

0491342

NH  
17CT116792

3334

## ARREST / NOTICE TO APPEAR

OFTS Number		Agency ORI Number		Agency Name		Agency Report Number (N.T.A.'s only)		1 Arrest 2 N.T.A. 3 Request for Warrant 4 Request for Capias		1 JUVENILE											
0501700		Jupiter Police Department				5 4 17-004401															
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 checked="" type="checkbox"/> 4 Traffic Misdemeanor <input type="checkbox"/> 5 Ordinance <input type="checkbox"/> 6 Other						If Weapon Seized Enter Type <b>NONE</b>		Multiple Clearance Indicator											
Location of Arrest (Including Name of Business) <b>1651 W. INDIANTOWN RD</b>						Location of Offense (Business Name, Address) <b>1651 W INDIANTOWN RD, JUPITER, FL 33458</b>															
Date of Arrest <b>09/13/2017</b>		Time of Arrest <b>14:45</b>		Booking Date		Booking Time		Jail Date		Jail Time		Location of Vehicle									
Name (Last, First, Middle) <b>BESSEY, JASON MATTHEW</b>												Alias (Name, DOB, Soc Sec #, Etc.) <b>Alias:</b>									
Race W-White B-Black		Sex W-M O-Original/Asian		Date of Birth <b>11-03-1972</b>		Height <b>5'10</b>		Weight <b>215</b>		Eye Color <b>GREEN</b>		Hair Color <b>GRAY</b>									
Sears Marks Tatoos, Unique Physical Features - Location, Type, Description <b>S</b>												Marital Status <b>UNKNOWN</b>									
Religion												Indication of Alcohol Influence Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown <input type="checkbox"/>									
Local Address (Street, Apt. Number) <b>6035 180TH ST N, JUPITER, FL 33458</b>												Phone <b>(772) 216-6969</b>									
Permanent Address (Street, Apt. Number) <b>6035 180TH ST N, JUPITER, FL 33458</b>												Phone <b>(772) 216-6969</b>									
Business Address (Name, Street) <b>6035 180TH ST N, JUPITER, FL 33458</b>												Phone <b>DAVID</b>									
DL Number, State <b>B200433724030 / FL</b>		SSN, Ssn, Number [REDACTED]		SSN Number		Place of Birth (City, State) <b>WEST PALM BEACH, US</b>		Citizenship													
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									
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									
□ Parent <input type="checkbox"/> Other _____ Name (Last, First, Middle)												Residence Phone									
□ Legal Custodian Address (Street, Apt. Number) (City) <b>[REDACTED]</b> (State) <b>[REDACTED]</b> (Zip) <b>[REDACTED]</b>												Business Phone									
Notified by (Name)												Date		Time		JUVENILE DISPOSITION					
												1. Handled/Processed within Department and Released		2. TOT JAC 3. Incarcerated							
Released To (Name) Relationship												Date		Time							
The above address was 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's Office (Phone 355-2526) informed of any change of address.												School Attended		Grade							
<input type="checkbox"/> Yes, <input type="checkbox"/> No												Property Name <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Description of Property		Value of Property <b>DR</b>					
Drug Activity M/N/A P Posess.		S Sell B Buy T Traffic		R Struggle D Deliver E Use		K Disperses/ Distribute		M Manufacture/ Produce/ Cultivate		L Other		Drug Type M/N/A A. Amphetamine		B. Barbiturate C. Cocaine E. Heroin		D. Hallucogen M. Marijuana O. Opium/Deriv		P. Paraphernalia S. Synthetic		I. Unknown Z. Other	
Charge Description <b>DUI - DRIVING WHILE UNDER INFLUENCE</b>												Statute Violation Number <b>316.193(1)</b>		Violation of ORD #							
Drug Activity <b>N</b>		Drug Type		Amount / Unit <b>/</b>		Offense # <b>17-004401</b>		Counts <b>1</b>		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Warrant / Capias Number				Bond					
Charge Description												Statute Violation Number		Violation of ORD #							
Drug Activity		Drug Type		Amount / Unit <b>/</b>		Offense #		Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Warrant / Capias Number				Bond					
Charge Description												Statute Violation Number		Violation of ORD #							
Drug Activity		Drug Type		Amount / Unit <b>/</b>		Offense #		Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Warrant / Capias Number				Bond					
Health / Apparent Physical Condition of Defendant												Any knowledge of the following <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Agitation <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries Explain		<b>SEP 10 2017</b>							
Check which applies <input type="checkbox"/> Released O.R. <input type="checkbox"/> Posted Bond		<input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> South County Mental Health		<input type="checkbox"/> T.O.T. County Jail		PROPERTY - Received By		Released By		Released To											
Transported By												Date Transported		Time Transported		Other					
<input checked="" type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court <input type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.						Location (Court, Room) <b>North County PALM BEACH GARD</b>						Date Signed <b>9-13-17</b>		No Photo Available							
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 COMTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.												Date Signed <b>9-13-17</b>		SCANNED							
Signature of Defendant (or Juvenile and Parent/Custodian)												Date Signed <b>9-13-17</b>		SCANNED							
HOLD for Other Agency <input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal <input type="checkbox"/> Other						Signature of Arresting Officer <b>[Signature]</b>						Name Verification - Printed by Arrestee <b>[Signature]</b>									
						Name of Arresting Officer (Print) <b>OKEEFE, JOHN</b>						ID # <b>1075</b>		(PRINT)							
						Transporting Officer <b>OKEEFE, JOHN</b>						ID # <b>307 JPD</b>		Agency							
												Witness here if subject signed with an "X"		PAGE <b>1 OF 1</b>							

SEP 15 2017

# D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 13th DAY OF September 20 17, AT 2:45 AM  PM  
SUBJECT: Bessey Jason Matthew CASE NUMBER: 17-004401  
AGENCY: JUPITER POLICE DEPARTMENT ARRESTING OFFICER: O'Keefe, J 351/1075

## PERSONAL CONTACT

DRIVING PATTERN: ACTUAL PHYSICAL CONTROL (PHYSICAL EVIDENCE OR STATEMENTS PUTTING DEF. BEHIND WHEEL OF VEHICLE)  
On 9/13/17 at approximately 1350 hours, I responded to the Sunoco gas station located at 1651 W. Indiantown Road in reference to a parking lot crash. Upon arrival I saw a white Volkswagen (V1) and a red Ford truck (V2). V1 had struck V2 from behind in the parking lot.

### OBSERVATION OF DRIVER:

I made contact with the driver / defendant of V1, identified as w/m Jason M. Bessey 11/3/72. The defendant stated he was unaware of why he struck V1. He appeared disoriented and confused. His eyes were glassy and upon exiting his vehicle he appeared unsteady on his feet. There was an odor of an unknown alcoholic beverage coming from his person.

### DRIVER'S STATEMENTS:

Defendant stated he had not been drinking. He was unsure of his phone number and his current address. Could not explain why he struck V2

### ODORS:

There was an odor of an unknown alcoholic beverage coming from the defendant.

## GENERAL OBSERVATIONS

SPEECH: Normal

ATTITUDE: Calm

CLOTHING: grey t shirt, tan shorts, sandals

MEDICAL/OTHER: defendant stated he had a brain injury in 2015

STATE OF FLORIDA  
COUNTY OF PALM BEACH

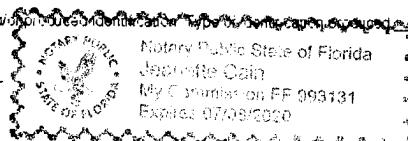
O'Keefe, J 351/1075

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 13th day of September 20 17 by O'Keefe, J 351/1075

(Print name of Arresting/Investigative Officer, who is personally known to me and whom I have identified to him/her by name and signature)

Deonthe Cain  
Notary Public, Clerk of Court, Officer (F S S 117-10)



**SCANNED**

**SEP 15 2017**

SUBJECT Bessey

Jason

CASE NUMBER 17-004401

**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:**

Defendant was unsteady on his feet

**WALK & TURN:**

The task was explained and demonstrated. During the instruction phase the defendant cou/d not maintain a heel to toe position. During the walking phase he failed to touch heel to toe on any steps and used his arms to balance. The defendant could not walk in a straight line

**ONE LEG STAND:**

The task was explained and demonstrated. The defendant was given two chances to perform the task. On the first attempt he failed to lift a foot off the ground. On the second attempt he lifted his right foot for about 3 seconds and then stopped. He stated he had to use his arms to balance.

**FINGER TO NOSE:**

No errors

**ROMBERG ALPHABET:**

No errors

**BREATH TEST RESULTS:** 1) .179 2) .169 3) 4)

STATE OF FLORIDA  
COUNTY OF PALM BEACH

O'Keefe, J 351/1075

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 13th day of September, 2017 by O'Keefe, J 351/1075

(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

Jeanette Cain

My Commission FF 993131

Expires 07/06/2020

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

**SCANNED**

**SEP 15 2017**

# TESTING FACILITY TASK REPORT

22

SUBJECT: BESSEY, JASON MATTHEWAGENCY: JUPITER PDDATE: SEPT. 13th, 2017CASE NUMBER: 17-126582BEGINNING TIME: 16:05 hrs.VIDEO TAPE NUMBER: n/aBREATH TESTS RESULTS: 1) .179 TIME 16:10 A.M./P.M.ENDING TIME: 16:26 hrs.2) .169 TIME 16:14 A.M./P.M.3)   TIME   A.M./P.M. 4)   TIME   A.M./P.M.BREATH OPERATOR: J. CAIN #2109MAINTENANCE TECHNICIAN: J. KARLECKE #6467

## TESTING OFFICER'S OBSERVATIONS

SPEECH: slurredATTITUDE: polite, cooperativeCLOTHING: mustard color shorts, grey tee-shirt, black flip flopsMEDICAL CONDITIONS: left shoulder surgery, HBP, past depression,MEDICATIONS: med for cholesterol & HBP, Lexapro, Spiz. Etken 5:30 AMOTHER: gray/green 144 YOA Bad short term memory Am  
Abt of unknown alcoholic beverage head injury  
Eyes: Red + glassy

COMMENTS:

**20MIN. OBSERV DONE BY ARRESTING OFFICER.**

Said yes to BFT.

Give two samples. Results told + explained to A.

Rights read by A/J. Stated he understood them.  
Answered questions.

Couldnt remember last time he ate.

Drank beer - couldn't say how many.

Said he drank after acc.

SCANNED  
SEP 15 2017

SUBJECT: Jason M. Besssey CASE NUMBER: 17-4401

## **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.

**SCANNED**

**SEP 15 2017**

SUSPECT'S SIGNATURE: (X) \_\_\_\_\_

SUBJECT: Jason M. Beeson CASE NUMBER: 17 4401

## 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? YES

WHERE WERE YOU GOING? Home, trying to get gas

WHAT STREET OR HIGHWAY WERE YOU ON? INDIANA PL 706

DIRECTION OF TRAVEL? W WHERE DID YOU START? ATLANTA GA

WHAT TIME DID YOU START? 5:45 AM WHAT TIME IS IT NOW? Can see, I don't know

WHAT IS TODAY'S DATE? 14 WHAT DAY OF THE WEEK IS IT? WED

WHAT COUNTY AND CITY ARE YOU IN NOW? Perry County, Indiana?

WHEN DID YOU LAST EAT? Not today WHAT DID YOU EAT?

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? Working

HOW MUCH DO YOU WEIGH? 215 HAVE YOU BEEN DRINKING? YES WHAT? Beer

HOW MUCH? Don't know WHERE? At home WITH WHOM? Friends

WHEN DID YOU HAVE YOUR FIRST DRINK? Don't know AND YOUR LAST DRINK? Don't know

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? Alcohol

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? NO ARE YOU UNDER THE INFLUENCE? NO

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? YES HOW MUCH? Don't know

WHAT? Beer WHERE? Don't know WHEN?

WHAT LINE OF WORK ARE YOU IN? Govt WHEN DID YOU LAST WORK?

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? Yes WHAT? Transient Bladder injury

ARE YOU SICK OR INJURED? NO WHAT'S WRONG? — WHEN? 2015 WHERE? Stomach

DO YOU LIMP? Yes DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? NO

WERE YOU IN AN ACCIDENT TODAY? NO IF SO, WHEN? Hit a car

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? NO WHEN?

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? NO WHO?  WHY?

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? Yes WHAT? Loxapain Fort. WHEN? 3:30 AM

DO YOU HAVE: EPILEPSY? NO

GLASS EYE? NO

FALSE TEETH? NO

EAR INFECTION? NO

INNER EAR TROUBLE? NO But

DIABETES? NO

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? NO

DO YOU TAKE INSULIN? NO IF SO, WHEN WAS YOUR LAST INJECTION?

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? NO WHERE?

INTERVIEWER: JK DATE: 3/11/17

SCANNED

SEP 15 2017

## WITNESS LIST

CASE NUMBER: 17-004401

ARRESTING OFFICER: O'Keefe, J 351/1075

ADDRESS: 210 Military Trail, Jupiter, FL 33458

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) 561-741-2408

CAN TESTIFY TO: S4 and DUI investigation

NAME: Ofc. Chad Smith

ADDRESS: 210 Military Trail, Jupiter, FL 33458

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

CAN TESTIFY TO: Backup Officer

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

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