0499486 NR 3281

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

1 Arrest 2 NTA 3 Request for Warrant 4 Request for Capias: 1 | Juvenile:

ADMINISTRATIVE

OBTS Number	
Agency ORI Number	FLO 500000
Agency Name	PALM BEACH COUNTY SHERIFF'S OFFICE
Agency Report Number (N.T.A.'s only)	06- FWSA-18-OFF-6027
Charge Type (Check as many as apply)	☐ 1. Felony ☐ 2. Traffic Felony ☑ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other
Weapon Seized / Type (1 Yes 2 No)	2
Multiple Clearance Indicator	01
Location of Arrest (Including Name of Business)	ICW BOYNTON INLET
Location of Offense (Business Name, Address)	ICW and Boynton Inlet
Date of Arrest	7/1/18
Time of Arrest	1427hrs
Booking Date / Booking Time / Jail Date / Jail Time / Location of Vehicle	

DEFENDANT

Name (Last, First, Middle)	~~Jared Thomas~~ Collin, Jared, Thomas
Alias (Name, DOB, Soc. Sec. #, Etc.)	
Race (W - White I - American Indian B - Black O - Oriental/Asian)	W
Sex	M
Date of Birth	5/20/1999
Height	5'9"
Weight	185
Eye Color	BR
Hair Color	BR
Complexion	LIGHT
Build	MED
Scars, Marks, Tattoos, Unique Physical Features	NONE
Marital Status	S
Religion	NONE
Indication of Alcohol Influence / Drug Influence	Y
Local Address (Street, Apt. Number) (City) (State) (Zip)	802 SHORE DR BOYNTON BEACH FL 33435
Phone	( )
Residence Type (1 City 2 County 3 Florida 4 Out of State)	1
Permanent Address (Street, Apt. Number) (City) (State) (Zip)	
Phone	( )
Address Source	DL
Business Address (Name, Street) (City) (State) (Zip)	
Phone	( )
Occupation	
D/L Number, State	C450-438-99-180-0
Soc. Sec. Number	
INS Number	
Place of Birth (City, State)	WPB, FL
Citizenship	US

CO-DEF

Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth	☐ 1 Arrested ☐ 2 At Large	☐ 3 Felony ☐ 4 Misdemeanor ☐ 5 Juvenile

JUVENILE

☐ Parent ☐ Legal Custodian ☐ 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 ☐ defendant and / or ☐ defendant's parents. The child and / or parent was told to keep the Juvenile Court Clerk (Phone 355-2528) informed of any change of address ☐ Yes, by (Name) ☐ No (Reason) — School Attended — Grade

Property Crime? ☐ Yes ☐ 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, 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

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
Boating Under the Influence	01	☐Y ☑N	327.35 1	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
N	N	N	FWSA-18-OFF-6027		

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N	JUL	PM 7:11

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☐N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

NOTICE TO APPEAR

Location (Court, Room Number, Address): 3228 GUN CLUB RD WPB

Court Date and Time: Month 08 Day 01 Year 18 Time 1:30 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): [signature] — Date Signed: 7/1/18

ADMIN

HOLD for other Agency Name	
☑ Dangerous ☐ Suicidal ☐ Resisted Arrest ☐ Other	
Intake Deputy / ID # / Pouch #	[signature] 8014
Signature of Arresting Officer	[signature] N759
Name of Arresting Officer (Print) / ID #	Patrick Defeo N759
Transporting Officer / ID # / Agency	Patrick Defeo N759 FWC
Name Verification (Printed by Arrestee) (PRINT)	SCANNED JUL - 1 2018
Witness here if subject signed with an "X"	

PAGE 1 OF 1

ADMIN

OBTS Number

PROBABLE CAUSE AFFIDAVIT

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

Agency ORI Number: FLO 500000

Agency Name: ~~PALM BEACH COUNTY SHERIFF'S OFFICE~~ FWC

Agency Report Number: 06- FWSA-18-OFF-6027

Charge Type (Check as many as apply): 1. Felony 2. Traffic Felony ☑ 3 Misdemeanor 4 Traffic Misdemeanor 5 Ordinance 6. Other

Special Notes:

DEF

Name (Last, First, Middle): Jared Thomas Collin | Alias: Collin, Jared, Thomas | Race: W | Sex: M | Date of Birth: 5/20/1999

CHARGES

Charge Description: Boating Under the Influence 327.35

Charge Description:

Charge Description:

Charge Description:

VICTIM

Victim's Name (Last, First, Middle) | Race | Sex | Date of Birth

Local Address (Street, Apt Number) (City) (State) (zip) | Phone ( ) | Address Source

Business Address (Name, Street) (City) (State) (zip) | Phone ( ) | Occupation

PROBABLE CAUSE STATEMENT

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.

☐ confessed to _____ admitting to the below facts.

☐ was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.

☐ was found to have commited the below acts, resulting from my (described) investigation.

On the 1st day of ~~February~~ July 20 18 at 1612 hrs ☐ A.M. ☑ P.M. (Specifically include facts constituting cause for arrest.)

On July 1st, 2018 at 1420 hours Officer Trawinski and I was on patrol in Pam Beach County, Boynton Beach, Florida. On the Intra Coastal Water Way when we stopped a vessel (DO1107578) to conduct a boating safety inspection. As I spoke with the operator, Jared T. Collin, I could smell the strong odor of an alcoholic beverage coming from his person. His eyes were watery, droopy and his coordination was slow and clumsy, and his speech was slurred. As he was searching for the safety equipment he began o show me items I did not ask for and repeatedly asked me to repeat myself. At this point I asked Collin to step onto our vessel so that I could conduct SFST's (See BUI probable cause). Collin was operating a vessel while impaired.

ADMINISTRATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH

Ofc. P. Defeo N759 N759
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 1 day of July 20 18 by M Trawinski WMS

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

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

B.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 16th DAY OF February 20 18 AT 1612 hrs AM ✓ PM

SUBJECT: Jared Thomas Collin CASE NUMBER: FWSA-18-OFF-6027

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: Ofc. P. Defeo N759

PERSONAL CONTACT

BOATING PATTERN: ACTUAL PHYSICAL CONTROL(PHYSICAL EVIDENCE OR STATEMENTS THAT THE DEFENDANT WAS OPERATING A VESSEL)

On July 1st, 2018 at 1420 hours Officer Trawinski and I was on patrol in Pam Beach County, Boynton Beach, Florida. On the Intra Coastal Water Way when we stopped a vessel (DO1107578) to conduct a boating safety inspection. As I spoke with the operator, Jared T. Collin, I could smell the strong odor of an alcoholic beverage coming from his person. His eyes were watery, droopy and his coordination was slow and clumsy, and his speech was slurred. As he was searching for the safety equipment he began o show me items I did not ask for and repeatedly asked me to repeat myself. At this point I asked Collin to step onto our vessel so that I could conduct SFST's (See BUI probable cause). Collin was operating a vessel while impaired.

OBSERVATION OF DRIVER:

I conducted a vessel stop and informed the operator of the reason for the stop. As I spoke with Collin I could smell the strong odor of an alcoholic beverage coming from his breath. His eyes were watery, droopy, and his coordination was slow and clumsy, and his speech was slurred.

DRIVER'S STATEMENTS:

Collin stated that he had consumed two beers.

ODORS:

Strong odor of an alcoholic beverage.

GENERAL OBSERVATIONS

SPEECH: Slow and slurred

ATTITUDE: Cooperative

CLOTHING: T- shirt /shorts / no shoes

MEDICAL/OTHER: None

STATE OF FLORIDA
COUNTY OF PALM BEACH

Ofc. P. Defeo N759 N759
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 1 day of July 20 18 by Ofc. Trawinski N415

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

SUBJECT: Jared Thomas Collin **CASE NUMBER** FWSA-18-OFF-6027

SEATED TASKS

HORIZONTAL GAZE NYSTAGMUS:

- [x] LT EYE-LACK OF SMOOTH PURSUIT
- [x] RT EYE-LACK OF SMOOTH PURSUIT
- [x] LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
- [x] 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:

FINGER TO NOSE:

Unable to follow directions.
Wrong hand 1 (right)
Not finger tip 3 (left and right)
Hesitated 2 (left and right)
Did not bring hand down (left and right) 6
Total clues: 12

PALM PAT:

Unable to follow directions.
Did not count as instructed(rolled hands)
Did not increase speed.
Did not increase speed when counting. **Total clues: 4**

HAND COORDINATION:

Unable to follow instructions.
Improper touch while counting.
Did not return left hand to chest.
Total clues 3

ROMBERG ALPHABET:

N/A

BREATH TEST RESULTS:

1) Refused	2)	3)	4)

STATE OF FLORIDA
COUNTY OF PALM BEACH

Ofc. P. Defco N759
(Signature of Arresting/Investigative Officer) N759

The foregoing instrument was sworn to or affirmed and subscribed before me this 1 day of July 2018 by Ofc. Thomas N615

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

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

WITNESS LIST

CASE NUMBER: **FWSA-18-OFF-6027**

ARRESTING OFFICER: **Ofc. P. Defeo N759**

ADDRESS: 1300 Marcinski Rd Jupiter FL 33477

PHONE NUMBERS (HOME): 954-218-7319 (WORK)

CAN TESTIFY TO: BUI

NAME: Ofc. Marcin Trawinski

ADDRESS: 1300 Marcinski Rd Jupiter FL 33477

PHONE NUMBERS (HOME) 561-246-7156 (WORK)

CAN TESTIFY TO: BUI

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)

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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)

TESTING FACILITY TASK REPORT

AGENCY: FWC BUI

SUBJECT: Collin, Jared Thomas CASE NUMBER: 18-092313

DATE: 7/1/18 ~~VIDEO TAPE NUMBER~~: N/A

BEGINNING TIME: 1742 ENDING TIME: 1755

BREATH TESTS RESULTS: 1) [redacted] TIME 1745 A.M. (P.M.) 2) ~~[redacted]~~ TIME ~~[redacted]~~ A.M./P.M.

3) ~~[redacted]~~ TIME ~~[redacted]~~ A.M./P.M. 4) ~~[redacted]~~ TIME ~~[redacted]~~ A.M./P.M.

BREATH OPERATOR: S. Owens #3184

MAINTENANCE TECHNICIAN: J. Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH:

ATTITUDE: Co-operative

CLOTHING: blue bathing trunks, pink T-shirt

MEDICAL CONDITIONS: ~~none~~ little cold

MEDICATIONS: advil & tylenol (over the counter)

OTHER:

COMMENTS: S/O & I arrived at 1710 hrs
S/O observed 20 minutes
S/O requested breath test, I asked consequences
S/O read I/C, I understand, still refused
S/O read c/w for BUI, I understood
I answered Q & A Refused questions about drinking

FLORIDA FISH AND WILDLIFE CONSERVATION COMMISSION
DIVISION OF LAW ENFORCEMENT

FLORIDA BUI/DUI
IMPLIED CONSENT WARNING

DEFENDANT'S NAME: Collin, Jared Thomas CASE NO.: FWSA-18-OFF-0627

READ ONLY THE PARAGRAPH APPLICABLE TO THE TYPE OF TEST YOU ARE REQUESTING

You are under arrest for operating a vessel or vehicle while under the influence of alcoholic beverages or chemical or controlled substance.

☒ I am now requesting that you submit to a lawful test of your **BREATH** for the purpose of determining its alcohol content. Will you submit to a **BREATH** test?

☐ 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. Will you submit to a **URINE** test?

☐ I am now requesting that you submit to a lawful test of your **BLOOD** for the purpose of determining its alcohol content and the presence of chemical or controlled substances. Will you submit to a **BLOOD** test?

IF THE SUBJECT REFUSES TO SUBMIT TO TESTING, READ ONE OF THE FOLLOWING:

I am ofc Defeo of the FWC
(Officer's Name) (Agency)

☒ **VESSEL**

If you fail to submit to the test I have requested of you, it will result in a civil penalty of $500.00. Additionally, if you refuse to submit to the test I have requested of you and have previously been fined for 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.

Will you submit to the test? ☐ YES ☒ NO

☐ **VEHICLE**

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 privileges have been previously suspended for 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.

Will you submit to the test? ☐ YES ☒ NO

7/1/18 1745 [signature]
DATE TIME DEFENDANT'S SIGNATURE

ofc. P. Defeo [signature] N759
OFFICER'S NAME (PRINTED) OFFICER'S SIGNATURE

FWCDLE 108D (09/05)

FLORIDA FISH AND WILDLIFE CONSERVATION COMMISSION
DIVISION OF LAW ENFORCEMENT
OPERATOR APPRAISAL & INTERVIEW

DEFENDANT'S NAME: Collin, Jared Thomas CASE NO. FWSA-18-OFF-0627

1. You have the right to remain silent.
2. Anything you say can and will be used against you in a court of law.
3. You have the right to talk to a lawyer and have him present with you while you are being questioned.
4. If you cannot afford to hire a lawyer, one will be appointed to represent you before any questioning, if you wish.
5. If you consent to answer questions now, without a lawyer present, you will still have the right to stop answering at anytime.

1. Do you understand each of these rights? ☑ YES ☐ NO
2. With these rights in mind, do you wish to talk to us now? ☑ YES ☐ NO

Defendant's Signature: _____

Were you operating a vehicle/vessel? Yes	Where were you going? Home
Was the vehicle/vessel in good condition? If No, → Yes	What is wrong with it?
What road/waterway were you on? Intracoastal at Boynton Inlet	Where were you coming from?
What time did you leave there? 5:00 - 4:30	Without looking at a watch or clock, what time is it now? Actual Time:
What is today's date? July 11, 18 Actual Date: 11	What day of the week is it? Actual Day:

When did you last eat? 12:00	What did you eat? Roast Beef	Where did you last eat? Home
What have you been drinking? Refuses	How much have you been drinking? —	Where have you been drinking? —
Who were you drinking with and were they drinking? —		What time did you start drinking? —
What time did you stop drinking? —	Do you feel the effects of alcohol (or drugs)? no	Do you feel that you are impaired? no
Were you involved in an accident today? no	When did you last sleep? 5am this morning	How much sleep did you get? 10-5 7HRS

Are you currently under the care of a doctor or dentist? For what? no

Have you used any type of drugs recently, prescription, non-prescription or otherwise? no

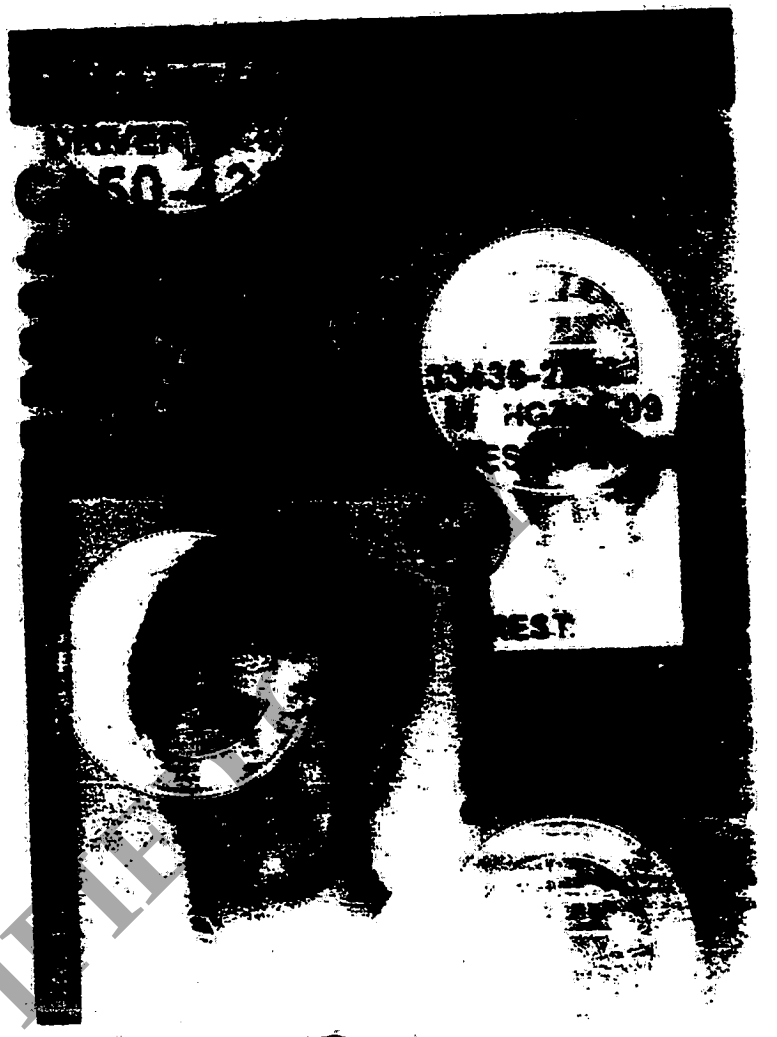
If so, what kind of drug did you take? What was your last dose and when?

Do you think you should have been operating a vehicle/vessel? no	If yes, Why?

N759
Interviewing Officer's Signature

Patrick Dees N759
Interviewing Officer's Name (Printed)

FWCDLE 108E (11/05)



HONOR
SAFE DRIVER
Operation of a motor vehicle constitutes consent to any sobriety test required by law.

FILING PACKAGE RECEIPT FORM

Check One:

- ☐ Other - _____
- ☒ State Attorney's Office D.U.I. / B.U.I. Intake
- ☐ Felony/Misdemeanor Filing Documentation

Case Number: **FWSA-18-OFF-6027**

Defendant: **Jared Thomas Collin**

Deputy Sheriff & ID: **Ofc. P. Defeo N759**

District: **LE**

Date Submitted: _____

Sent By: _____

Supervisor Approval: _____

_____

Received By Court Liaison: _____

Date/Time Received: _____

FILING PACKAGE LOGGED BY LIAISON
ON DATE AND TIME LISTED ABOVE

RETURN THIS ORIGINAL RECEIPT TO DEPUTY