

0492029

1246

<b>ARREST / NOTICE TO APPEAR</b> Juvenile Referral Report		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1		Juvenile		N	
OBTS Number		Agency ORI Number <b>FLO 502600</b>		Agency Name <b>Palm Beach Gardens Police Department</b>		Agency Report Number (N.T.A.'s only) <b>78- 17-005618</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 1. Yes 2. No		Multiple Clearance Indicator	
Location of Arrest (Including Name of Business) <b>Kew Gardens Ave/Gardens Blvd, PBG</b>						Location of Offense (Business Name, Address) <b>Kew Gardens Avenue/Gardens Blvd, PBG 33410</b>					
Date of Arrest <b>09/23/17</b>		Time of Arrest <b>0035</b>		Booking Date		Booking Time		Jail Date		Jail Time	
Name (Last, First, Middle) <b>Fagan, James Edward</b>						Alias (Name, DOB, Soc. Sec. #, Etc.) <b>"Jimmy"</b>					
Race W - White I - American Indian B - Black O - Oriental/Asian		Sex <b>M</b>		Date of Birth <b>10/24/1947</b>		Height <b>5'08</b>		Weight <b>160</b>		Eye Color <b>Blue</b>	
								Hair Color <b>Gray</b>		Complexion <b>flush</b>	
										Build <b>thin</b>	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) <b>none</b>						Marital Status <b>Divorced</b>		Religion <b>Catholic</b>		Indication of: Alcohol Influence Drug Influence	
Local Address (Street, Apt. Number) <b>2729 Anzio Ct #202</b>						(City) <b>PBG</b>		(State) <b>FL</b>		(Zip) <b>33410</b>	
Permanent Address (Street, Apt. Number) <b>Same as Local Address</b>						(City)		(State)		(Zip)	
Business Address (Name, Street) <b>PGA National</b>						(City)		(State)		(Zip)	
D/I Number, State <b>F250445473840 FL</b>		Soc. Sec. Number		INS Number		Place of Birth (City, State) <b>Pittsburgh, PA</b>		Citizenship <b>US</b>			
Co-Defendant Name (Last, First, Middle)						Race		Sex		Date of Birth	
Co-Defendant Name (Last, First, Middle)						Race		Sex		Date of Birth	
Parent Legal Custodian Other:						Name (Last)		(First)		(Middle)	
Address (Street, Apt. Number)						(City)		(State)		(Zip)	
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 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 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>DUI</b>		Counts <b>1</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 #		Warrant / Capias Number		Bond	
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 #			
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 #			
Drug Activity		Drug Type		Amount / Unit		Offense #		Warrant / Capias Number		Bond	
Location (Court, Room Number, Address) <b>North County Courthouse 3188 PGA Blvd, Palm Beach Gardens, FL 33410</b>											
Court Date and Time Month <b>10</b> Day <b>25</b> Year <b>17</b> Time <b>10:00</b> 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) <b>[Signature]</b> Date Signed <b>9/23/17</b>											
HOLD for other Agency Name:		Signature of Arresting Officer <b>[Signature]</b>		Name Verification (Printed by Arresting Officer) <b>SEP 28 AM 3:10</b>		(PRINT)		PAGE			
<input type="checkbox"/> Dangerous <input type="checkbox"/> Substantial		<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:		Name of Arresting Officer (Print) <b>Melinda Hanton #305</b>		ID # <b>305</b>		Agency <b>PBGPD</b>		Witness here if subject signed with an -X"	
Pouch #		Transporting Officer <b>Melinda Hanton</b>		ID # <b>305</b>		Agency <b>PBGPD</b>		1 OF 1			

DISTRIBUTION: WHITE - COURT COPY

GREEN - STATE ATTORNEY

YELLOW - AGENCY

PINK - AGENCY

GOLD - DEFENDANT (N.T.A.'s ONLY)

2017CT017743 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 aggitated

CLOTHING: white shirt, jeans, brown shoes

MEDICAL/OTHER: none

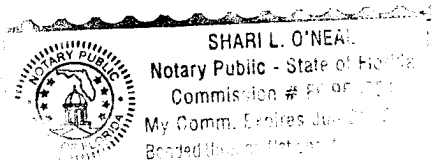
STATE OF FLORIDA  
COUNTY OF PALM BEACH

Melinda Hanton 305  
(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 Melinda Hanton

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

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



SUBJECT: Fagan, James Edward

CASE NUMBER: 17-005618

## ROADSIDE TASKS

### HORIZONTAL GAZE NYSTAGMUS:

☒ LT EYE-LACK OF SMOOTH PURSUIT

☒ RT EYE-LACK OF SMOOTH PURSUIT

☒ LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX DEVIATION

☒ RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX DEVIATION

☒ LT EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

☒ 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,m,n,o,p,t,u,v,z

### BREATH TEST RESULTS: .111, .104

STATE OF FLORIDA  
COUNTY OF PALM BEACH

[Signature] 2017  
(Signature of Arresting/Investigative Officer)

The foregoing instrument was notarized or sworn before me this 28<sup>th</sup> day of September 2017 by Ofc. Hantow  
who is personally known to me and/or produced identification. Type of identification produced known

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



# 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 \_\_\_\_\_

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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: *S. O'Neal* Date: 09-23-17  
Signature

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

*[Signature]* 305 OFC. Hanton #305  
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.