

0494477 17CT023024 1367

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

OBTS Number	Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06-17-168604	
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
Location of Arrest (Including Name of Business) 2100 BLK SOUTH SR 7 WELLINGTON FL 33414			Location of Offense (Business Name, Address) 2100 BLK SOUTH SR 7 WELLINGTON FL 33414			
Date of Arrest 12/28/2017	Time of Arrest 0258	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle BLAKE TOWING

Name (Last, First, Middle) RIZVEE IQBAL H		Alias (Name, DOB, Soc. Sec. #, Etc.)						
Race W - White I - American Indian B - Black O - Oriental/Asian	Sex M	Date of Birth 12/23/1977	Height 510	Weight 191	Eye Color BLK	Hair Color BLK	Complexion MED	Build MED
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) NONE			Marital Status M	Religion NONE	Indication of: Alcohol Influence Drug Influence			Y <input type="checkbox"/> N <input type="checkbox"/> Unk. <input type="checkbox"/>
Local Address (Street, Apt. Number) 5673 SADDLE TRAIL LN		(City) LAKE WORTH	(State) FL	(Zip) 33449	Phone (651) 252 4411	Residence Type: 1. City 2. County 3. Florida 4. Out of State 1		
Permanent Address (Street, Apt. Number)		(City)	(State)	(Zip)	Phone	Address Source DEFENDANT		
Business Address (Name, Street)		(City)	(State)	(Zip)	Phone	Occupation INDEPENDENT CONTRACTOR		
D/L Number, State (FL)R-210-408-77-463-0		Soc. Sec. Number		INS Number	Place of Birth (City, State) NAIAYANDANJ BANGLADESH	Citizenship US		

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

<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other:	Residence Phone () ()	
Address (Street, Apt. Number) (City) (State) (Zip)		Business Phone () ()
Notified by: (Name)	Date	Time
Released To: (Name)	Relationship	Date
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
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No	Description of Property	Value of Property

Drug Activity S Sell N. N/A P. Possess	S 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	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number 316.193(1)	Violation of ORD #	Warrant / Capias Number	Bond	OR			
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number	Violation of ORD #	Warrant / Capias Number	Bond	
Charge Description	Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number	Violation of ORD #	Warrant / Capias Number	Bond				
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number	Violation of ORD #	Warrant / Capias Number	Bond	
Charge Description	Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number	Violation of ORD #	Warrant / Capias Number	Bond				
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number	Violation of ORD #	Warrant / Capias Number	Bond	

Location (Court Room Number, Address) 3228 GUN CLUB RD WEST PALM BEACH FL 33406
Court Date and Time Month JANUARY Day 25 Year 2018 Time 0830 AM <input checked="" type="checkbox"/> PM
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) <i>[Signature]</i>
Date Signed 12/28/2017

HOLD for other Agency Name: <input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other:	Signature of Arresting Officer <i>[Signature]</i>	Name Verification (Printed by Arrestee) DEC 28 AM 5:17
Intake Unit # THOMAS #5956 Pouch #	Name of Arresting Officer (Print) INV. E. K. WHITE 7209 I.D. # 7209	(PRINT) SCANNED
Transporting Officer E. K. WHITE ID # 7209 Agency PBSO	Witness here if subject signed with an "X" DEC 28 2017	

OBTS Number		PROBABLE CAUSE AFFIDAVIT			1. Arrest 2. N.T.A.	3. Request For Warrant 4. Request For Capias	1	Juvenile	N
Agency ORI Number FLO 5 0 0 0 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE			Agency Report Number 06		Date 17-168604		
Charge Type: Check as many as apply		<input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor		<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other _____		Special Notes			
Defendant Name (Last, First, Middle) Rizvee Iqbal				H	Race A	Sex M	Date of Birth 12/23/1977		
Charge Driving under the Influence				Charge					
Charge				Charge					
Victim Name (Last, First, Middle) State of Florida				Race N/A	Sex N/A	Date of Birth N/A			
Local Address (Street, Apt. Number) 3228 Gun Club Rd		City West Palm Beach		State FL	Zip 33406	Phone 561-688-3000	Address Source Verbal		
Business Address (Street, Apt. Number) Same as above		City		State	Zip	Phone	Occupation		
The undersign swears that he/she has just and reasonable grounds to believe, and does believe that the above named Defendant committed the following violation of law. The person taken into custody...									
<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 commit the below acts.						
<input type="checkbox"/> confessed to admitting to the below facts.			<input checked="" type="checkbox"/> was found to have committed the below acts, resulting from (described) investigation.						
On the 28 day of December 20 17 at 0215 <input checked="" type="checkbox"/> AM <input checked="" type="checkbox"/> PM									

On Thursday, December 28, 2017, at approximately 0215 hours, I was in the area of Forest Hill Blvd and State Road 7 arriving as back-up to an ongoing traffic stop.

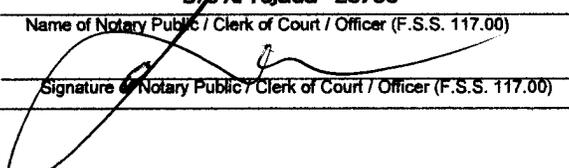
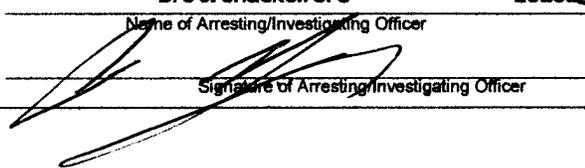
Upon completion of the stop, I heard a high-pitch, loud screeching noise coming from a vehicle traveling in the southbound lane of State Road 7 coming to a stop at the red light of Forest Hill Blvd. Upon observing the vehicle, I noticed that the vehicle was unable to maintain a straight line in its lane and was pulling very hard to the right. The vehicle was traveling approximately 20 miles-per-hour in a 50 mile-an-hour zone. I conducted a traffic stop due to the vehicle's immediate concern for what appeared to be faulty equipment. The vehicle was a 2007, green in color Toyota Sienna XLE, bearing Florida license plate #IFZP14.

Upon approaching the driver side door, I made contact with a Mr. Iqbal Rizvee, who was sitting behind the driver's wheel. Mr. Rizvee informed me that he was on his way home and had hit what he believed to be a curb near the Palm Beach International Airport on Belvedere Road. Upon inspection of the vehicle, I noticed damage to the front-left hubcap and tire and damage to the front-right bumper. Mr. Rizvee had a strong odor of an unknown alcoholic beverage emanating from his breath that intensified as he spoke. I asked for Mr. Rizvee's license and registration, in which he provided me several credit cards with slow movement and could not find his identification. Mr. Rizvee later provided me with a photo of his identification on his phone, which is how he was identified. Mr. Rizvee stated that he was coming from the airport, and then changed his point of travel several times -- stating he was coming from Clematis Street in West Palm Beach from hanging out with a few friends.

At this point in time I contacted DUI Investigator E. White #7209 to conduct a DUI investigation.

Mr. Rizvee was written a citation (A8DJK3E) for equipment violation - unsafe faulty equipment.

This ends my involvement with the case.

The foregoing instrument was sworn to and affirmed before me this <u>28</u> day of <u>December</u> 20 <u>17</u> , by:		SCANNED DEC 28 2017
<u>D/S A. Tejada #28703</u> Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	<u>D/S J. Shackelford</u> Name of Arresting/Investigating Officer	
 Signature of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	 Signature of Arresting/Investigating Officer	Page 1 of 1

PROBABLE CAUSE AFFIDAVIT

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

1 Juvenile

OBTS Number	Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	Agency Report Number 06-17-168604
Charge Type: Check as many as apply.		1. Felony <input type="checkbox"/>	2. Traffic Felony <input type="checkbox"/>	3. Misdemeanor <input type="checkbox"/>
		4. Traffic Misdemeanor <input type="checkbox"/>	5. Ordinance <input type="checkbox"/>	6. Other <input type="checkbox"/>

Name (Last, First, Middle) RIZVEE, IQBAL, H	Alias	Race W	Sex M	Date of Birth 12/23/1977
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Charge Description DUI	316.193(1)	Charge Description
Charge Description		Charge Description

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
Local Address (Street, Apt. Number)	(City)	(State)	(zip)
Business Address (Name, Street)	(City)	(State)	(zip)

The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe that the above named Defendant committed the following violation of law. The Person taken into custody

committed the below acts in my presence. was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.

confessed to _____ admitting to the below facts. was found to have committed the below acts, resulting from my (described) investigation.

On the 28 day of DECEMBER 2017 at 0215 A.M. P.M. (Specifically include facts constituting cause for arrest.)

I made contact with the driver who was sitting in the driver seat of the van. I also noticed damage to the right front tire of the van that caused it to lean inward. The driver explained he hit a curb in the area of Belvedere Rd and Military Trail. He later identified himself as Iqbal H Rizvee and showed his identification on his cell phone. During my interview I noticed his eyes were clear, watery and glossy. His cheeks were flushed and mouth was dry. His speech was slightly slurred. I could smell a strong odor of an unknown alcoholic beverage emanating from the inside of the vehicle. I told the driver I had a suspicion that he had been drinking an unspecified amount of alcoholic beverages. He told me he drank one beer. I asked if he would consent to performing Standardized Field Sobriety Evaluations (SFSTs) for the purpose of determining if he was impaired while operating a motor vehicle. He consented to performing the SFSTs. Prior to exiting the vehicle I asked if he had any physical problems with his body that would inhibit him from performing light physical movements. I also asked if he was on medication. The defendant told me he has high cholesterol and diabetes. He could not remember what medication he was taking but later said he was taking metformin. I asked him to exit the vehicle and noticed he was unsteady while standing. He later leaned against the back of his vehicle to support himself. I escorted him to a smooth and level surface on the roadway that was free from obstructions and debris. The area was well lighted by the lights from my patrol car and street lights. I could now smell a strong odor of an unknown alcoholic beverage emanating from his breath that intensified when he spoke. I asked him to identify the white line on the roadway. He did so by placing his left foot in the line when asked. The following SFSTs were explained, demonstrated and acknowledged by him prior to his performance: HGN, The Walk and Turn, The One Leg Stand, The Finger to Nose and The Romberg Alphabet Recitation. His deficiencies were recorded on another form on this worksheet. At the conclusion of the SFSTs, coupled with the deputy's observation of the defendant's vehicle in motion and my observation of personal indicators of impairment exhibited by the defendant, probable cause was established for DUI.

STATE OF FLORIDA COUNTY OF PALM BEACH	INV. E. K. WHITE 7209	SCANNED DEC 28 2017
(Signature of Arresting Investigative Officer)		
The foregoing instrument was sworn to or affirmed and subscribed before me this <u>28</u> day of <u>DECEMBER</u> 20 <u>17</u> by <u>INV. E. K. WHITE 7209</u>	KNOWN	
(Print name of Arresting Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced:	Notary Public - State of Florida Commission # FF 986854 My Comm. Expires Jun 25, 2020 Bonded through National Notary Assn	
Notary Public, Clerk of Court, Officer (F.S.S. 117.10)		PAGE 2 OF 2

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 28 DAY OF DECEMBER 20 17, AT 0215 AM PM
SUBJECT: RIZVEE IQBAL H CASE NUMBER: 17-168604
AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: INV. E. K. WHITE 7209

PERSONAL CONTACT

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

OBSERVATION OF DRIVER:
See PC Affidavits

DRIVER'S STATEMENTS:
I drank one beer

ODORS:
STRONG ODOR OF AN UNKNOWN ALCOHOLIC BEVERAGE COMING FROM SUBJECT'S BREATH.

GENERAL OBSERVATIONS

SPEECH: **slightly slurred and repetitive**

ATTITUDE: **disbelief**

CLOTHING: **wrinkled blue jean pants blue shirt and black shoes**

MEDICAL/OTHER: **DIABETES CHOLESTEROL**

SCANNED
DEC 28 2017

STATE OF FLORIDA
COUNTY OF PALM BEACH

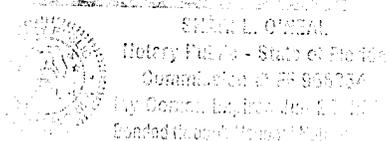
INV. E. K. WHITE 7209

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 28 day of DECEMBER 20 17 by **INV. E. K. WHITE 7209**

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

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



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:

Subject was asked to stand with their feet together and place their hands by their side. They were asked to focus on the stimulus and follow it with their eyes. Lastly they were told not to move their head to assist in following the stimulus with their eyes. Subject showed equal pupil size that tracked equally. Both eyes lacked a smooth pursuit. I saw distinct and sustained Nystagmus at maximum deviation. I also saw an onset of Nystagmus prior to 45 degrees in both eyes. Subject swayed while performing this task.

WALK & TURN:

THE DEFENDANT WAS PLACED IN THE INSTRUCTIONAL STANCE FOR THE WALK AND TURN. THIS TASK WAS EXPLAINED AND DEMONSTRATED TO THE DEFENDANT. THE DEFENDANT ACKNOWLEDGED THE INSTRUCTIONS PRIOR TO PERFORMING THIS TASK: Subject could not maintain his balance while placed in the instructional position. He swayed and ultimately abandoned the position. During the task he was unable to maintain his balance while walking on the line. He raised his arms away from his side more than parallel to the road. He took the incorrect number of steps and turned improperly. He asked for instructions while performing this task.

ONE LEG STAND:

THE DEFENDANT WAS PLACED IN THE INSTRUCTIONAL STANCE FOR THE ONE LEG STAND. THIS TASK WAS EXPLAINED AND DEMONSTRATED TO THE DEFENDANT. THE DEFENDANT ACKNOWLEDGED THE INSTRUCTIONS PRIOR TO PERFORMING THIS TASK: Subject was unable to maintain his balance while performing this task. He raised his arms away from his side and dropped is foot on the roadway once.

FINGER TO NOSE:

THE DEFENDANT WAS PLACED IN THE INSTRUCTIONAL STANCE FOR THE FINGER TO NOSE. THIS TASK WAS EXPLAINED AND DEMONSTRATED TO THE DEFENDANT. THE DEFENDANT ACKNOWLEDGED THE INSTRUCTIONS PRIOR TO PERFORMING THIS TASK: Subject attempted this task during my demonstration. He failed to return his hand to his side after making contact with his nose as instructed. He swayed during his performance

ROMBERG ALPHABET:

THE DEFENDANT WAS PLACED IN THE INSTRUCTIONAL STANCE FOR THE ROMBERG ALPHABET TASK. THIS TASK WAS EXPLAINED AND DEMONSTRATED TO THE DEFENDANT. THE DEFENDANT ACKNOWLEDGED THE INSTRUCTIONS PRIOR TO PERFORMING THIS TASK: Subject continued to sway while performing this task. He recited the alphabet correctly

BREATH TEST RESULTS: .122 .120

SCANNED
DEC 28 2017

STATE OF FLORIDA
COUNTY OF PALM BEACH

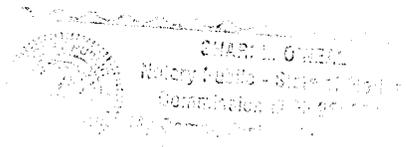
INV. E. K. WHITE 7209

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 28 day of DECEMBER 2017 by INV. E. K. WHITE 7209

(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: 17-168604

ARRESTING OFFICER: INV. E. K. WHITE 7209

ADDRESS: HQ

PHONE NUMBERS (HOME): _____ (WORK) 561 688 3000

CAN TESTIFY TO: FACTS

NAME: D/S J SHACKELFORD III

ADDRESS: DIST 8

PHONE NUMBERS (HOME) _____ (WORK) 561 688 3000

CAN TESTIFY TO: OBSERVING THE DEFENDANT'S DRIVING ON A DEFECTIVE TIRE

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) 0 (WORK) 0

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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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: _____

SCANNED
DEC 28 2017

TESTING FACILITY TASK REPORT

AGENCY: 1850 Inv. White #7209
SUBJECT: Rizvee, Iqbal H. CASE NUMBER: 17-163604
DATE: 12-28-17 VIDEO TAPE NUMBER: N/A
BEGINNING TIME: 0400hrs ENDING TIME: 0423 hrs
BREATH TESTS RESULTS: 1) .122 TIME A.M./P.M. 2) .120 TIME A.M./P.M.
3) _____ TIME _____ A.M./P.M. 4) _____ TIME _____ A.M./P.M.

BREATH OPERATOR: S. O'Neal #6212

MAINTENANCE TECHNICIAN: DIS J. Kucheyko #6469

TESTING OFFICER'S OBSERVATIONS

SPEECH: Accent

ATTITUDE: Calm, Cooperative, Incoercive

CLOTHING: Shirt Turquoise Blue Tights Blue Jeans

MEDICAL CONDITIONS: Diabetic

MEDICATIONS: Metformin, 2 other m.d.

OTHER: Eyes: Red, Glassy

Odor of unknown alcoholic beverage. #7209

COMMENTS: 20 min. observation done by AIO White

AIO requested the breath test.

D asked what happens.

AIO read the implied consent on camera.

AIO let the D read the implied consent.

D eventually decided to submit. D completed the test.

C/W read on camera. / No Q+A.

SCANNED

DEC 28 2017

SUBJECT: Rizve, Iqbal H. CASE NUMBER: 17-168604

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 John White # 7209 of the 1150

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.

**SCANNED
DEC 28 2017**

SUSPECT'S SIGNATURE: (X) Read on Camera

SUBJECT: Rizvee Iqbal H CASE NUMBER: 17-168604

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: WHITE

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

SCANNED
DEC 28 2017