

0492029

ARREST / NOTICE TO APPEAR				1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	Juvenile	N			
Juvenile Referral Report				Agency Report Number (N.T.A.'s only) 78- 17-005618							
OBTS Number FLO 502600		Agency Name Palm Beach Gardens Police Department									
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 1. Yes 2. No		Multiple Clearance Indicator			
Location of Arrest (Including Name of Business) Kew Gardens Ave/Gardens Blvd, PBG				Location of Offense (Business Name, Address) Kew Gardens Avenue/Gardens Blvd, PBG 33410							
Date of Arrest 09/23/17		Time of Arrest 0035		Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle Kauff's Towing			
Name (Last, First, Middle) Fagan, James Edward Alias (Name, DOB, Soc. Sec. #, Etc.) "Jimmy"											
Race W - White I - American Indian B - Black O - Oriental/Asian		Sex W	Date of Birth 10/24/1947	Height 5'08	Weight 160	Eye Color Blue	Hair Color Gray	Complexion flush	Build thin		
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) none						Marital Status Divorced	Religion Catholic	Indication of: Alcohol Influence <input checked="" type="checkbox"/> Y <input type="checkbox"/> N Drug Influence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> Unk.			
Local Address (Street, Apt. Number) 2729 Anzio Ct #202		(City) PBG	(State) Fl	(Zip) 33410	Phone (561) 676-4769		Residence Type: 1. City 2. County 3. Florida 4. Out of State 1				
Permanent Address (Street, Apt. Number) Same as Local Address		(City)	(State)	(Zip)	Phone () Same		Address Source license				
Business Address (Name, Street) PGA National		(City)	(State)	(Zip)	Phone ()		Occupation Catering				
D/L Number, State F250445473840		Soc. Sec. Number [REDACTED]		INS Number		Place of Birth (City, State) Pittsburgh, PA		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:		Name (Last) (First) (Middle)				Residence Phone ()					
Address (Street, Apt. Number)						(City)	(State)	(Zip)	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					
CODE	Drug Activity N. N/A P. Possess	S. Sell B. Buy T. Traffic	R. Smuggle D. Deliver E. Use	K. Dispense/ Distribute	M. Manufacture/ Produce Cultivate	Z. Other	Drug Type N. N/A P. Amphetamine	B. Barbiturates C. Cocaine E. Heroin	H. Hallucinogen M. Marijuana O. Opium/Deriv.	P. Paraphernalia/ Equipment S. Synthetics	U. Unknown Z. Other
CHARGE	Charge Description DUI				Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number 316.193(1)			Violation of ORD #	
CHARGE	Drug Activity N	Drug Type N	Amount / Unit N/A	Offense #	Warrant / Capias Number				Bond OR		
CHARGE	Charge Description				Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number			Violation of ORD #	
CHARGE	Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number				Bond		
CHARGE	Charge Description				Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number			Violation of ORD #	
CHARGE	Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number				Bond		
CHARGE	Charge Description				Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number			Violation of ORD #	
CHARGE	Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number				Bond		
NOTICE TO APPEAR	Location (Court, Room Number, Address) North County Courthouse 3188 PGA Blvd, Palm Beach Gardens, FL 33410										
NOTICE TO APPEAR	Court Date and Time Month 10 Day 25 Year 17 Time 10:00 AM ✓ 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) 9/23/17 Date Signed											
ADMIN	HOLD for other Agency Name: X			Signature of Arresting Officer 305			Name Verification (Printed by Arresting Officer) SEP 29 AM 3:10 (PRINT)				
	<input type="checkbox"/> Dangerous <input type="checkbox"/> Stabbed			Name of Arresting Officer (Print) Melinda Hanton #305			I.D. # 305				
	<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:			Transporting Officer Melinda Hanton			Agency PBGPD				
	Arrested 700P			Pouch #			Witness here if subject signed with an -X" 1				

DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT (N.T.A.'s ONLY)

2017 CT 017743 NB

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 23rd DAY OF September 20 17, AT 0014 am AM PM

SUBJECT: Fagan, James Edward CASE NUMBER: 17-005618

AGENCY: PALM BEACH GARDENS POLICE DEPT. ARRESTING OFFICER: Melinda Hanton #305

PERSONAL CONTACT

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

On 9/23/17 at 12:14 a.m. Palm Beach Gardens Police Dispatch advised of a reckless driver in the area of PGA Blvd and Lake Victoria Gardens Avenue. I was leaving the Palm Beach Gardens Medical Center when dispatch advised the black car, bearing Florida tag JF5HA was on Kew Gardens at the Professional Center. Dispatch advised the vehicle was driving slowly, swerving and then speeding. I was on Kew Gardens Avenue and saw a black vehicle turn north onto Kew Gardens Avenue from the Professional Center. I positioned my marked Palm Beach Gardens Police car behind the black car with the tag matching what was given. The vehicle was stopped passed the stop bar at the red light. The black Honda crossed Gardens Parkway

OBSERVATION OF DRIVER:

and entered the San Matera residential neighborhood. I activated my emergency red and blue lights and department issued body camera to stop the vehicle. I made contact with the white male driver and sole occupant who was identified by the photograph on his Florida drivers license as James Fagan. While speaking with Fagan I smelled the odor of an unknown alcoholic beverage coming from his breath as he spoke, his speech was slow and slurred at times, his eyes were glassy and he had difficulty retrieving his license from his wallet. When Fagan exited the vehicle he stumbled backward and then was holding onto the

DRIVER'S STATEMENTS:

vehicle for support. Fagan voluntarily advised to me that he had two drinks, when I asked what he was drinking he stated he had white wine. Fagan advised he had no medical problems, injuries or takes any medication.

ODORS:

Fagan had the odor of an unknown alcoholic beverage coming from his breath

GENERAL OBSERVATIONS

SPEECH: slow, slurred at times

ATTITUDE: mood swings, mostly cooperative, at times agitated

CLOTHING: white shirt, jeans, brown shoes

MEDICAL/OTHER: none

STATE OF FLORIDA
COUNTY OF PALM BEACH

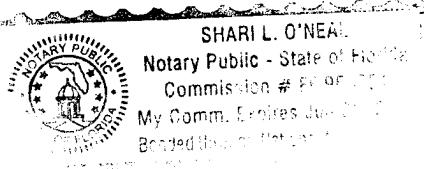
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this

23rd day of September 20 17 by ofc. Hanton

(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)



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:

was swaying the entire time, leaning forward, had to remind him several times to stop moving his head, then he would still move his head, he stopped looking at the light several times, had approximate angle of 35 degrees, no VGN observed

WALK & TURN:

demonstrated and explained, he was unable to hold stance during instructions and stumbled, ran out of room during the 9 steps, took 8 steps, missed heel to toe each step, stopped after 8th step touched the wall, I advised him to take 8 steps since he ran out of room, turned around not as instructed took 8 steps back, none heel to toe.

ONE LEG STAND:

did not have him perform, had a difficult time balancing

FINGER TO NOSE:

did not have him perform

ROMBERG/ALPHABET:

demonstrated and explained he said he understood, stated he had two years of junior college education.
a,b,c,d,e,f,g,h,i,j,k,l,l,m,n,o,p,t,u,v,z

BREATH TEST RESULTS: .111, .104

STATE OF FLORIDA
COUNTY OF PALM BEACH

M. H. Hantos ⁷⁰
(Signature of Arresting/Investigative Officer)
The foregoing instrument was notarized or sworn before me this 23rd day of September 20th by Ofc. Hantos

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)



SHARI L. O'NEAL
Notary Public - State of Florida
Commission # FF 98325
My Comm. Expires Oct 2018
Bonded through National Notary Association

WITNESS LIST

CASE NUMBER: 17-005618

ARRESTING OFFICER: Melinda Hanton #305

ADDRESS: 10500 N. Military Trail, Palm Beach Gardens, FL 33410

PHONE NUMBERS (HOME): _____ (WORK) 5617994445

CAN TESTIFY TO: driving, observations of impairment, arrest

NAME: Officer Precious Washington

ADDRESS: 10500 N Military Trail

PHONE NUMBERS (HOME) _____ (WORK) 5617994445

CAN TESTIFY TO: riding in my patrol car

NAME: Officer Bassinger

ADDRESS 10500 N Military Trail

PHONE NUMBERS (HOME) _____ (WORK) 5617994445

CAN TESTIFY TO: backup on scene

NAME: Officer Koegel

ADDRESS 10500 N Military Trail

PHONE NUMBERS (HOME) _____ (WORK) 5617994445

CAN TESTIFY TO: backup, searched defendant

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: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

FLORIDA DEPARTMENT OF LAW ENFORCEMENT

ALCOHOL TESTING PROGRAM

BREATH ALCOHOL TEST AFFIDAVIT

Instrument Type: Intoxilyzer 8000

Instrument Registered To: PALM BEACH SO

Instrument Serial Number: 80-006476 Software: 8100.27

Date of Test: 09/23/2017

Date of Last Agency Inspection: 08/04/2017

Observation Period Began: 01:10

Subject's Name: JAMES E FAGAN

DOB: 10/24/1947 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	01:41
	Air Blank	0.000	01:41
	Control Test	0.082	01:42
	Air Blank	0.000	01:42
	Subject Sample #1	0.111	01:44
	Air Blank	0.000	01:44
	Air Blank	0.000	01:46
	Subject Sample #2	0.104	01:47
	Air Blank	0.000	01:48
	Control Test	0.079	01:48
	Air Blank	0.000	01:49
	Diagnostics Check	OK	01:49

Cylinder Lot: 279870
Exp: 02/04/2019

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 SHARI L O'NEAL, 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: Shari L O'Neal Date: 09-23-17

Signature

Sworn to (or affirmed) before me this 23 day of September, 2017

Signature of Notary Public-State of Florida O.C. Henton #305 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.