ARREST / NOTICE TO APPEAR

19CT-7085

1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias 5. Juvenile Referral — 1

JUVENILE ☐

ADMINISTRATION

OBTS Number

Agency ORI Number: 0500200

Agency Name: Boca Raton Police Department

Agency Report Number (N.T.A.'s only): 3 2 2019-005496

Charge Type: Check as many as apply. ☐ 1. Felony ☐ 2. Traffic Felony ☒ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

If Weapon Seized — Enter Type: None/not Applicable

Multiple Clearance Indicator: N

Location of Arrest (Including Name of Business): 699 N MILITARY TRL BOCA RATON FL 33486

Location of Offense (Business Name, Address): 699 N MILITARY TRL, BOCA RATON, FL 33486

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
04/19/2019	01:15	04/19/2019	01:25	04/19/2019	03:11	EMERALD

DEFENDANT

Name (Last, First, Middle): KONIGSBURG, LANCE ROBERT

Alias (Name, DOB, Soc. Sec. #, Etc.): Alias:

Race (W - White, B - Black, I - American Indian, O - Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	M	06/09/1971	5'06	160	HAZEL	GRAY	LIGHT	Medium

Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description)

Marital Status: M — Religion: NONE

Indication of: Alcohol Influence ☒ Yes ☐ No ☐ Unk. — Drug Influence ☒

Local Address (Street, Apt. Number) (City) (State) (Zip): 3901 NW 58 ST, COCONUT CREEK, FL 33073 — Phone: (561) -

Residence Type: 1. City 2. County 3. Florida 4. Out of State

Permanent Address (Street, Apt. Number) (City) (State) (Zip): 3901 NW 58 ST, COCONUT CREEK, FL 33073 — Phone: (561) -

Address Source

Business Address (Name, Street) (City) (State) (Zip): OCE, — Phone: (561) -

Occupation: Mgr Of Cafe

DL Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
K521536712090 / FL	[redacted]		DOVER, DE, United	US

CO-DEF

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

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

JUVENILE

☐ Parent ☐ Other: ☐ Legal Custodian — Name (Last, First, Middle) — Residence Phone

Address (Street, Apt. Number) (City) (State) (Zip) — Business Phone

Notified by: (Name) — Date — Time — JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT JAC 3. Incarcerated

Released To: (Name) — Relationship — Date — Time

The above address was provided by ☐ defendant and/or ☐ 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.
☐ Yes, by: ☐ No:

School Attended — Grade

Property Crime? ☐ Yes ☒ No — Description of Property — Value of Property

CODE

Drug Activity: N. N/A P. Possess S. Sell B. Buy T. Traffic D. Deliver E. Use R. Smuggle K. Dispense/Distribute M. Manufacture/Produce/Cultivate Z. Other

Drug Type: N. N/A A. Amphetamine B. Barbiturate C. Cocaine E. Heroin H. Hallucinogen O. Opium/Deriv. M. Marijuana S. Synthetic P. Paraphernalia/Equipment U. Unknown Z. Other

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #
DUI	316.193(1)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
	N	/		1	☐ Y ☒ N		

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
		/			☐ Y ☐ N		

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
		/			☐ Y ☐ N		

APR 20 2019

INTAKE

Health / Apparent Physical Condition of Defendant: GOOD

Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries — Explain:

Check which applies: ☐ Released O.R. ☐ Posted Bond ☐ Released to Parent/Guardian ☐ South County Mental Health ☒ T.O.T. County Jail

PROPERTY - Received By — Released By — Released To

Transported By — Date Transported — Time Transported — Other

NOTICE TO APPEAR

☒ INSTRUCTION NO. 1 - Mandatory appearance in court
☐ INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.

Location (Court, Room): South County 200 W Atlantic Ave Delray Beach, FL 33444

Court Date and Time: 05/13/2019 08:30:00

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

No Photo Available

ADMIN

HOLD for Other Agency

☐ Dangerous ☐ Related Arrest ☐ Suicidal ☐ Other

Signature of Arresting Officer: 800

Name of Arresting Officer (Print): RENTERIA, B. — I.D. # 800

Name Verification (Printed by Arrestee) (PRINT)

Intake Deputy — I.D. # — Pouch #

Transporting Officer: RENTERIA — I.D. # 800 — Agency BRPD

Witness here if subject signed with an "X".

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PROBABLE CAUSE AFFIDAVIT

ADMIN

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

Agency ORI Number	Agency Name	Agency Report Number
FL 0500200	BOCA RATON POLICE DEPARTMENT	3 | 2 | 2019-005496

Charge Type: Check as many as apply.
☐ 1. Felony ☐ 2. Traffic Felony ☒ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
KONIGSBURG, LANCE ROBERT		W	M	06/09/1971

CHARGES

Charge Description	Charge Description
316.193(1) DUI	
Charge Description	Charge Description

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
STATE OF FLORIDA,			

Local Address (Street, Apt. Number) (City) (State) (Zip)	Phone	Address Source
100 NW 2ND AVE, BOCA RATON, FL 33432	(561) -	
Business Address (Name, Street) (City) (State) (Zip)	**Phone**	**Occupation**
	(56) -	

PROBABLE CAUSE STATEMENT

The undersigned certifies and swears that he/she has just and resonable grounds to believe, and does believe that the above named Defendant committed the following violation of law.

The Person taken into custody . . .

☒ committed the below acts in my presence.
☐ confessed to _____ admitting to the below facts.
☐ was observed by _____ who told _____ that he/she saw the arrested person committ the below acts.
☒ was found to have committed the below acts, resulting from my (described) investigation.

On the 19 day of April, 2019 at 01:15 (Specifically include facts constituting cause for arrest.)

On 4/19/19 at 0043 hours, I observed a silver colored Chrysler 300 bearing FL tag # Y56XIK heading S/B on 1900 N Military at a high rate of speed. I reached speeds of 60 MPH to attempt to catch up to the vehicle, however it continued to pull away, in a 45 MPH area. but the vehicle continued at a high rate of speed until I activated my lights and sirens and indicated the vehicle to stop. I informed, W/M Lance Konigsburg for the reason for my stop, which he stated he understood. I requested he provide me with his license, registration and insurance. Lance provided me with his FL DL and his registration but did not provided me with his insurance. Lance looked at me as is he had competed the task I had requested of him. I again asked Lance for his insurance, which he stated he had already provided to me. I showed Lance the documents he handed me and informed him I still needed his insurance card. Lance stated his insurance was valid and made no attempts to look for his insurance card. While speaking with Lance I noticed he had glossy red eyes, and slurred speech. I asked Lance if he had been drinking, which he stated yes, Lance admitted to having only one Jack and Coke at work, roughly 45 mins ago.

Based on my observations I asked Lance if he would submit to roadside sobriety tasks to dispel my alarm that he was driving under the influence. Lance stated that he would submit to the tasks. I then walked him over to a well-lit area and asked him if he had any medical issues or injuries that would prevent him from doing the tasks. Lance advised that he had a bad back, I asked Lane what he does for work, which he stated he was a chef and works in a kitchen, standing up for hours at a time. Lance advised he did not have any other medical issues. The tasks that were conducted were the Walk and Turn, One Leg Stand, Finger to Nose, and the Rhomberg Alphabet.

The first SFST was the Walk and Turn. Lance was unable to maintain the starting position and was told to get back in the starting position several times, he kept losing his balance and was unable to keep his feet heel to toe as I informed him. While

ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

GRAHAM, KEITH T #274
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

04/19/2019
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

RENTERIA, BARTOLO (800)
NAME OF OFFICER (PLEASE PRINT)

04/19/2019
DATE

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O.

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APR 2 0 2019

ADMIN

OBTS Number	PROBABLE CAUSE AFFIDAVIT SUPPLEMENT	1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias	1	JUVENILE

Agency ORI Number	Agency Name	Agency Report Number
FL 0500200	BOCA RATON POLICE DEPARTMENT	3 | 2 | 2019-005496

Charge Type: Check as many as apply. ☐ 1. Felony ☐ 2. Traffic Felony ☒ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
KONIGSBURG, LANCE ROBERT		W	M	06/09/1971

PROBABLE CAUSE STATEMENT

walking forward Lance stepped off the line on steps #2,4,6. When he got to his ninth step, he made a sharp turn to turn around unlike, the method he was instructed to do and stepped off the line on steps #3 and 7 on his way back. Lance did not conduct the task heal to toe as instructed throughout the task.

The second SFST was the One Leg Stand. Lance was instructed to keep his feet together and arms at his side while I read him the instructions for the task. While informing Lance of the instructions he stated if he had to lift his foot for 6 seconds, which I told him no, he was to lift his foot 6 inches off the ground, not lift it for 6 seconds as he had mentioned. While performing the task Lance lifted his right foot and did not count out loud as instructed. Once 10 seconds had passed, according to my IPhone stop watch, he placed his foot down and stared at me as if he had completed the task. I asked Lance if he was done and completed the task which he replied he lifted his foot off the ground for 6 seconds. I asked Lance if that was what I instructed him to do, which he stated no and apologized and stated he thought it was for 6 seconds. I again informed Lance of the one leg stand task and allowed him to re attempt the task. Lance attempted the task for the second time and was unable to keep his right foot raised off the ground, Lance counted only up to "2 one thousand" before putting his foot down, on three separate occasions and did not continue the count where he left off as instructed. Sixteen seconds had passed on my Iphone stop watch before Lance stated he could not do the task and gave up.

The third SFST was the Finger to Nose. (L-R-L-R-R-L). For the first left Lance raised his right-hand half up before switching to his left hand. For the first right Lance missed the tip of his nose and touched the bridge of his nose. Lance competed the task however, during the task Lance lost his balance and did not keep his head tilted back as instructed.

The fourth SFST was the Rhomberg Alphabet, which he was able to recite.

Based on the above information I placed Lance under arrest for DUI. I then transported him to BRPD. Ofc. Coon responded to BRPD as my Breath Test Operator. Ofc. Coon conducted the 20-minute observation and then he was taken into the BAT room. Lance refused to provide a breathe sample, Lance was read implied consent, and was informed to provide a breathe sample again, which he again refused. Subsequent to inventory search of Lance`s vehicle a THC pen was located in the center console of his vehicle. Lance stated he had a medical marijuana card, which was confirmed and validated. The THC pen was submitted to BRPD for safe keeping, Lance was informed to provide his ID card in order to recover his THC pen. It should be noted Lance admitted to smoking the THC prior to driving. Lance is being charged under F.S.S. 316.193(1) for DUI. Lance was transported to Palm Beach County Jail for further processing. Lance`s vehicle was towed by Emerald.

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ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

GRAHAM, KEITH T

NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

04/19/2019

DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

RENTERIA, BARTOLO (800)

NAME OF OFFICER (PLEASE PRINT)

04/19/2019

DATE

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P.I.O.

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DUI INFLUENCE REPORT

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BOCA RATON POLICE SERVICES DEPARTMENT
100 NW 2nd Avenue
Boca Raton, FL 33432

SCANNED
APR 2 0 2019

Revised: July 9, 2018

ARRESTING OFFICER: RENTERIA

Name: OFC. PAYNE Phone # (561) 3681234 Work # _____

Address: 100 NW 2ND AVE, BOCA RATON, FL, 33432

Can testify to: TRAFFIC STOP

Name: OFC. COON Phone # " " Work # _____

Address: " "

Can testify to: 10-32/DUI ROOM

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

Name: _____ Phone # _____ Work # _____

Address: _____

Can testify to: _____

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SCANNED
APR 2 0 2019

[redacted]

BOCA RATON POLICE SERVICES DEPARTMENT

DUI INFLUENCE REPORT – PART II

To be filled out at testing facility

Agency Case # 201900549G

I. INTRODUCTION (Instrument Operator faces video camera)

A. The day is FRIDAY (day), APRIL (month), 19 (date), 2019 (year).

B. The time is now approximately 0157 AM/PM.

C. The following is in reference to case number 201900549G.

D. Present at this time is OFC. RENTERIA of the Boca Raton Police Department. (Officer's Name)

E. Officer RENTERIA, have you arrested LANCE KONIGSBURG in violation of Florida State Statute 316.193? (Defendant's name)

F. Did this violation occur within the City of Boca Raton, Palm Beach County, Florida? YES

G. Mr./Mrs./Ms. KONIGSBURG, I am required to inform you these proceedings are being video recorded.

Operator Note: *Video record breath request, breath sample, and interview.*

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APR 2 0 2019

II. AT THIS TIME THE ARRESTING OFFICER WILL REQUEST A BREATH SAMPLE.

Note: Read only the paragraph applicable to the type of test you are requesting.

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

B. I am now requesting that you submit to a lawful test of your **URINE** for the purpose of determining the presence of chemical or controlled substances.

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

IMPLIED CONSENT WARNINGS

Note: Read only if the subject does not comply with your request.

I am OFC. RENTERIA of the BOCA RATON PD..

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 Signature: SEE VIDEO

Note: Also read for CDL holders:

IN ADDITION, your refusal to submit will result in the loss of your commercial privileges for one year from today. If this is your SECOND REFUSAL, you will be permanently disqualified from operating a commercial motor vehicle.

Note: After reading the implied consent warning, the arresting officer must request a breath sample again.

(IF REFUSAL THEN)

At this time Mr./Mrs./Ms. KONIGSBURG has refused to submit to a breath test.

The date is APRIL (month), 19 (day), 2019 (year), and the time is 0159 AM/PM.

A refusal form will be completed by the arresting officer.

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APR 20 2019

[redacted]

BOCA RATON POLICE SERVICES DEPARTMENT

TESTING FACILITY TASK REPORT

SUBJECT: LANCE KONIGSBURG

CASE #: 2019005496 DATE: 04/19/19

BREATH TEST RESULTS

1) TIME _____ AM/PM 2) TIME _____ AM/PM

3) TIME _____ AM/PM 4) TIME _____ AM/PM

BREATH OPERATOR: OFC. COON

MAINTENANCE TECHNICIAN: OFC. VANCAMP

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED, SLOW, REPETITIVE

ATTITUDE: UNCOOPERATIVE, ~~AFFC~~, AGITATED

CLOTHING: GREY SHIRT, BLACK PANTS, GREY CROCS

MEDICAL CONDITION: ~~NONE~~ Rec. BACK INJURY

OTHER: SUBJECT HAD TO LEAN AGAINST WALL, UNSTEADY ON HIS FEET

COMMENTS: HE ADVISED HE USES MEDICAL MARIJUANA, HE ADVISED HE HAD A JACK AND COKE (JACK DANIELS) HE HAD RED AND GLOSSY EYES AND SMELLED LIKE THE ODOR OF AN ALCOHOLIC BEVERAGE.

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APR 20 2019

Identify yourself and state:

I am required to warn you before you make any statement that you have the following Constitutional rights:

(1) You have the right to remain silent and not answer any questions.
(2) Any statement you make must be freely and voluntarily given.
(3) You have a right to the presence and representation 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 and representation of a court appointed lawyer before you make any statement 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 be and will be used against you in a court of law.
(8) Do you understand these rights as I have read them to you, and do you wish to speak to me?

Signed: SEE VIDEO Date: _____ Time: _____

QUESTIONS AND ANSWERS

Were you operating a motor vehicle at the time of the accident/stop? _____

Where were you going? _____

What street or highway were you on? _____

Direction of travel? _____

Where did you start driving from? _____

What city (county) were you stopped in? _____

What time did you start? _____ AM/PM What time is it now? _____

What is today's date? _____ What day of the week is it? _____

When did you last eat? _____ What did you eat? _____

What have you been doing the past three hours prior to this stop/accident? _____

How much do you weigh? _____ Have you been drinking? ____ What were you drinking? ____
_____

How much? _____ Where? _____ With whom were you drinking? _____

When did you have your first drink? _____ AM/PM When did you stop drinking? _____AM/PM

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APR 2 0 2019

How did you consume your last two drinks? _____

Are you under the influence of alcohol now? ☐ Yes ☐ No

Can you feel the effects of alcohol? ☐ Yes ☐ No

Have you consumed alcohol since the accident? ☐ Yes ☐ No

Can you feel the effects of alcohol? ☐ Yes ☐ No

Have you consumed alcohol since the accident? ☐ Yes ☐ No How much? _____

What? _____ Where? _____

What line of work are you in? _____

When did you last work? _____

Do you have any physical defects or injuries? ☐ Yes ☐ No If yes, explain:

_____

Are you sick or injured? ☐ Yes ☐ No If yes, explain:

_____

Do you limp? ☐ Yes ☐ No Did you get a bump on the head? ☐ Yes ☐ No

Were you in an accident today? _____

Have you taken any drugs or smoked marijuana today? _____

What? _____ When? _____

Have you seen a doctor or dentist today? ☐ Yes ☐ No Who? _____

Are you taking any prescription medications? ☐ Yes ☐ No What? _____ When? _____

Do you have: Epilepsy? ☐ Yes ☐ No Inner ear trouble? ☐ Yes ☐ No

Glass eye? ☐ Yes ☐ No Ear infection? ☐ Yes ☐ No

False teeth? ☐ Yes ☐ No Diabetes? ☐ Yes ☐ No

Any problems not correctable by glasses or contact lenses? _____

Do you take insulin? ☐ Yes ☐ No If yes, when was your last injection? _____

Have you ever had a driver's license in any other state? _____

I am now ending this video recording. The time is now approximately 0159 (AM)/PM.

The date is APRIL (month), 19 (day), 2019 (year).

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APR 20 2019

PALM BEACH COUNTY
SHERIFF'S OFFICE
Florida State Statute Exemption Sheet

Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	☐	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	☐	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	☐	119.071(4)(c)	Undercover personnel.	
	☐	119.071(2)(f)	Confidential informants (CIs).	
	☐	119.071(2)(e)	Confession.	
Public Info. Exemptions	☐	985.04(1)	Juvenile offender records.	
	☐	119.071(h)(i)	Assets of a crime victim.	
	☐	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	☐	394.4615(7)	Mental health information.	
	☐	119.071(4)(d)(2)(a)	Home address, telephone, Social Security number, date of birth, or photos of active/former LE personnel, spouses, and children.	
Florida Rules of Judicial Administration 2.420 (Rule of 23)	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	☐	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	☐			
	☐			
	☐			
	☐			
	☐			
Other	☐		Other:	
	☐		Other:	

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REVIEW COMPLETED BY

Booking Number: 2019013003	**Date:** 04/20/2019
	Specialist Name/ID: AM/31562

SCANNED
APR 2 0 2019