

03223644

1908

ARREST / NOTICE TO APPEAR				Juvenile Referral Report		1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	Juvenile			
ADMINISTRATIVE	OBTS Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06-		17093622					
	Charge Type: Check as many as apply.		<input checked="" type="checkbox"/> 1. Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 4. Traffic Misdemeanor		<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Weapon Seized / Type 2 1. Yes 2. No		Multiple Clearance Indicator			
Location of Arrest (Including Name of Business) 1703 Lake Worth Road Lake Worth, FL 33467				Location of Offense (Business Name, Address) 1703 Lake Worth Road Lake Worth, FL 33467								
Date of Arrest 06/22/2017		Time of Arrest 22:43		Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle Joy Towing				
DEFENDANT	Name (Last, First, Middle) Overby, Jessica May				Alias (Name, DOB, Soc. Sec. #, Etc.)							
	Race W - White 1 - American Indian B - Black 0 - Oriental/Asian		Sex W F	Date of Birth 06/24/1977	Height 5'07"	Weight 145	Eye Color Blue	Hair Color Blonde	Complexion Light	Build Medium		
	Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description) Unknown				Marital Status Single		Religion NONE	Indication of: Alcohol Influence Drug Influence				
	Local Address (Street, Apt. Number) 3892 Cypress Lake Drive				(City) Lake Worth	(State) Florida	(Zip) 33467	Phone () Unknown	Residence Type: 1. City 2. County 3. Florida 4. Out of State			
	Permanent Address (Street, Apt. Number) Same				(City)	(State)	(Zip)	Phone ()	Address Source Florida DL			
	Business Address (Name, Street)				(City)	(State)	(Zip)	Phone ()	Occupation Unknown			
	D/L Number, State O-161-433-77-724-0/FL		Soc. Sec. Number [REDACTED]		INS Number		Place of Birth (City, State) Sommertown, Tennessee		Citizenship U.S.			
	CO-DEF	Co-Defendant Name (Last, First, Middle)				Race	Sex	Date of Birth	<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large		<input checked="" 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 checked="" type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile	
JUVENILE	<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other: 3100				(First) (Middle)				Residence Phone ()			
	<input type="checkbox"/> Address (Street, Apt. Number) 3100				(City)	(State)	(Zip)	Business Phone ()				
	Notified by: (Name) 3100				Date	Time	Juvenile Disposition 1. Handled/processed within Dept. and Released.			2. TOT HRS / DYS 3. Incarcerated		
	Released To: (Name) 3100				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					
CHARGE	CHARGE CODE	S. Sell N. N/A P. Possess	R. Smuggle B. Buy T. Traffic	K. Dispense/ D. Deliver E. Use	M. Manufacture/ P. Produce/ C. Cultivate	Z. Other	Drug Type N. N/A E. Amphetamine	B. Barbiturate C. Cocaine E. Heroin	H. Hallucinogen M. Marijuana O. Opium/Deriv.	P. Paraphernalia/ S. Equipment U. Unknown Z. Other		
CHARGE	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	CHARGE	N	N	N/A	Offense # 17093622	Warrant / Capias Number				Bond		
CHARGE	CHARGE	Charge Description Resist with Violence				Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number 843.01		Violation of ORD #		
CHARGE	CHARGE	N	N	Amount / Unit	Offense # 17093622	Warrant / Capias Number				Bond		
CHARGE	CHARGE	Charge Description Possession of Marijuana less than 20 grams				Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number 893.13 (6)(b)		Violation of ORD #		
CHARGE	CHARGE	P	M	Amount / Unit	Offense # 17093622	Warrant / Capias Number				Bond		
CHARGE	CHARGE	Charge Description Possession of Drug Paraphernalia				Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Statute Violation Number 893.147 (1)		Violation of ORD #		
CHARGE	CHARGE	P	P	Amount / Unit	Offense # 17093622	Warrant / Capias Number				Bond		
NOTICE TO APPEAR	Location (Court, Room Number, Address) CRIMINAL JUSTICE COMPLEX 3228 Gun Club Road WPB, FL											
NOTICE TO APPEAR	Court Date and Time Month July Day 20th Year 2017 Time 8:30 AM <input checked="" type="checkbox"/> PM <input type="checkbox"/>											
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												
NOT COMPLIANT Signature of Defendant (or Juvenile and Parent /Custodian) Date Signed												
ADMIN	HOLD for other Agency Name: X			Signature of Arresting Officer Name of Arresting Officer (Print) Inv. CHIQUITO-RODRIGUEZ #18334			Name Verification (Printed by Arrestee) JUN 23 AM 4:13 (PRINT)					
ADMIN	<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal			<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:			I.D. # 18334 Agency PBSO					
ADMIN	Intake Deputy 8101			I.D. # Pouch #			Transporting Officer Same					
ADMIN											Witness here if subject signed with an X SCANNED	
DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT (N.T.A.'s ONLY)												
PBSO #148 REV. 8/97												
JUN 23 2017												

OBTS Number		PROBABLE CAUSE AFFIDAVIT			1. Arrest	3. Request for Warrant	2. N.T.A.	4. Request for Capias	1	Juvenile
ADMIN	Agency ORI Number FLO 500000	Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE	Agency Report Number 06-	17093622						
	Charge Type: <input type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance Check as many as apply. <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other				Special Notes:					
DEF	Name (Last, First, Middle) Overby, Jessica May				Alias		Race W	Sex F	Date of Birth 06/24/1977	
	Charge Description DUI		Charge Description 316.193 (1)		Charge Description Resist with Violence		843.01			
CHARGES	Charge Description Possession of Marijuana less than 20 grams		Charge Description 893.13 (6)(b)		Charge Description Possession of Drug Paraphernalia		843.147 (1)			
	Victim's Name (Last, First, Middle) STATE OF FLORIDA				Race	Sex	Date of Birth			
VICTIM	Local Address (Street, Apt. Number)		(City)	(State)	(zip)	Phone ()	Address Source			
	Business Address (Name, Street)		(City)	(State)	(zip)	Phone ()	Occupation			
<p>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.</p> <p>The Person taken into custody</p> <p><input checked="" type="checkbox"/> committed the below acts in my presence.</p> <p><input type="checkbox"/> confessed to _____ admitting to the below facts.</p> <p><input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.</p> <p><input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p>										
<p>On the <u>22nd</u> day of <u>June</u> 20 <u>17</u> at <u>22:09</u> <input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)</p>										
<p>I then placed the defendant in handcuffs and advised her that she was under arrest for DUI based on the signs and level of impairment I observed throughout the investigation, evidence on scene and the crash investigation and she became combative and argumentative.</p> <p>I transported the defendant to the Breath and Alcohol Testing Facility (B.A.T.). Once at the facility, and after a twenty minute observation during which time she did not place anything in her mouth or regurgitate, the defendant was placed on camera and asked to submit to a breath sample. She became combative and verbally refused. I attempted to read her Florida Implied consent several times as she continued yelling over me. Due to the defendant's combative behavior the investigation was concluded at that point and the refusal was noted and documented at 23:46 hours.</p>										
<p>Based on the above set of facts and circumstances, probable cause exists to find the JESSICA MAY OVERBY in violation of FSS 316.193 (1) Driving Under the Influence.</p>										
<p>This case is cleared by arrest.</p>										
PROBABLE CAUSE STATEMENT	<p>STATE OF FLORIDA COUNTY OF PALM BEACH</p> <p>Inv. Chiquito-Rodriguez (Signature of Arresting/Investigative Officer)</p> <p><i>Chiquito #18334</i></p> <p>22nd June 20 17 by Inv. Chiquito-Rodriguez</p> <p>The foregoing instrument was sworn to or affirmed and subscribed before me this _____ day of _____, 20 _____. (Print name of Arresting/Investigative Officer) who is personally known to me by _____, produced identification _____, Type of identification produced _____, Notary Public - State of Florida _____</p> <p>SHARI L. O'NEAL Commission # FF 966854 My Comm. Expires Jun 25, 2020 Bonded through National Notary Assn.</p> <p>Notary Public, Clerk of Court, Officer (F.S. §. 117.10)</p>									
	<p>SCANNED</p> <p>JUN 23 2017</p> <p>PAGE 1 OF 1</p>									
ADMINISTRATIVE	<p>DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY</p>									

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		Agency Report Number 06-		17093622			
DEF	ChargeType: <input type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance Check as many as apply. <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other				Special Notes:					
	Name (Last, First, Middle) Overby, Jessica May				Alias		Race W	Sex M	Date of Birth 06/24/1977	
CHARGES	Charge Description DUI		316.193 (1)		Charge Description Resist with Violence		843.01			
	Charge Description Possession of Marijuana less than 20 grams		893.13 (6)(b)		Charge Description Possession of Drug Paraphernalia		843.147 (1)			
VICTIM	Victim's Name (Last, First, Middle) STATE OF FLORIDA				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				
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 <input checked="" type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> was observed by _____ who told _____ <input type="checkbox"/> confessed to _____ that he/she saw the arrested person commit the below acts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.										
On the <u>22nd</u> day of <u>June</u> 20 <u>17</u> at <u>22:09</u> <input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)										

With Overby showing signs of definite impairment, she was placed under arrest for driving under the influence. While attempting to handcuff Overby, she became immediately non-compliant and resisted efforts to take her into custody. Once handcuffed and during a pat down, she began to kick and spit at myself and assisting deputies. While trying to secure her into my marked PBSO patrol vehicle, she "posted up" her legs into the door frame and physically and actively resisted efforts to get her into the vehicle. Overby continued to spit at deputies. At one point she wedged her right foot into the right rear door's bars, thusly holding onto the door. Finally, control was regained and Overby was secured into my vehicle.

A search of Overby's car for towing inventory purposes revealed a plastic bag in the center console. This clear plastic bag contained a multi-colored wooden "one hitter" container which concealed a green substance which I recognized through my training and experience as suspected marijuana. Additionally the "one hitter" also contained a silver pipe which has in intended use of inhaling marijuana. The recovered suspected marijuana was field tested utilizing a PBSO issued test kit. This test proved positive for THC. Total weight of the suspected marijuana was .72 grams.

Therefore, through the actions of Overby and the evidence recovered, I find probable cause for additional charges against "JESSICA MAY OVERBY" who did knowingly and willfully resist, obstruct or oppose, a law enforcement officers of the Palm Beach County Sheriff's Office, in the lawful execution of a legal duty, by doing violence to the person of such officer, contrary to Florida Statute 843.01, a 3rd degree felony, level 5, and who was unlawfully and knowingly constructive possession of less than 20 grams of a material, compound, mixture or preparation which contained cannabis, commonly known as marijuana, a controlled substance, contrary to Florida Statute 893.13(6)(b), a 1st degree misdemeanor, and was unlawfully and knowingly in constructive possession of the "one hitter and pipe", which was drug paraphernalia being used, intended for use, or designed for use in ingesting, inhaling, or otherwise introducing into the human body a controlled substance, and for storage of, contrary to Florida Statute 893.147(1)(b), a 1st degree misdemeanor.

PROBABLE CAUSE STATEMENT

STATE OF FLORIDA
COUNTY OF PALM BEACH

Inv. Chiquito-Rodriguez
(Signature of Arresting/Investigative Officer)

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

22nd June

20 17

by **Inv. Chiquito-Rodriguez #18334**

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 966854

My Comm. Expires Jun 25, 2020
Bonded through National Notary Public Network

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

SCANNED

PAGE 2 OF 2

JUN 23 2017

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 22nd DAY OF June 20 17, AT 22:09 AM ✓ PM

SUBJECT: Overby, Jessica May CASE NUMBER: 17093622

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: Inv. Chiquito-Rodriguez

PERSONAL CONTACT

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

On 06/22/2017, at approximately 22:20 hours, I responded to 1703 Lake Worth Road in the City of Lake Worth, located within Palm Beach County, Florida to assist with a single vehicle crash. Upon arriving on scene I made contact with D/S Darren Smith #17626 and CSA Jonathan Foster #9097 who were first to arrive on scene. D/S Smith arrived to the Tri-Rail parking lot at 1703 Lake Worth Road and located a single vehicle, a dark gray 4 door Cadillac bearing Florida tag DUC7B, with heavy damage to the passenger's side and obstructing the exit of the parking lot. There was a white female, later identified as JESSICA MAY OVERBY (defendant) DOB: 06/24/1977 by her Florida issued driver's license, sitting outside of the vehicle and on the curb. There was a Tri-Rail on duty security guard, a Mr. Timothy Roos, who witnessed the crash occur and called 911 to report the crash. He remained on scene and gave a sworn written statement. I assisted CSA Foster with the crash investigation and independently evaluated the crash scene and damages. Through the crash investigation it was determined that the defendant was the registered owner of the vehicle and the extensive damage and the large amount of blue paint transfer along the passenger side of the vehicle was consistent with the vehicle having struck the blue wall. CSA Foster completed the crash report under PBSO case # 17093620.

OBSERVATION OF DRIVER:

When I arrived on scene the defendant was sitting on the curb and was yelling obscenities and arguing with the deputies on scene. I noticed that the defendant's speech was heavily slurred and there was a very strong odor of an unknown alcoholic beverage emanating from the defendant's breath as she yelled and argued. In an effort to calm her down, I asked the defendant to stand up and relocated her to the front of my vehicle. I observed her stumble and had difficulty standing up. Once she stood up she was swaying in a front to back motion while in a standing, resting position and stumbled as she walked. Her eyes were red, bloodshot and glassy. I asked the defendant if she had any medical problems or sustained any injuries and she verbally stated that she did not. I did not observe any visible injuries on the defendant. I advised her that I completed the crash investigation and I read the defendant her Constitutional warnings from a PBSO issued Miranda card. I explained to her that I was initiating a separate DUI investigation and she verbally stated that she understood. The defendant had very drastic mood swings and went from moments of yelling profanity, racial slurs and obscenities to being somewhat cooperative.

DRIVER'S STATEMENTS:

Post Miranda the defendant stated that she was the registered owner of the vehicle, was the sole occupant and driver of the vehicle and that someone crashed into her car. She further stated that she "had one beer at like one o'clock". The defendant denied taking any medications. I asked the defendant if she would consent to voluntary SFST's and she again became very argumentative and combative and refused to complete roadside tasks. I advised her of Taylor warnings and that her refusal to complete roadsides would be used against her in court and she stated that she understood.

SEE Probable Cause PAGE 2 for further.....

ODORS:

Strong odor of an unknown alcoholic beverage emanating from defendant's breath that became stronger as the defendant spoke to me

GENERAL OBSERVATIONS

SPEECH: Slow, slurred, mumbled,

ATTITUDE: Combative, Moody, Emotional

CLOTHING: Tan top, Swimsuit top, NO SHOES, Blue jeans

MEDICAL/OTHER: Defendant denied having any medical conditions, injuries or physical impairments. Defendant denied being on any medications or taking any medications.

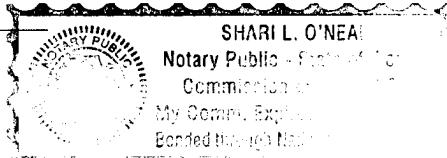
STATE OF FLORIDA
COUNTY OF PALM BEACH

Inv. Chiquito-Rodriguez
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 22nd day of June 20 17 by Inv. Chiquito-Rodriguez #18334

(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)



SCANNED

JUN 23 2017

SUBJECT: Overby, Jessica May

CASE NUMBER: 17093622

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:

Bloodshot, glassy eyes. Swaying in a front to back motion while in a standing, resting position. Very argumentative and combative.

WALK & TURN:

REFUSED

ONE LEG STAND:

REFUSED

FINGER TO NOSE:

REFUSED

ROMBERG ALPHABET:

REFUSED

BREATH TEST RESULTS: 1) REFUSED 2) REFUSED 3) 4)

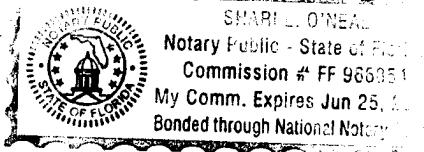
STATE OF FLORIDA
COUNTY OF PALM BEACH

Inv. Chiquito-Rodriguez
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 22nd day of June 2017 by Inv. Chiquito-Rodriguez #18334

(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)



SCANNED
JUN 23 2017

PALM BEACH COUNTY SHERIFF'S OFFICE - SWORN STATEMENT

Per FL statute 837.012, whoever knowingly makes a false statement under oath shall be guilty of a misdemeanor of the first degree punishable by imprisonment up to 1 year.

WITNESS VICTIM OTHER



17-093622

CASE #: 17-093622	ZONE: 14-13	SUSPECT: Jessica Duroby	DATE & TIME OF ORIGINAL EVENT/OFFENSE: 06/22/2017 2209	
EVENT TYPE: Crash		DEPUTY: D. Smith	ID#: 17626	

COMPLETE EVERYTHING BELOW - PRINT LEGIBLY

LAST NAME: Roos	FIRST NAME: Timothy	MIDDLE INITIAL: T	RACE: W	SEX: M
DATE OF BIRTH: 03/15/1952 (MM/DD/YYYY)	YOUR HEIGHT: 602	YOUR WEIGHT: 215	YOUR HAIR COLOR: Grey	YOUR EYE COLOR: Brown
YOUR HOME ADDRESS: 6499 Powerline Rd	<input type="checkbox"/> CHECK IF HOMELESS		CITY: Ft. Lauderdale	STATE: FL ZIP: 33309
YOUR WORK NAME & ADDRESS: G4S Security - 6499 Powerline Rd	<input type="checkbox"/> CHECK IF UNEMPLOYED OR RETIRED		CITY: Ft. Lauderdale	STATE: FL ZIP:
WORK PHONE: <input type="checkbox"/> CHECK IF NONE (954) 771-5005	CELL PHONE: <input type="checkbox"/> CHECK IF NONE (561) 603-0108	HOME PHONE: <input type="checkbox"/> CHECK IF NONE ()	EMAIL:	<input type="checkbox"/> CHECK IF NONE

WRITE WHAT HAPPENED IN YOUR WORDS IN FULL DETAIL - PRINT LEGIBLY

YOUR NAME: I, Timothy Roos	DO HEREBY VOLUNTARILY MAKE THE FOLLOWING STATEMENT WITHOUT THREAT, COERCION, OFFER OF BENEFIT, OR FAVOR BY ANY PERSONS WHOMSOEVER...
<p>While working security at Lake Worth Ter-Rail, 1203 Lake Worth Rd, I observed a motorcycle pull up next to a Black Cadillac. A white female, got off passenger seat and started questioning me why I was at her vehicle. She appeared under the influence, slurred speech, agitated, and somewhat unsteady on her feet. I told her not to drive, and she said she does not drink. The male on motorcycle said he would handle it. I went to location approximately 35-40 yds away at parking lot, observe female get into her vehicle, start it up and at high rate of speed from stop, several times, headed for East Endian PAGE 1 OF 2</p>	

READ AND SIGN

I SWEAR AND AFFIRM THIS AND/OR THE ATTACHED STATEMENTS ARE CORRECT AND TRUE:

YOUR SIGNATURE: X Timothy Roos

DEPUTY SHERIFF NOTARY PUBLIC FSS: 117.10
SWORN TO AND SUBSCRIBED BEFORE ME TODAY:
DATE: 06/22/2017 TIME: 2250
SIGNATURE: D. Smith ID: 17626

IF YOU DO NOT WISH TO PROSECUTE, COMPLETE THE ABOVE STATEMENT, READ THIS DISCLAIMER AND INITIAL BELOW: I AM OF LEGAL AGE AND I AM THE REPORTED VICTIM OF A CRIME UNDER FLORIDA LAW. I HEREBY STATE THAT I WILL NOT COOPERATE ANY FURTHER WITH THE INVESTIGATION OF THE ALLEGED CRIME. I FURTHER RELEASE THE PALM BEACH COUNTY SHERIFF'S OFFICE OF ANY PRESENT OR FUTURE RESPONSIBILITY AS TO MY CASE. I ACKNOWLEDGE THAT I UNDERSTAND MY RIGHTS AS A CRIME VICTIM, PARTICULARLY REGARDING VICTIM COMPENSATION ELIGIBILITY, WHICH INCLUDES SUCH BENEFITS AS REIMBURSEMENT FOR: DISABILITY; LOST WAGES; LOSS OF SUPPORT; MEDICAL, DENTAL, MENTAL HEALTH COUNSELING AND FUNERAL EXPENSES. I AM AWARE I MAY BE GIVING UP THESE RIGHTS FOR MY FAMILY AND MYSELF BY INITIALLYING BELOW. I AM TAKING THIS POSITION OF MY OWN FREE WILL KNOWING THAT THE CASE CAN ONLY BE FURTHER INVESTIGATED AND PROSECUTED WITH MY COOPERATION.

(PROSECUTION WAIVER NOT TO BE USED FOR CASES INVOLVING DOMESTIC OR DATING VIOLENCE PER G.O. 508.00)

DO NOT WISH TO PROSECUTE (INITIAL)

WHITE - RECORDS COPY

CANARY - STATE ATTORNEY COPY

PINK - OFFICER'S COPY

GOLD - WITNESS / VICTIM COPY

PALM BEACH COUNTY SHERIFF'S OFFICE - **SWORN STATEMENT**

Per FL statute 837.012, whoever knowingly makes a false statement under oath shall be guilty of a misdemeanor of the first degree punishable by imprisonment up to 1 year.

WITNESS VICTIM OTHER



CASE #:	17-093622	ZONE:	14-13	SUSPECT:	Jessica Overby	DATE & TIME OF ORIGINAL EVENT/OFFENSE:	06/22/2017 2201
EVENT TYPE:	Crash		DEPUTY:		D Smith	ID#:	17626

COMPLETE EVERYTHING BELOW - PRINT LEGIBLY

LAST NAME:	FIRST NAME:	MIDDLE INITIAL:	RACE:	SEX:	
Roos	Timothy	T	W	M	
DATE OF BIRTH:	(MM/DD/YYYY)	YOUR HEIGHT:	YOUR WEIGHT:	YOUR HAIR COLOR:	YOUR EYE COLOR:
03/15/1952					
YOUR HOME ADDRESS:	<input type="checkbox"/> CHECK IF HOMELESS		CITY:	STATE:	ZIP:
66499 Powerline Rd			Ft Lauderdale	FL	
YOUR WORK NAME & ADDRESS:	<input type="checkbox"/> CHECK IF UNEMPLOYED OR RETIRED		CITY:	STATE:	ZIP:
SAME					
WORK PHONE: <input type="checkbox"/> CHECK IF NONE	CELL PHONE: <input type="checkbox"/> CHECK IF NONE	HOME PHONE: <input type="checkbox"/> CHECK IF NONE	EMAIL:	<input type="checkbox"/> CHECK IF NONE	
954 221-5005	(561) 603-0108	()			

WRITE WHAT HAPPENED IN YOUR WORDS IN FULL DETAIL - PRINT LEGIBLY

YOUR NAME:	DO HEREBY VOLUNTARILY MAKE THE FOLLOWING STATEMENT WITHOUT THREAT, COERCION, OFFER OF BENEFIT, OR FAVOR BY ANY PERSONS WHOMSOEVER...
1 Timothy Roos	

Cont/

ABD continued over East sidewalk hitting the Retaining wall at East side of parking lot, coming to a stop in the East entrance to the parking area.

I check her for injuries and she appears uninjured. I noticed most of her bags had deployed.

I then called 911, Palm Beach SO.

Verbal that crash was same vehicle I observed the white female get into who got off motorcycle

VEH - IS FL # DUC 7B - Grey Cadillac - 4D

PAGE 2 OF 2

READ AND SIGN

I SWEAR AND AFFIRM THIS AND/OR THE ATTACHED STATEMENTS ARE CORRECT AND TRUE:

YOUR SIGNATURE: X Timothy Roos

DEPUTY SHERIFF NOTARY PUBLIC FSS: 117.10

SWORN TO AND SUBSCRIBED BEFORE ME TODAY:

DATE: 06/22/2017 TIME: 2250

SIGNATURE: D. Smith ID: 17626

IF YOU DO NOT WISH TO PROSECUTE, COMPLETE THE ABOVE STATEMENT, READ THIS DISCLAIMER AND INITIAL BELOW: I AM OF LEGAL AGE AND I AM THE REPORTED VICTIM OF A CRIME UNDER FLORIDA LAW. I HEREBY STATE THAT I WILL NOT COOPERATE ANY FURTHER WITH THE INVESTIGATION OF THE ALLEGED CRIME. I FURTHER RELEASE THE PALM BEACH COUNTY SHERIFF'S OFFICE OF ANY PRESENT OR FUTURE RESPONSIBILITY AS TO MY CASE. I ACKNOWLEDGE THAT I UNDERSTAND MY RIGHTS AS A CRIME VICTIM, PARTICULARLY REGARDING VICTIM COMPENSATION ELIGIBILITY, WHICH INCLUDES SUCH BENEFITS AS REIMBURSEMENT FOR: DISABILITY; LOST WAGES; LOSS OF SUPPORT; MEDICAL, DENTAL, MENTAL HEALTH COUNSELING AND FUNERAL EXPENSES. I AM AWARE I MAY BE GIVING UP THESE RIGHTS FOR MY FAMILY AND MYSELF BY INITIALLING BELOW. I AM TAKING THIS POSITION OF MY OWN FREE WILL KNOWING THAT THE CASE CAN ONLY BE FURTHER INVESTIGATED AND PROSECUTED WITH MY COOPERATION.

(PROSECUTION WAIVER NOT TO BE USED FOR CASES INVOLVING DOMESTIC OR DATING VIOLENCE PER G.O. 508.00)

DO NOT WISH TO PROSECUTE (INITIAL)

WHITE - RECORDS COPY

CANARY - STATE ATTORNEY COPY

PINK - OFFICER'S COPY

GOLD - WITNESS / VICTIM COPY

SCANNED
JUN 23 2017

PALM BEACH COUNTY SHERIFF'S OFFICE – SWORN STATEMENT

Per FL statute 837.012, whoever knowingly makes a false statement under oath shall be guilty of a misdemeanor of the first degree punishable by imprisonment up to 1 year.

WITNESS VICTIM OTHER

CASE #: 17-0936022	ZONE: 14-13	SUSPECT: Jessica Overby	DATE & TIME OF ORIGINAL EVENT/OFFENSE: 06/22/2017 2201
EVENT TYPE: Crash		DEPUTY: D Smith	ID #: 17626

COMPLETE EVERYTHING BELOW – PRINT LEGIBLY

LAST NAME: Roos	FIRST NAME: Timothy	MIDDLE INITIAL: T	RACE: W	SEX: M
DATE OF BIRTH: 03/15/1952	YOUR HEIGHT:	YOUR WEIGHT:	YOUR HAIR COLOR:	YOUR EYE COLOR:
YOUR HOME ADDRESS: 6489 Powerline Rd	<input type="checkbox"/> CHECK IF HOMELESS		CITY: Ft Lauderdale	STATE: FL ZIP: 33308
YOUR WORK NAME & ADDRESS: SAME	<input type="checkbox"/> CHECK IF UNEMPLOYED OR RETIRED		CITY:	STATE: ZIP:
WORK PHONE: <input type="checkbox"/> CHECK IF NONE 954 221-5005	CELL PHONE: <input type="checkbox"/> CHECK IF NONE (561) 603-0108	HOME PHONE: <input type="checkbox"/> CHECK IF NONE ()	EMAIL:	<input type="checkbox"/> CHECK IF NONE

WRITE WHAT HAPPENED IN YOUR WORDS IN FULL DETAIL – PRINT LEGIBLY

YOUR NAME: I, Timothy Roos	DO HEREBY VOLUNTARILY MAKE THE FOLLOWING STATEMENT WITHOUT THREAT, COERCION, OFFER OF BENEFIT, OR FAVOR BY ANY PERSONS WHOMSOEVER...
<p>Cont/</p> <p>Also continued over East sidewalk, hitting the Retaining wall at East side of parking lot, coming to a stop in the East entrance to the parking area.</p> <p>I check her for injuries and she appeared uninjured. I noticed most of the bags had deployed.</p> <p>I then called 911, Palm Beach SO.</p> <p>Verdict that crash was same vehicle I observed the white female get into who got off motorcycle</p> <p>Veh - is FL # DUC 718 - Grey Cadillac - 40</p>	
PAGE 2 OF 2	

READ AND SIGN

I SWEAR AND AFFIRM THIS AND/OR THE ATTACHED STATEMENTS ARE CORRECT AND TRUE:

YOUR SIGNATURE: X Timothy Roos

DEPUTY SHERIFF NOTARY PUBLIC FSS: 117.10
 SWORN TO AND SUBSCRIBED BEFORE ME TODAY:
 DATE: 06/22/2017 TIME: 2250
 SIGNATURE: D. Smith ID: 17626

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DO NOT WISH TO PROSECUTE (INITIAL)

PBSO #0134 REV. 12/11

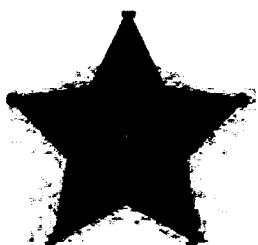
WHITE - RECORDS COPY

CANARY - STATE ATTORNEY COPY

PINK - OFFICER'S COPY

GOLD - WITNESS / VICTIM COPY

SCANNED
JUN 23 2017



PALM BEACH COUNTY SHERIFF'S OFFICE
DUI TESTING FACILITY
INFORMATION SHEET

PBSO CASE # 17093622 PBSO ZONE 14-13

AGENCY CASE # _____ CRASH CASE # _____

TIME OF STOP/CRASH 22:09 DATE 06/22/2017 DAY 5

SUBJECT'S NAME Overby, Jessica May RACE W SEX M F

HGT 5'07" WGT 145 DOB 06/24/1977

LOCATION 1703 Lake Worth Road Lake Worth, FL 33467

ARRESTING OFFICER'S NAME & ID Inv. Chiquito-Rodriguez AGENCY PBSO

DIVISION: VCD/DUI NOTIFIED BY COMMO Yes

ARRIVAL AT FACILITY 23:16

ARREST TIME 22:43

BREATH RESULTS:

1)	<input type="checkbox"/>
2)	<input type="checkbox"/>
3)	<input type="checkbox"/>
4)	<input type="checkbox"/>

TESTING OFFICER'S ID 6212 PBSO VIDEOTAPE # 62831

SCANNED
JUN 23 2017

WITNESS LIST

CASE NUMBER: 17093622

ARRESTING OFFICER: Inv. Chiquito-Rodriguez

ADDRESS: 3228 Gun Club Rd WPB, FL 33406

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

CAN TESTIFY TO: Facts of case

NAME: D/S Ian Goodman #26786

ADDRESS: 3228 Gun Club Rd WPB, FL 33406

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

CAN TESTIFY TO: Facts of case (Deputy on scene)

NAME: D/S Darren Smith #17626

ADDRESS 3228 Gun Club Rd WPB, FL 33406

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: Facts of case (First Deputy on scene)

NAME: CSA Jonathan Foster #9097

ADDRESS 3228 Gun Club Rd WPB, FL 33406

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: Facts of the case (Completed crash report)

NAME: Investigator John Schaefer #8777

ADDRESS 3228 Gun Club Rd WPB, FL 33406

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: Facts of the case (Assisted with investigation)

NAME: Timothy Roos

ADDRESS 6499 Powerline Road Fort Lauderdale, FL

PHONE NUMBERS (HOME) _____ (WORK) (954) 771-5005

CAN TESTIFY TO: Facts of the case (Witness to the crash)

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: _____

SCANNED

JUN 23 2017

PALM BEACH COUNTY SHERIFF'S OFFICE - SWORN STATEMENT

Per FL statute 837.012, whoever knowingly makes a false statement under oath shall be guilty of a misdemeanor of the first degree punishable by imprisonment up to 1 year.

WITNESS VICTIM OTHER



17-093622

CASE #:	17-093622	ZONE:	14-13	SUSPECT:	Jessica Overby	DATE & TIME OF ORIGINAL EVENT/OFFENSE:	06/22/2017 2209
EVENT TYPE:	Crash	DEPUTY:	D. Smith		ID#:	17626	

COMPLETE EVERYTHING BELOW - PRINT LEGIBLY

LAST NAME:	Roos	FIRST NAME:	Timothy	MIDDLE INITIAL:	T	RACE:	W	SEX:	M	
DATE OF BIRTH:	(MM/DD/YYYY)	03/15/1852	YOUR HEIGHT:	602	YOUR WEIGHT:	215	YOUR HAIR COLOR:	Grey	YOUR EYE COLOR:	Blue
YOUR HOME ADDRESS:	6499 Powerline Rd	<input type="checkbox"/> CHECK IF HOMELESS		CITY:	Ft. Lauderdale	STATE:	FL	ZIP:		
YOUR WORK NAME & ADDRESS:	G4S Security - 6499 Powerline Rd	<input type="checkbox"/> CHECK IF UNEMPLOYED OR RETIRED		CITY:	Ft. Lauderdale	STATE:	FL	ZIP:		
WORK PHONE:	<input type="checkbox"/> CHECK IF NONE	CELL PHONE:	<input type="checkbox"/> CHECK IF NONE	HOME PHONE:	<input type="checkbox"/> CHECK IF NONE	EMAIL:	<input type="checkbox"/> CHECK IF NONE			
(954) 771-5005		(561) 603-0108		()						

WRITE WHAT HAPPENED IN YOUR WORDS IN FULL DETAIL - PRINT LEGIBLY

YOUR NAME:	I, Timothy Roos	DO HEREBY VOLUNTARILY MAKE THE FOLLOWING STATEMENT WITHOUT THREAT, COERCION, OFFER OF BENEFIT, OR FAVOR BY ANY PERSONS WHOMSOEVER...
------------	-----------------	--

While walking securely at Lake Worth Ter-Rail, 1703 Lake Worth Rd, I observed a motorcycle pull up next to a Black Cadillac. A white female, got off passenger seat and started questioning me why I was at her vehicle. She appeared under the influence, slurred speech, agitated, and somewhat unsteady on her feet. I told her not to drive, and she said she does not drink. The male on motorcycle said he would handle it. I went to location approximately 35-40 yds away at parking lot, observed female get into her vehicle, start it up and at high rate of speed from stop, squeal tires, headed for East Endian PAGE 1 OF 2

READ AND SIGN

I SWEAR AND AFFIRM THIS AND/OR THE ATTACHED STATEMENTS ARE CORRECT AND TRUE:

YOUR SIGNATURE: 

DEPUTY SHERIFF NOTARY PUBLIC FSS: 117.10
SWORN TO AND SUBSCRIBED BEFORE ME TODAY:

DATE: 06/22/2017 TIME: 2250

SIGNATURE:  ID: 17626

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(PROSECUTION WAIVER NOT TO BE USED FOR CASES INVOLVING DOMESTIC OR DATING VIOLENCE PER G.O. 508.00)

DO NOT WISH TO PROSECUTE JUN 23 2017

WHITE - RECORDS COPY CANARY - STATE ATTORNEY COPY PINK - OFFICER'S COPY GOLD - WITNESS / VICTIM COPY

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 Doe of the 123 Main Street.

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) John Doe

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.

SUSPECT'S SIGNATURE: (X) John Doe

SCANNED

WHITE - STATE ATTY.

YELLOW - DHSMV

PINK - CENTRAL RECORDS

GOLD - JAIL

JUN 23 2017

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 - STATE ATTY.

YELLOW - DHSMV

PINK - CENTRAL RECORDS

GOLD - JAIL

SCANNED JUN 23 2017

NOT A CERTIFICATE

SCANNED
JUN 23 2017

STATE OF FLORIDA
DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES
AFFIDAVIT OF REFUSAL TO SUBMIT TO
BREATH AND/OR URINE TEST

I, Investigator L. Chiquito-Rodriguez #18334, a duly certified Law Enforcement Officer or Correctional Officer,
(Name of Officer reading Implied Consent Warning)

am a member of Palm Beach County Sheriff's Office, and I do swear
(Name of law enforcement agency)

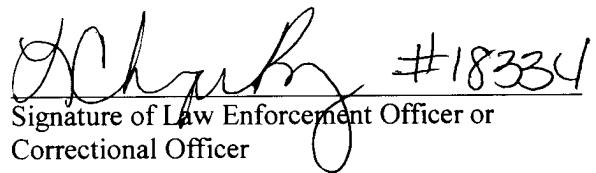
or affirm that on or about the 22nd day of June, 20 17, at 22:43 P.M. A.M.

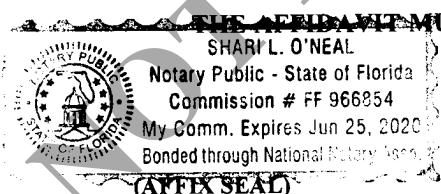
DRIVER Jessica May Overby
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# O161-433-77-724-0, state of Florida, was placed under lawful arrest for
the offense of DUI F.S.S. 316.193 (1) by Investigator L. Chiquito-Rodriguez #18334 and
(Name of Arresting Officer)
issued Citation # A1005DP.

That on or about the 22nd day of June, 20 17, at 23:46 P.M. A.M.
in Palm Beach County,

I requested that the driver submit to a breath and/or urine test to determine his or her blood alcohol level and/or the presence of chemical or controlled substances. I informed the driver that the refusal to submit to such test(s) would result in the suspension of his or her driving privilege for a period of one (1) year for a first refusal, or for a period of eighteen (18) months if his or her driving privilege had been previously suspended for refusing to submit to a breath, urine or blood test. I also informed the driver that he or she commits a misdemeanor by refusing to submit to a lawful test as requested above if his or her driving privilege has been previously suspended for refusal to submit to a lawful test of his or her breath, urine, or blood. Additionally, I informed the driver that if he or she holds a CDL, or was operating a CMV, refusal will result in the disqualification of the Commercial Driver's License/driving privilege for a period of one (1) year in the case of a first refusal or permanently if he or she has previously been disqualified as a result of a refusal to submit to any such lawful test. Nonetheless, the driver refused to submit to the test(s) requested.


Signature of Law Enforcement Officer or
Correctional Officer



The foregoing instrument was sworn and subscribed before

me this 22nd day of June, 20 17,

by Investigator L. Chiquito-Rodriguez #18334,

who is personally known to me or who has produced

KNOWN as identification

Notary Public S. O'Neal

HSMV-BAR1001 (REV. 10/2016)

The foregoing instrument was sworn and subscribed before me:

Signature of Attesting Officer

Title _____

Date _____

Note: Mail or hand deliver to the designated
Bureau of Administrative Reviews office,
Department of Highway Safety and Motor
Vehicles, with the driver's license, the
appropriate copy of the UTC, and the
probable cause affidavit.

SCANNED
JUN 23 2017