TIME            A.M./P.M.

BREATH OPERATOR: S. Owen #3184

MAINTENANCE TECHNICIAN: J. Karlecki #6467

## TESTING OFFICER'S OBSERVATIONS

SPEECH: slight accent

ATTITUDE: Co-operative, polite

CLOTHING: grey slacks, blue shorts, grey T-shirt

MEDICAL CONDITIONS: 7 screws in right ankle, high blood pressure

MEDICATIONS: none

OTHER: I went to bathroom upon arrival  
odor of unknown alcoholic beverage  
49yca

COMMENTS: A/O arrived at 2325 hrs

A/O observed 20 minutes

A/O requested breath test, I agreed

No problems with test.

A/O read C/W & understood rights

tech explained results, refused Q&A

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SUBJECT: Patel, Hitesh Jivanbhai CASE NUMBER: 17-043221

## **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.

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SUSPECT'S SIGNATURE: (X) Read on Camera

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

SUBJECT: Patel, Hitesh Jivanbhi CASE NUMBER: 17-043221

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

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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: \_\_\_\_\_

WHITE - STATE ATTY.

YELLOW - DHSMV

PINK - CENTRAL RECORDS

GOLD - JAIL