

0482832

ARREST / NOTICE TO APPEAR

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

Juvenile

1

N

ADMINISTRATIVE	OBTS Number		Agency ORI Number FLO 502600		Agency Name Palm Beach Gardens Police Department		Agency Report Number (N.T.A.'s only) 78- 16-006001	
	Charge Type: Check as many as apply: <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Weapon Seized / Type 1. Yes 2. No		Multiple Clearance Indicator			
DEFENDANT	Location of Arrest (Including Name of Business) Kew Gardens Avenue/Tuscany Court, PBG 33410				Location of Offense (Business Name, Address) Gardens Parkway/Kew Gardens Avenue, PBG 33410			
	Date of Arrest 11/17/16	Time of Arrest 2257	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle parked	
CO-DEF	Name (Last, First, Middle) Dear, Laurie B				Alias (Name, DOB, Soc. Sec. #, Etc.)			
	Race W - White 1 - American Indian B - Black 0 - Oriental/Asian	Sex F	Date of Birth 02/23/67	Height 5'01	Weight 150	Eye Color blue	Hair Color blond	Complexion flush
JUVENILE	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) none				Marital Status married		Religion athiest	
	Local Address (Street, Apt. Number) (City) (State) (Zip) 2916 Tuscany Court #115 PBG FL 33410				Phone (561) 676-1278		Residence Type: 1. City 2. County 3. Florida 4. Out of State 1	
CHARGE	Permanent Address (Street, Apt. Number) (City) (State) (Zip) Same as Local Address				Phone () Same		Address Source defendant	
	Business Address (Name, Street) (City) (State) (Zip) Oceans Alure, Legacy Place PBG FL 33410				Phone ()		Occupation customer service	
CHARGE	D/L Number, State D600522675630 FL		Soc. Sec. Number [REDACTED]		INS Number		Place of Birth (City, State) Richport, Ct	
	Citizenship US							
CHARGE	Co-Defendant Name (Last, First, Middle)				Race		Sex	
	Co-Defendant Name (Last, First, Middle)				Race		Sex	
CHARGE	Name (Last) (First) (Middle)				Date of Birth		Relationship	
	Address (Street, Apt. Number) (City) (State) (Zip)				Date of Birth		Relationship	
CHARGE	Notified by: (Name)				Date		Time	
	Released To: (Name)				Relationship		Date	
CHARGE	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	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	
CHARGE	H. Hallucinogen M. Marijuana O. Opium Deriv.		P. Paraphernalia/ Equipment S. Synthetics		U. Unknown Z. Other			
	Charge Description DUI		Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number 316.193(1)	
CHARGE	Drug Activity N		Drug Type N		Amount / Unit N/A		Offense #	
	Charge Description		Counts		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Statute Violation Number	
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D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 17th DAY OF November 20 16, AT 2210 AM PM

SUBJECT: Dear, Laurie B CASE NUMBER: 16-006001

AGENCY: PALM BEACH GARDENS POLICE DEPT. ARRESTING OFFICER: Melinda Hanton 305

PERSONAL CONTACT

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

On 11/17/16, Ofc. Clayton had just finished working an off duty detail and was driving east on Gardens Parkway in a marked Palm Beach Gardens Police car. Ofc. Clayton observed a gray/blue Mercedes with a temp tag driving east in the left lane. The vehicle almost hit the inside curb of the median. The vehicle slowed between a break in the median as if they were going to make a left turn. The vehicle then continued east almost striking the inside median curb again. As the vehicle approached the next break in the median the vehicle slowed again putting on the blinker as if it were going to turn left. The vehicle then continued straight and once again almost hit the inside median. At this time unsure if the driver was sick/falling asleep/impaired

OBSERVATION OF DRIVER:

Ofc. Clayton activated her emergency and blue lights to conduct a traffic stop. The vehicle slowed and started to enter the marked left turn lane as if to turn into San Matera. However the vehicle drifted back into the left through lane, drove straight into the middle of the intersection while still having the left directional activated. The vehicle proceeded to make a wide turn and now turned left entering into San Matera Community entrance. The car turned into the Tuscany Development and entered the gate before stopping.

DRIVER'S STATEMENTS:

I was called to the scene and Officer Clayton advised me of her observations. I then made contact with the female, who was later identified as Laurie Dear. I smelled a strong odor of an unknown alcoholic beverage coming from her breath as she spoke, her speech was slurred, her eyes were red and glassy, unsteady on feet

ODORS:

strong odor of unknown alcoholic beverage coming from her breath as she spoke

GENERAL OBSERVATIONS

SPEECH: slurred, mumbled

ATTITUDE: mood swings, calm to agitated and yelling

CLOTHING: multicolored dress

MEDICAL/OTHER: PTSD/ADD, Prozac, Adderal and Clonopan for sleep

STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

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

17th day of November 20 16

PAMELA F. DORSEY
Notary Public - State of Florida
My Comm. Expires Apr 11, 2017
Commission # FF 7211
Bonded Through National Notary Assn.

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

SCANNED

NOV 18 2016

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:****WALK & TURN:**

HGN- kept moving head, was swaying entire time, she stopped halfway and started again, had approximate angle of onset of 30 degrees, did have VGN.

WAT- demonstrated and explained she said she understood, had her take off her shoes, she was unable to hold stance, started before instructed, she said she understood, did not walk heel to toe any step, stepped off the line, took more than 9 steps, did not turn as instructed, took more than 9 steps, not heel to toe any step, was pulling dress up almost exposing herself, at the start of the task was pulling up her dress asking if I wanted her to dance.

ONE LEG STAND:

Due to her level of impairment I did not have her perform the task

FINGER TO NOSE:

Due to her level of impairment I did not have her perform the task

ROMBERG/ALPHABET:

Due to her level of impairment I did not have her perform the task

BREATH TEST RESULTS: refused

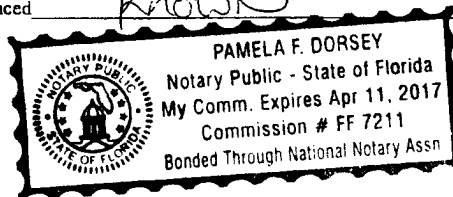
STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was notarized or sworn before me this 17th day of November 20 16 by Ofe. Hanton

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
NOV 18 2016

CASE NUMBER: 16-006001RESTING OFFICER: Melinda Hanton 305DRESS: 10500 N. Military Trail, Palm Beach Gardens, FL 33410ONE NUMBERS (HOME): _____ (WORK) 5617994445N TESTIFY TO: observations, arrestME: Officer Stacy ClaytonDRESS: 10500 N Military TrailONE NUMBERS (HOME) _____ (WORK) 5617994445N TESTIFY TO: driving, observationsME: Sgt. B. RigneyDRESS 10500 N Military TrailONE NUMBERS (HOME) _____ (WORK) 5617994445N TESTIFY TO: backup on sceneME: Officer MaldonadoDRESS 10500 N Military TrailONE NUMBERS (HOME) _____ (WORK) 5617994445N TESTIFY TO: backup on scene

ME: _____

DRESS _____

ONE NUMBERS (HOME) _____ (WORK) _____

N TESTIFY TO: _____

ME: _____

DRESS _____

ONE NUMBERS (HOME) _____ (WORK) _____

N TESTIFY TO: _____

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ME: _____

DRESS _____

ONE NUMBERS (HOME) _____ (WORK) _____

N TESTIFY TO: _____

SCANNED

NOV 18 2016

TESTING FACILITY TASK REPORT

AGENCY: TBC
SUBJECT: Door Lumber CASE NUMBER: 16153167
DATE: 11/17/16 VIDEO TAPE NUMBER: 6166
BEGINNING TIME: 2358 ENDING TIME: 0001
BREATH TESTS RESULTS: 1) 00:00 TIME R A.M./P.M. 2) _____ TIME _____ A.M./P.M.
3) _____ TIME _____ A.M./P.M. 4) _____ TIME _____ A.M./P.M.
BREATH OPERATOR: P Dorsey
MAINTENANCE TECHNICIAN: J Kortecke 6167

TESTING OFFICER'S OBSERVATIONS

SPEECH: Slurred
ATTITUDE: Emotional & crying at times
CLOTHING: Blue jeans and white shirt
MEDICAL CONDITIONS: condition

MEDICATIONS:

OTHER: Strong odor of unknown alcoholic beverage on A person

COMMENTS: No other A arrived No observed A
No request for breath from D A stated
I'm not gonna blow anything. All
read implied consent TDD A
Refused A. Reading 11.0 D. A
asked for lawyer During Reading of
rights. No A

SCANNED

NOV 18 2016

SUBJECT: Don Lane CASE NUMBER: 16-006001

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 Don Lane of the 36

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) [Signature]

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) Read on Camera

SCANNED

NOV 18 2016

SUBJECT: Dear [unclear] CASE NUMBER: 16-006001

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: Officer [unclear] 305

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