

17CT 20844

ARREST / NOTICE TO APPEAR  
Juvenile Referral Report

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

1 1 Juvenile N

OBTS Number		Agency ORI Number <b>FLO 500000</b>		Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>		Agency Report Number (N.T.A.'s only) <b>06-17-153125</b>	
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 type="checkbox"/> 4. Traffic Misdemeanor		<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Weapon Seized / Type 2 1. Yes 2. No	
Location of Arrest (Including Name of Business) <b>OLD GERMANTOWN RD/W LINTON BLVD</b>				Location of Offense (Business Name, Address) <b>15920 S MILITARY TRL, DELRAY BEACH FL 33445</b>			
Date of Arrest <b>11/18/2017</b>	Time of Arrest <b>0145</b>	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle	
Name (Last, First, Middle) <b>CALIHAN KAITLIN V</b>				Alias (Name, DOB, Soc. Sec. #, Etc.)			
Race W - White I - American Indian B - Black O - Oriental/Asian	Sex <b>F</b>	Date of Birth <b>11/18/1991</b>	Height <b>5'09"</b>	Weight <b>145</b>	Eye Color <b>BROW</b>	Hair Color <b>BROWN</b>	Complexion <b>LIGHT</b>
Build <b>LIGHT</b>				Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)			
Local Address (Street, Apt. Number) <b>10859 CAMBAY CIRCLE</b>		(City) <b>BOYNTON BEACH FL</b>	(State) <b>FL</b>	(Zip) <b>33437</b>	Phone ( )	Residence Type: 1. City 3. Florida 2. County 4. Out of State <b>2</b>	
Permanent Address (Street, Apt. Number)		(City)	(State)	(Zip)	Phone	Address Source <b>DEFENDANT</b>	
Business Address (Name, Street)		(City)	(State)	(Zip)	Phone	Occupation <b>UNK</b>	
D/L Number, State <b>C450-518-91-918-0</b>		Soc. Sec. Number		INS Number		Place of Birth (City, State) <b>NEW JERSEY, Livingston N.J.</b>	
Citizenship <b>U.S.</b>		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 <input type="checkbox"/> 5. Juvenile
Co-Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth	Indication of: Alcohol Influence Drug Influence Y <input type="checkbox"/> N <input type="checkbox"/> Unk. <input type="checkbox"/>		
Parent Legal Custodian Other:		Address (Street, Apt. Number)		(City)	(State)	(Zip)	Residence Phone ( )
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 <input type="checkbox"/> defendant and / or <input type="checkbox"/> defendant's parents The child and / or parent was told to keep the Juvenile Court Clerk (Phone 355-2526) informed of any change of address. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)				School Attended		Grade	
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property		Value of Property			
Drug Activity N. N/A P. Possess		S. Sell B. Buy T. Traffic	R. Smuggle D. Deliver E. Use	K. Dispense/ Distribute	M. Manufacture/ Produce/ Cultivate	Z. Other	Drug Type N. N/A A. Amphetamine
B. Barbiturate C. Cocaine E. Heroin		H. Hallucinogen M. Marijuana O. Opium/Derv.		P. Paraphernalia/ Equipment S. Synthetics		U. Unknown Z. Other	
Charge Description <b>DUI</b>		Counts <b>1</b>	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Statute Violation Number <b>316.193 (3)(C)(1)</b>		Violation of ORD #	
Drug Activity <b>N</b>	Drug Type <b>N</b>	Amount / Unit	Offense # <b>17-153125</b>	Warrant / Capias Number		Bond	
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 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 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	
Location (Court Room Number, Address) <b>3228 Gun Club rd, WPR FL 33406</b>							
Court Date and Time Month <b>December</b> Day <b>14</b> Year <b>2017</b> Time <b>8:30</b> AM <input checked="" type="checkbox"/> PM							
I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED BY THIS NOTICE TO APPEAR, THAT I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED <b>11/18/2017</b>							
Signature of Defendant (or Juvenile and Parent /Custodian)				Date Signed			
HOLD for other Agency Name:		Signature of Arresting Officer <b>X</b>		Name Verification (Printed by Arrestee)			
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal		<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:		Name of Arresting Officer (Print) <b>D/S Guevara</b>		I.D. # <b>19475</b>	
Intake Deputy		I.D. #	Pouch #	Transporting Officer <b>D/S Guevara</b>		ID # <b>19475</b>	
				Agency <b>PBSO</b>		Witness here if subject signed with an -X" <b>OF</b>	

PROBABLE CAUSE AFFIDAVIT

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

Juvenile  N

OBTS Number	Agency ORI Number <b>FLO 500000</b>		Agency Name <b>PALM BEACH COUNTY SHERIFF'S OFFICE</b>	Agency Report Number <b>06- 17-153125</b>
Charge Type: Check as many as apply.	<input type="checkbox"/> 1. Felony	<input checked="" type="checkbox"/> 3. Misdemeanor	<input type="checkbox"/> 5. Ordinance	Special Notes:
	<input type="checkbox"/> 2. Traffic Felony	<input type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 6. Other	

Name (Last, First, Middle) <b>CALIHAN, KAITLIN, VIRGINIA</b>	Alias	Race <b>W</b>	Sex <b>F</b>	Date of Birth <b>11/18/1991</b>
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Charge Description <b>DUI</b>	316.193 (3)(C)(1)	Charge Description
Charge Description		Charge Description

Victim's Name (Last, First, Middle) <b>State of Florida, ,</b>	Race	Sex	Date of Birth
Local Address (Street, Apt. Number)	(City)	(State)	(zip)
Business Address (Name, Street)	(City)	(State)	(zip)

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

confessed to \_\_\_\_\_ admitting to the below facts.  was found to have committed the below acts, resulting from my (described) investigation.

On the **18** day of **November** 20 **17** at **12:05**  A.M.  P.M. (Specifically include facts constituting cause for arrest.)

On Saturday, November 18, 2017 at approximately 0025 hours I was traveling (s/b) on s military trail, before I was approaching Linton Blvd I observed two vehicles with their flasher on stopped on the far left lane (n/b). I stopped and spoke with one of the drivers; John Pickens who stated that he was involved a traffic accident ref case # (17-153108). I then spoke with another driver; Kyle Freeman who stated that he was rear ended. I then made contact with the at fault vehicle; white Honda bearing fl tag "050nwu" the driver who was still inside and had positive control of the vehicle was identified by her fl driver's license as Kaitlin Colihan who advised that she did not know what exactly happened. Colihan appeared disoriented, she had slurred speech and stumbled through her explanation of events. I could smell a strong odor of alcohol coming from her breath, and from the inside of the vehicle. I asked Colihan where she was coming from and she stuttered before stating that she was coming from Miami. She then told that she was coming from fort Lauderdale and that it was her birthday. Colihan explained that she only had one drink on her birthday celebration. I advised colihan to stay in the vehicle, and that I needed to gather more information from the other drivers. I told her to stay in vehicle, and that I will be back to speak with her again.

Shortly after speaking with her, I observed Colihan leave the scene of the accident. She exited the plaza through the s/b exit and made a U-turn on Linton Blvd. I got behind the vehicle, and turned on my overhead lights to conduct a traffic stop. Colihan did immediately stop but began to slowed down. She continued e/b on Linton Blvd. I then drove my PBSO marked patrol unit next to the driver side of her vehicle. I told Colihan who had her window down to stop. She then come to a complete stop on the roadway. I told her that I was still conducting a crash investigation, and she was not free to leave the scene. Colihan then attempted to go back to the scene of the accident. She made a U-turn on Linton Blvd and continued driving w/b before making a left on Old German town rd which was not the location of the traffic accident. After coming to a complete stop I made a drivers side approach and made contact with Colihan. I asked her to turn the vehicle off, and to give me the keys. Colihan complied at which point I asked her why she left the scene of the accident. Colihan stated "I wasn't thinking". I then explained to her that At this point she is committing a hit and run.

I then asked Colihan to exit the vehicle. I explained that I was done with the traffic crash investigation and that now I was conducting a dui investigation. As she stepped out of the vehicle I observed Colihan had blood shot eyes, and had trouble keeping her balance. I then asked Colihan if she had any physical disabilities or if she takes any medications and she stated "no". I asked Calihan if she was willing to conduct the road side tasks to determining if she was impaired and she agreed. Investigator ficarra #8368 arrived on scene and assisted in conducting the tasks.

STATE OF FLORIDA  
COUNTY OF PALM BEACH

*(Signature)* **D/S Guevara #19475**

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me on **18** day of **November** 20 **17** by **D/S GUEVARA**

(Print name of Arresting/Investigative Officer) who is personally known to me and produced (Identify type of identification produced)

*(Signature)*  
Notary Public, Clerk of Court, Officer (F.S.S. 117.40)

**B. SUE OWEN**  
Commission # FF093160  
My Commission Expires  
May 30, 2018

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PROBABLE CAUSE AFFIDAVIT

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

Juvenile  N

OBTS Number Agency ORI Number FLO 50000 Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE Agency Report Number 06-17-153125

Name (Last, First, Middle) CALIHAN, KAITLIN, VIRGINIA Alias Race W Sex F Date of Birth 11/18/1991 Charge Description 316.193 (3)(C)(1)

Victim's Name (Last, First, Middle) State of Florida, Local Address (Street, Apt. Number) (City) (State) (zip) Phone 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. On the 18 day of November 20 17 at 12:05 A.M.

I explained, and demonstrated the instructions for the walk and turn. Colihan couldn't keep balance while listening to instructions; started too soon; stops walking to steady herself/regain balance; missed heel-to-toe on several occasions; stepped off the line several times; used arms for balance (raises arms over six inches; improper turn (loses balance, turns other way); took incorrect number of steps several times.

I explained and demonstrated the instructions for the finger to nose task to Calihan. I explained what is considered the tip of the finger and tip of the nose to Calihan who stated that he/she understood. During the task I observed that Calihan had the following cues: did not keep eyes closed; failed to return arms to the side; finger other than index finger touches nose or index finger does not touch nose.

After the tasks were completed I determined that there was probable cause to arrest calihan for driving under the influence contrary to f.s. 316.193 (3c1). calihan did unlawfully drive and was in actual physical control of a vehicle while under the influence of alcoholic beverages, as set forth in F.S. 877.111, or any substance controlled under Chapter 893, to the extent that her normal faculties were impaired, as her breath alcohol level of .08 or higher, and during the course of driving a vehicle while under the influence of alcoholic beverages, did cause or contribute to the cause of damage to the property of Kyle Freeman, and John Pickens contrary to Florida Statute 316.193(c)(1).

STATE OF FLORIDA COUNTY OF PALM BEACH D/S Guevara #19475 (Signature of Arresting Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 18 day of November 20 17 by D/S Guevara #19475 (Print name of Arresting Investigative Officer, who is personally known to me)

Notary Public, State of Florida, Office (F.S.S. 117.10) SOE OWEN Notary Public Commission # FF003180 My Commission Expires May 30, 2019