

JKT 0497103

17CT 6681

P1453

ARREST / NOTICE TO APPEAR
Juvenile Referral Report1. Arrest
2. N.T.A.
3. Request for Warrant
4. Request for Capias

1 Juvenile

ADMINISTRATIVE	OBTS Number			Agency Name			Agency Report Number (N.T.A.'s only)									
	FLO 500000			PALM BEACH COUNTY SHERIFF'S OFFICE			06-17-065164									
DEFENDANT	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						
	Location of Arrest (Including Name of Business) I-95 (N) OF BELVEDERE RD WEST PALM BEACH FL 33401						Location of Offense (Business Name, Address) I-95 (N) OF BELVEDERE RD WEST PALM BEACH FL 33401									
	Date of Arrest 04/16/17		Time of Arrest 0036		Booking Date		Booking Time		Jail Date		Jail Time					
	Location of Vehicle															
	Name (Last, First, Middle) CASTELLAR LUGO JOSE ANTONIO															
	Race W - White 1 - American Indian B - Black 0 - Oriental/Asian		Sex W		Date of Birth 12/24/1976		Height 509		Weight 195		Eye Color BRO					
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) TAT LEFT LEG "INDIAN ON A HORSE"						Marital Status S		Religion CATHOLIC		Indication of: Alcohol Influence Drug Influence					
	Local Address (Street, Apt. Number) 6141 OLD COURT RD APT 130						(City) BOCA RATON		(State) FL 33433		Phone (407) 449 0660		Residence Type: 1. City 2. County			
	Permanent Address (Street, Apt. Number)						(City)		(State)		Phone ()		Address Source DEFENDANT			
	Business Address (Name, Street) MELBOURNE AIRPORT						(City)		(State)		Phone ()		Occupation WELDER			
D/A Number, State (FL)C-234-421-76-464-0			Soc. Sec. Number			INS Number			Place of Birth (City, State) PONCE PUERTO RICO			Citizenship US				
CO-DEF	Co-Defendant Name (Last, First, Middle)						Race		Sex		Date of Birth		3. Felony 4. Misdemeanor 5. Juvenile			
	Co-Defendant Name (Last, First, Middle)						Race		Sex		Date of Birth		3. Felony 4. Misdemeanor 5. Juvenile			
JUVENILE	Parent Name (Last) (First) (Middle)						Residence Phone ()									
	Legal Custodian						Business Phone ()									
	Other:															
	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								
CODE	Drug Activity S. Sell N. N/A P. Possess			R. Smuggle B. Buy T. Traffic			K. Dispense/ D. Deliver E. Use			M. Manufacture/ Produce/ Cultivate			Z. Other			
	Drug Type N. N/A			Drug Type N. N/A			Counts 1			Drug Type N. N/A			Counts 1			
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 #	
	Drug Activity N		Drug Type N		Amount / Unit N/A		Offense # 17-065164		Warrant / Capias Number				Bond			
CHARGE	Charge Description						Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number				Violation of ORD #	
	Drug Activity		Drug Type		Amount / Unit		Offense #		Warrant / Capias Number				Bond			
CHARGE	Charge Description						Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number				Violation of ORD #	
	Drug Activity		Drug Type		Amount / Unit		Offense #		Warrant / Capias Number				Bond			
CHARGE	Charge Description						Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number				Violation of ORD #	
	Drug Activity		Drug Type		Amount / Unit		Offense #		Warrant / Capias Number				Bond			
NOTICE TO APPEAR	Location (Court, Room Number, Address) 3228 GUN CLUB RD WEST PALM BEACH FL 33406															
	Court Date and Time Month MAY Day 11 Year 2017 Time 0830 AM ✓												3 PM 2			
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)												Date Signed 4/16/17 APR 16 AM				
ADMIN	HOLD for other Agency Name:			Signature of Arresting Officer			Name Verification (Printed by Arrestee)									
							(PRINT)									
	<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other:			Name of Arresting Officer (Print) Inv. E.K. White 7209			I.D. # 7209									
	Intake Deputy Sgt. E.K. White			Transporting Officer Inv. E.K. White			ID # 7209			Agency PBSO						
DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT (N.T.A. ONLY)																
PBSO #148 REV. 8/97																

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 16 DAY OF APRIL 20 17, AT 0014 AM PM

SUBJECT: CASTELLAR LUGO JOSE ANTONIO CASE NUMBER: 17-065164

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: Inv. E.K. White 7209

PERSONAL CONTACT

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

On Sunday, April 16, 2017 at approximately 0014 hours, while patrolling southbound on I-95 in the #3 lane, with in the city limits of West Palm Beach (Palm Beach County) Florida I stopped a vehicle for traveling 103 miles per hour (mph) in a posted 65 mph zone. I maintained a patrol speed of 60 mph when I saw a small silver vehicle traveling southbound in the HOV lane behind a brown sports utility (SUV) vehicle. The SUV moved to the #2 lane and the small vehicle accelerated. I switched my radar unit to the "Same Direction" mode (In this mode the instrument captures the speed of vehicles traveling in the same direction as I am overtaking them). I got behind the small vehicle and received a speed of 100 mph that increased to 103 mph. I activated my emergency lights to stop the vehicle for the previously mentioned speed violation. The vehicle pulled over to the west shoulder and came to a stop. I approached the vehicle from the passenger side and made contact with a Hispanic male driver who was a single occupant. I asked for his driver license, registration and proof of insurance. The driver handed me his license and an insurance card. He was positively identified as Jose Antonio Castellar Lugo. I told him the reason for the stop was traveling 103mph in a posted 65 mph zone. He told me he had to pass the vehicle in front of him. He later said he did not think he was going that fast and reasoned with maybe traveling 90 or 80.

OBSERVATION OF DRIVER:

While interviewing him I could smell a moderate odor of an unknown alcoholic beverage emanating from the inside of his vehicle. This odor was masked by the cologne he was wearing. His eyes were red, watery and glossy. His face was flushed and he appeared to have been drinking an unspecified amount of unknown alcoholic beverages. I explained to him that I suspected he had been drinking alcoholic beverages. He initially said he had not been drinking, but later admitted to drinking one beer. I asked if he would consent to performing Standardized Field Sobriety Evaluations (SFSTs) for the purpose of determining if he was impaired while operating a motor vehicle. He consented to performing the SFSTs. I asked him to exit his vehicle and escorted him to the white edge line where I intended to administer the SFSTs. I noticed he had some difficulty in maintaining his balance. I watched him sway from side to side. This area was well lighted by street lights. D/S Brittany Distefano arrived on scene and positioned her vehicle in the outside lane to provide a safe environment for the SFSTs. Prior to his performance I asked if he had any physical problems with his body that would inhibit him from performing light physical movements. I also asked if he was on medication. The defendant told me he is a welder and has issues with both knees. He said he is not seeing the doctor for the issue, however. He also told me he does not take medicine. I could not smell a more pronounced odor of an unknown alcoholic beverage coming from his breath that intensified when he spoke. The following SFSTs were explained, demonstrated and acknowledged by him prior to his performance: HGN, The Walk and Turn, The One Leg Stand and The Finger to Nose. His deficiencies were noted on another form on this package.

DRIVER'S STATEMENTS:

I drank one beer.

ODORS:

Moderate odor of an unknown alcoholic beverage coming from the subject's breath.

GENERAL OBSERVATIONS

SPEECH: scratchy

ATTITUDE: cooperative, disbelief

CLOTHING: loose

MEDICAL/OTHER: none

STATE OF FLORIDA
COUNTY OF PALM BEACH

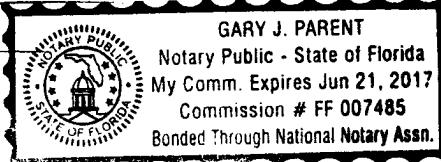
Inv. E.K. White 7209

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 16 day of April 20 17 by D/S WHITE

(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)



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APR 17 2017

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:**

Subject was asked to stand with their feet together and place their hands by their side. They were asked to focus on the stimulus and follow it with their eyes. Lastly they were told not to move their head to assist in following the stimulus with their eyes. During this evaluation there was no the defendant had equal pupil size in both eyes and equal tracking. He lacked a smooth pursuit in both eyes. He also had distinct and sustained jerking in both eyes at maximum deviation. He failed to follow the pursuit of my finger with his eyes on occasion and turned his head to assist his eyes in following my finger. He swayed from side to side while performing this evaluation.

WALK & TURN:

The def was placed in the instructional stance for the Walk & Turn and given instructions. The def stated that they understood my instructions. Subject swayed when placed in the instructional position. He maintained his position on the line however. During the evaluation subject stepped off the line and lost his balance. He did not touch heel to toe. He turned improperly (spinning in one motion) and asked for instructions before proceeding back to his original position.

ONE LEG STAND:

The def was placed in the instructional stance for the One Leg Stand and given instructions. The def stated that they understood my instructions. Subject could not maintain his balance while leg/foot was elevated. Raised his arms away from his side in an effort to maintain his balance. Dropped his foot on the roadway on one occasion.

FINGER TO NOSE:

The def was placed in the instructional stance for the Finger to Nose and given instructions. The def stated that they understood my instructions. Subject swayed while performing this evaluation. Did not keep his head tilted back and eyes close like instructed. He failed to touch the tip of his finger to the tip of his nose on all six attempts. Rather he touched the bridge of his nose with the pad of his finger. he also flinched the wrong hand on one occasion.

ROMBERG ALPHABET:

Not performed.

BREATH TEST RESULTS: 1) .128 2) .132 3) 4)

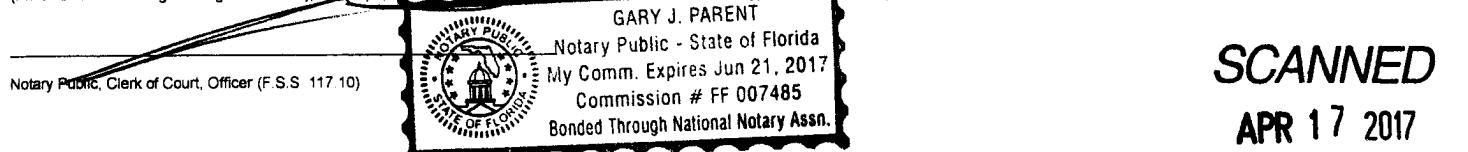
STATE OF FLORIDA
COUNTY OF PALM BEACH

Inv. E.K. White 7209

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 16 day of April 2017 by D/S WHITE

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



TESTING FACILITY TASK REPORT

AGENCY: Florida
SUBJECT: Conrad Lopez CASE NUMBER: 17-003863
DATE: 4/16/17 VIDEO TAPE NUMBER: 62451
BEGINNING TIME: 0126 ENDING TIME: 0143
BREATH TESTS RESULTS: 1) 12.8 TIME 0129 A.M./P.M. 2) 13.2 TIME 0132 A.M./P.M.
3) 11.6 TIME — A.M./P.M. 4) 11.4 TIME — A.M./P.M.

BREATH OPERATOR: Conrad Lopez

MAINTENANCE TECHNICIAN: Karen

TESTING OFFICER'S OBSERVATIONS

SPEECH: Normal

ATTITUDE: Conrad Lopez was cooperative, calm and

CLOTHING: Black shirt, black pants, black socks, black shoes

MEDICAL CONDITIONS: None

MEDICATIONS: None

OTHER: FLORIDA STATE POLICE, ELEMENT CLOUD 16,

ODOR OF AN UNKNOWN ALCOHOLIC BEVERAGE ON BREATH

COMMENTS: FLORIDA STATE POLICE, ELEMENT CLOUD 16, 2017-04-16

OBSERVATION PERIOD: 0126-0143

A AGREED TO TAKE TEST (Signature of subject, witness, officer, and

alcohol detector)

A SIGNED AND WITNESSED BY: (Signature of witness, officer, and

alcohol detector)

AT CONRAD LOPEZ'S REQUEST, A BREATH TEST WAS PERFORMED

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APR 17 2017

SUBJECT: GASTELUM LUCO, JOSE A CASE NUMBER: 12-065164

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.

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SUSPECT'S SIGNATURE: (X) _____ *Reno on Camera*

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 SIR

WHERE WERE YOU GOING? Home

WHAT STREET OR HIGHWAY WERE YOU ON? 95

DIRECTION OF TRAVEL? S WHERE DID YOU START? Melbourne

WHAT TIME DID YOU START? 4 PM WHAT TIME IS IT NOW? Hand Tied

WHAT IS TODAY'S DATE? 17th WHAT DAY OF THE WEEK IS IT? Sunday

WHAT COUNTY AND CITY ARE YOU IN NOW? Union City

WHEN DID YOU LAST EAT? 4 hrs Ago WHAT DID YOU EAT? Chicken

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

HOW MUCH DO YOU WEIGH? 195 HAVE YOU BEEN DRINKING? YES 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: Inv. E. K. White

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APR 17 2017

WITNESS LIST

17-065164

CASE NUMBER:

ARRESTING OFFICER: **Inv. E.K. White 7209**

ADDRESS: **DUI/Traffic**

PHONE NUMBERS (HOME): _____ (WORK) **561 681 4500**

CAN TESTIFY TO: **DUI Investigation**

NAME: **D/s Brittany Distefano**

ADDRESS: **Dist 3**

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

CAN TESTIFY TO: **Assisted with providing a safe environment by blocking a lane with her patrol car**

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

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ADDRESS _____

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ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

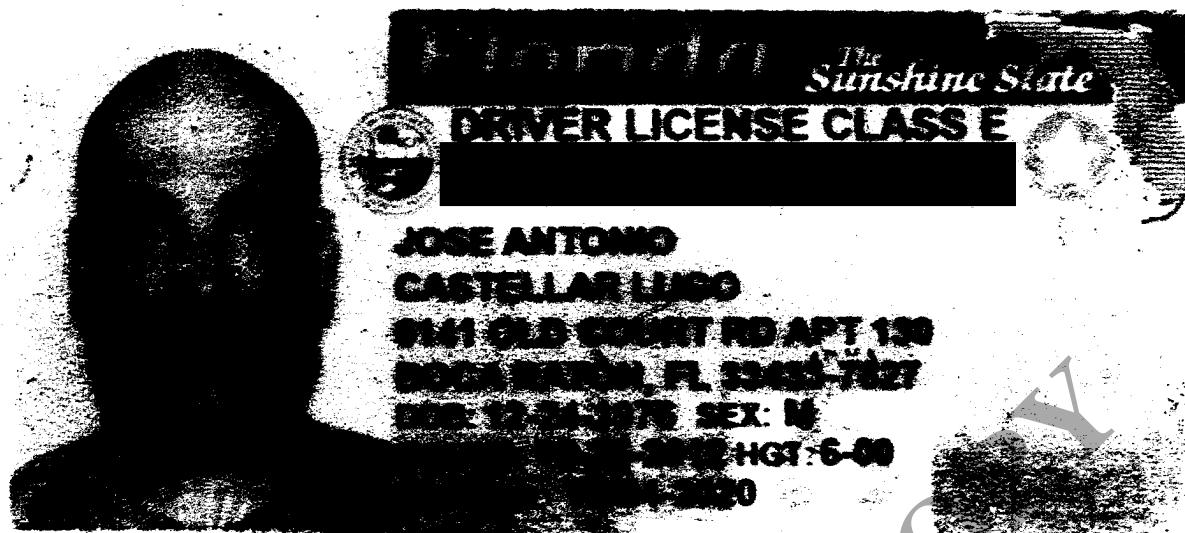
ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

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Joe & wife

09-2016

ORGAN DONOR

SAFE DRIVER

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

NOT A CERTIFIED COPY

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