0512583 2019CT022094AMB P#3046

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

OBTS Number | 1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias | Juvenile: 1 | N

ADMINISTRATIVE

Agency ORI Number	Agency Name	Agency Report Number (N.T.A.'s only)
FLO 500000	PALM BEACH COUNTY SHERIFF'S OFFICE	06- 19-143217

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

Multiple Clearance Indicator: 1

Location of Arrest (Including Name of Business)	Location of Offense (Business Name, Address)
BOYNTON BEACH BV (E) OF KNUTH LN BOYNTON BEACH FL 33426	BOYNTON BEACH BV (E) OF KNUTH LANE / BOYNTON BEACH FL 33426

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
12/01/2019	0044					INTERSTATE TOWING

DEFENDANT

Name (Last, First, Middle): VITA LUDWIG PETER ANTHONY

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

Race (W - White I - American Indian B - Black O - Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	M	11/09/1962	600	215	HAZ	BLK	MED	MED

Scars, Marks, Tatoos, Unique Physcal Features (Location, Type, Description): TAT ALL OVER

Marital Status: Divorced | Religion: CHRISTIAN | Indication of Alcohol Influence / Drug Influence: Y ☒ N ☐ Unk. ☐

Local Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Residence Type: 1. City 2. County 3. Florida 4. Out of State
737 WHIPPOORWILL LN	DELRAY BEACH	FL	33444	( )	1

Permanent Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Address Source
,				( )	DEFENDANT

Business Address (Name, Street)	(City)	(State)	(Zip)	Phone	Occupation
				( )	

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
(FL)V300535624090	[redacted]		SYRACUSE NY	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 ☐ Legal Custodian ☐ Other:

Residence Phone: ( )

Address (Street, Apt. Number) (City) (State) (Zip)

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 ☐ defendant and / or ☐ 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. ☐ Yes, by: (Name) ☐ No: (Reason)

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 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/Denv. P. Paraphernalia/ Equipment S. Synthetics U. Unknown Z. Other

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
DUI	1	☐Y ☒N	316.193(1)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
/	/		19-143217		

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☒N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
/	/	/			

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☒N		/

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
/	/				

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
		☐Y ☒N		

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond

NOTICE TO APPEAR

Location (Court, Room Number, Address)

3228 GUN CLUB RD WPB FL 33406

Court Date and Time

Month JANUARY Day 2 Year 2020 Time 0830 AM X 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

REFUSED TO SIGN — 12/01/2019

Signature of Defendant (or Juvenile and Parent / Custodian) — Date Signed

ADMIN

HOLD for other Agency Name:

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other

Signature of Arresting Officer

Name of Arresting Officer (Print): INV E.K. WHITE I.D. #: 7209

Name Verification (Printed by Arrestee) (PRINT)

Intake Deputy: S COLLINS I.D. #: 7624 Pouch #:

Transporting Officer: E. K. WHITE ID #: 7209 Agency: PBSO

Witness here if subject signed with an "X"

PAGE 1 OF 3

DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT (N.T.A.'s ONLY)

PBSO #148 REV. 8/87

PROBABLE CAUSE AFFIDAVIT

ADMIN

OBTS Number:

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

Juvenile: N

Agency ORI Number: FLO 500000

Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE

Agency Report Number: 06- 19-143217

Charge Type: Check as many as apply: [ ] 1. Felony [ ] 2. Traffic Felony [ ] 3. Misdemeanor [x] 4. Traffic Misdemeanor [ ] 5. Ordinance [ ] 6. Other

Special Notes: Supplement

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
Vita, Ludwig, Peter Anthony		W	M	11/09/1962

CHARGES

Charge Description	Charge Description
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
,	( )	
Business Address (Name, Street) (City) (State) (Zip)	Phone ( )	Occupation

PROBABLE CAUSE STATEMENT

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

[x] 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 commit the below acts.

[ ] was found to have commited the below acts, resulting from my (described) investigation

On the 01 day of December 20 19 at 1224 [x] A.M. [ ] P.M. (Specifically include facts constituting cause for arrest.)

I was working an off duty permit at the intersection of W. Boynton Beach Blvd and Winchester Park Blvd in the City of Boynton Beach, Florida in my marked Palm Beach County Sheriff's Office vehicle (78232). At the intersection, I was monitoring westbound vehicular traffic just east of the intersection with my overhead lights on. In addition to my overhead lights, there were trucks with overhead amber lights on, traffic cones with reflectors, and an arrow board. While monitoring the traffic, I was alerted by the sound of cones being struck on the passenger side of my vehicle as I turned to look. After the cones were struck, I heard the sound of screeching tires from the vehicle (white Toyota bearing Florida tag BJYZ22) that struck the cones as it came to a stop in the intersection. At that time, the Toyota continued westbound on W Boynton Beach Blvd as it was dragging a cone under the vehicle. I activated my siren and conducted a traffic stop on the vehicle in the 3000 block of W Boynton Beach Blvd. I made contact with the sole occupant Ludwig Vita and requested his driver license. While speaking to Ludwig I could smell a strong odor of an unknown alcoholic beverage emitting from his breath as his speech was thick and slurred. In addition his eyes were red and glassy. Ludwig appeared very confused as I was speaking to him. At that time, I requested a DUI unit to respond to the scene. Shortly thereafter, D/S White (7209) responded and was advised the above information. D/S White took over the investigation and later arrested Ludwig.

ADMINISTRATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH

25509
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 01 day of December 20 19 by 25509

(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)

PROBABLE CAUSE AFFIDAVIT

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

ADMIN

Agency ORI Number	Agency Name	Agency Report Number
FLO 500000	PALM BEACH COUNTY SHERIFF'S OFFICE	06- 19-143217

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
VITA, LUDWIG, PETER ANTHONY		W	M	11/09/1962

CHARGES

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

VICTIM

Victim's Name (Last, First, Middle)	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
	( )	

PROBABLE CAUSE STATEMENT

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

On the 1 day of DECEMBER 20 19 at 0024 ☒ A.M. ☐ P.M. (Specifically include facts constituting cause for arrest.)

On Sunday, December 1, 2019 at approximately 0025 hours, I responded to Boynton Beach Boulevard, east of Knuth Road, in the City of Boynton Beach (Palm Beach County) Florida to assist Deputy Corey Gray with a traffic stop that involved a possible drunk driver. Upon my arrival I noticed D/S Gray patrol car stopped with its emergency lights activated in the westbound turn lane of Boynton Beach Bv. A white pick up truck, bearing current Florida license plates "BYJZ22", was stopped ahead of it. I met with D/S Gray who told me he was working a Palm Beach County Traffic post detail where he provided traffic safety for people working in the intersection. The area was cordoned off with traffic cones and his patrol car emergency lights were activated. As he concentrating on westbound traffic a white pick up truck drove toward the traffic cones. D/S Gray said he thought the pick up truck was going to hit his vehicle. It drove over the traffic cones and continued westbound. Traffic cones were trapped underneath the truck. D/S Gray followed the vehicle to conduct a traffic stop on it. He activated his emergency lights and the pick up pulled into the left turn lane. He made contact with a white male driver who was the sole occupant. After speaking with the driver he suspected him to be under the influence of unknown alcoholic beverages. He asked for a DUI unit to respond to his location to assess the driver further foe DUI. D/S Gray wrote a sworn witness statement on a probable cause affidavit detailing his involvement in this case.

I made contact with the driver who was currently sitting in the driver seat of the previously mentioned vehicle. He was later identified as Ludwig Peter Anthony Vita by his Florida driver license. I explained why he was stopped. During my interview I noticed his eyes were red, watery and glossy. His cheeks were flushed, his mouth was dry and he slurred his speech while speaking. His movements were slow, calculated and lethargic. He was wearing a gray shirt, blue jeans and black shoes. I could smell a strong odor of an unknown alcoholic beverage emanating from the inside of his vehicle. I told the driver I had a suspicion that he had been drinking an unspecified amount of alcoholic beverages. He told me he was coming from his home. I asked where was he going and he told me he was going home. I asked if he had any physical problems with his body. I also asked if he suffered any head trauma. He told me he was not injured and did not suffer any head injury. 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 declined. I explained Taylor Warning informing the defendant that the SFSTS were voluntary and he did not have to perform them, however in the absence of his performance I would be only left with the physical evidence of impairment before me which could be strong basis for him being placed under arrest for DUI. I asked if he understood the warnings. He told me he did understand but was not going to perform the tasks.

ADMINISTRATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH

INV E. K. WHITE
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 1 day of DECEMBER 20 19 by INV E. K. WHITE 7209

(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)

JOSHUA BELL
MY COMMISSION #GG346008
EXPIRES: JUN 18, 2023
Bonded through 1st State Insurance

PROBABLE CAUSE AFFIDAVIT

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

ADMIN

Agency ORI Number	Agency Name	Agency Report Number
FLO 500000	PALM BEACH COUNTY SHERIFF'S OFFICE	06- 19-143217

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
VITA, LUDWIG, PETER ANTHONY		W	M	11/09/1962

CHARGES

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

VICTIM

Victim's Name (Last, First, Middle)	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**
	( )	

PROBABLE CAUSE STATEMENT

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

On the 1 day of DECEMBER 20 19 at 0024 ☒ A.M. ☐ P.M. (Specifically include facts constituting cause for arrest.)

I asked him to exit his vehicle and noticed he immediately lost his balance. I told him to walk toward my patrol car. In doing so he was unsteady while walking and staggered. I could now smell a strong odor of an unknown alcoholic beverage emanating from his breath that intensified when he spoke. I asked if he would reconsider and perform the tasks. He told me to do what I had to do. Based on my observation of personal indicators of impairment exhibited by the defendant, coupled with D/S Gray's observation of the defendant's vehicle in motion, probable cause was established for DUI. I told the defendant he were being placed under lawful arrest for DUI. The defendant was searched and handcuffed (double locked and checked for tightness) prior to being seated into the rear of my patrol car. Back up deputies arranged for the defendant's vehicle to be towed by a tow service from PBSO's rotation list. Interstate Towing Company responded and impounded the defendant's vehicle to their lot. Meanwhile I began transport to the main jail breath analysis facility for further processing. While en route to the facility the defendant became increasingly aggressive toward me. He told me he would find me and kill me. He also said he understand why police are killed. Upon our arrival I escorted the defendant into the facility and began a 20 minute observation period. During this time the defendant did not ingest anything into his body orally or otherwise. Neither did he regurgitate. I escorted him into the testing room and asked him to provide breath samples for the purpose of determining his alcohol content. He refused. I attempted to read implied consent but he spoke over me. I ultimately read implied consent and asked if he understood it. He told me he could not hear. I allowed him the opportunity to read it and he told me he could not read. Due to his unwillingness to cooperate I deemed him a refusal. Q@A was not performed as well. The defendant was later booked into the main jail for DUI.

ADMINISTRATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH

_____ INV E. K. WHITE
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 1 day of DECEMBER 20 19 by INV E. K. 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)

JOSHUA BELL
MY COMMISSION #GG346008
EXPIRES: JUN 18, 2023
Bonded through 1st State Insurance

DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 1 DAY OF DECEMBER 20 19, AT 0024 ✓ AM PM

SUBJECT: VITA LUDWIG PETER ANTHONY CASE NUMBER: 19-143217

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: INV E. K . WHITE

PERSONAL CONTACT

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

SEE PC AFFIDAVIT

OBSERVATION OF DRIVER:

SEE PC AFFIDAVITS

DRIVER'S STATEMENTS:

I'M COMING FROM HOM AND I AM GOING HOME.

ODORS:

STRONG ODOR OF AN UNKNOWN ALCOHOLIC BEVERAGE COMING FROM SUBJECT'S BREATH.

GENERAL OBSERVATIONS

SPEECH: **SLURRED AND INAUDIBLE**

ATTITUDE: **UNPREDICTABLE WITH VARYING MOOD SWINGS-AGGRESSIVE, THREATENING AND UNCOOPERATIVE**

CLOTHING: **LOOSE AND DISHEVELED AND UNTIDY**

MEDICAL/OTHER: **NONE**

STATE OF FLORIDA
COUNTY OF PALM BEACH

INV E. K . WHITE
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 1 day of DECEMBER 20 19 by INV E. K . 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)

JOSHUA BELL
MY COMMISSION #GG346008
EXPIRES: JUN 18, 2023
Bonded through 1st State Insurance

SUBJECT: VITA LUDWIG CASE NUMBER 19-143217

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:

REFUSED ALL TASKS

WALK & TURN:
N/A

ONE LEG STAND:
N/A

FINGER TO NOSE:
N/A

ROMBERG ALPHABET:
N/A

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

STATE OF FLORIDA
COUNTY OF PALM BEACH

INV E. K. WHITE
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 1 day of DECEMBER 20 19 by INV E. K. 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)

JOSHUA BELL
MY COMMISSION #GG346008
EXPIRES: JUN 18, 2023
Bonded through 1st State Insurance

19-143217

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

I, **INV E. K. WHITE**, a duly certified Law Enforcement Officer or Correctional Officer.
(Name of Officer reading Implied Consent Warning)

am a member of **PBSO**, and I do swear
(Name of law enforcement agency)

or affirm that on or about the **1** day of **DECEMBER**, 20 **19**, at **0044** ☐ P.M ☑ A.M.

DRIVER **LUDWIG** **PETER ANTHONY** **VITA**,
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# **(FL)V300535624090**, state of **FLORIDA**, was placed under lawful arrest for

the offense of **DUI** by **INV E. K. WHITE** and
(Name of Arresting Officer)

issued Citation # **A2GD41P**.

That on or about the **1** day of **DECEMBER**, 20 **19**, at **0201** ☐ P.M ☑ A.M.

in **PALM BEACH** County.

I requested that the driver submit to a X **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 AFFIDAVIT MUST BE NOTARIZED OR ATTESTED TO (F.S. 117.10)

JOSHUA BELL
MY COMMISSION #GG346008
EXPIRES: JUN 18, 2023
Bonded through 1st State Insurance

(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before me this **1** day of **DECEMBER**, 20 **19**.

by **INV E. K. WHITE**.

who is personally known to me or who has produced **KNOWN** as identification

Notary Public

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.

HSMV-BAR1001 (REV. 10/2016)

WITNESS LIST

CASE NUMBER: 19-143217

ARRESTING OFFICER: INV E. K . WHITE
ADDRESS: HQ
PHONE NUMBERS (HOME): (WORK) 561 688 3000
CAN TESTIFY TO: FACTS

NAME: D/S COREY GRAY
ADDRESS: HQ (561) 688 3000
PHONE NUMBERS (HOME) () (WORK) 561 688 3000
CAN TESTIFY TO: SEEING THE DEFENDANT'S CAR IN MOTION

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:

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CAN TESTIFY TO:

NAME:
ADDRESS
PHONE NUMBERS (HOME) (WORK)
CAN TESTIFY TO:

NAME:
ADDRESS
PHONE NUMBERS (HOME) (WORK)
CAN TESTIFY TO:

TESTING FACILITY TASK REPORT

AGENCY: PBSO

SUBJECT: VITA, LUDWIG CASE NUMBER: 19-143217

DATE: 12/01/19 VIDEO TAPE NUMBER: N/A

BEGINNING TIME: 0159 ENDING TIME: 0201

BREATH TESTS RESULTS: 1) R TIME 0201 A.M./P.M. 2) N/A TIME XX A.M./P.M.

3) N/A TIME XX A.M./P.M. 4) N/A TIME XX A.M./P.M.

BREATH OPERATOR: J. BELL #8656

MAINTENANCE TECHNICIAN: J. KARLECKE #6467

REFUSED

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: AGITATED, ARGUMENTATIVE, ANGRY, REPEITIVE / YELLING OBSCENITIES

CLOTHING: GREY LONG SLEEVE SHIRT,BLUE JEANS, BLACK SNEAKERS

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER: EYES:GLSSY

ODOR OF AN UNKNOWN ALCOHOLIC BEVERAGE COMING FROM BREATH

COMMENTS: ARRIVED AT CENTER A/O BEGAN 20 M'N OBSERVATION AT 0136 HRS

SUBJECT ANSWERED CAMERA FORMAT QUESTIONS WITH OBSCENITIES

SUBJECT STATED HE WOULD NOT TAKE BREATH TEST

A/O READ I.C

SUBJECT YELLED OBSCENITIES WHILE A/O READ I.C

DUE TO SUBJECT BEING UNCOOPERATIVE AND UNWILLING TO LISTEN A/O CALLED A REFUSAL

A/O CONCLUDED DUE TO SUBJECT BEING UNCOOPERATIVE

REFUSED

WHITE - STATE ATTY. YELLOW - DHSMV PINK - CENTRAL RECORDS GOLD - JAIL

PBSO #9129A REV.11/92

SUBJECT: Vita, Ludwig CASE NUMBER: 19-143217

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: Inv. White #7209

WHITE - STATE ATTY. YELLOW - DHSMV PINK - CENTRAL RECORDS GOLD - JAIL

PBSO #0129C REV. 9/93

SUBJECT: Vita, Ludwig CASE NUMBER: 19-143217

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) Read on Camera

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

WHITE - STATE ATTY. YELLOW - DHSMV PINK - CENTRAL RECORDS GOLD - JAIL

PBSO #01298 REV. 06/11

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	☐	119.071(2)(j)1	Other: Addresses,telephone numbers and personal assets of domestic vio. and other specified crime victims	
	☐		Other:	

REVIEW COMPLETED BY

Booking Number: 2019038451	**Date:** 12/2/2019
	Specialist Name/ID: Mat Meek 33849

FLORIDA DUI UNIFORM TRAFFIC CITATION A2GD41P

COUNTY OF Palm Beach

CITY (IF APPLICABLE)

☐ (1) F.H.P. ☐ (2) P.D. ☒ (3) S.O. ☐ (4) OTHER

AGENCY NAME

AGENCY #

IN THE COURT DESIGNATED BELOW THE UNDERSIGNED CERTIFIES THAT HE/SHE HAS JUST AND REASONABLE GROUNDS TO BELIEVE AND DOES BELIEVE THAT ON

COMPLAINT
(RETAINED BY COURT)

DAY OF WEEK	MONTH	DAY	YEAR	
Sun	12	01	2019	☐ A.M. ☐ P.M.

NAME (FIRST) Ludwig Peter Anthony LAST Vita

STREET 737 Whippoorwill Ln DIFFERENT THAN ONE ON DRIVER LICENSE "D" HERE

CITY De Ray Bch STATE FL ZIP CODE 33445

TELEPHONE NUMBER DATE OF BIRTH MO 11 DAY 09 YR 63 RACE W SEX M HGT 6'00

DRIVER LICENSE NUMBER V300 535 63 409 0 STATE FL CLASS E COL LICENSE ☐ YR LICENSE EXP 2021 COMMERCIAL VEHICLE ☐ YES ☐ NO

VEHICLE YR 2019 MAKE TOYT STYLE PK COLOR WHT PLACARDED HAZARDOUS MATERIAL ☐ YES ☐ NO

VEHICLE LIC. NO. BXJ722 TRAILER TAG NO. STATE FL YR 2020 3 OR PASSENGERS ☐ YES ☐ NO

UPON A PUBLIC STREET OR HIGHWAY, OR OTHER LOCATION, NAMELY Boynton Bch BV (E) CF Knuth Ln MOTORCYCLE ☐ YES ☐ NO

COMPANION CITATION(S) ☐ YES ☐ NO

FT. MILES ☐ N ☐ S ☐ E ☐ W OR NODE

DID UNLAWFULLY COMMIT THE OFFENSE OF DRIVING UNDER THE INFLUENCE OF ALCOHOLIC BEVERAGES, CHEMICAL OR CONTROLLED SUBSTANCES; DID DRIVE, OR WAS IN ACTUAL PHYSICAL CONTROL OF A VEHICLE WHILE UNDER THE INFLUENCE OF AN ALCOHOLIC BEVERAGE/CHEMICAL SUBSTANCE/CONTROLLED SUBSTANCE TO THE EXTENT NORMAL FACULTIES WERE IMPAIRED, OR WITH A BLOOD OR BREATH ALCOHOL LEVEL OF .08 OR ABOVE OF Refused

COMMENTS PERTAINING TO OFFENSE: (Only one offense each citation) RE-EXAM ☐ YES ☐ NO

☐ AGGRESSIVE DRIVER | PASSENGER < 18 YEARS ☐ YES ☐ NO | STATE STATUTE | SECTION 316.1939 | SUB-SECTION

CRASH ☐ YES ☒ NO | DAMAGE TO OTHER PROPERTY ☐ YES $ ☐ NO | INJURY TO ANOTHER ☐ YES ☐ NO | SERIOUS BODILY INJURY TO ANOTHER ☐ YES ☐ NO | FATAL ☐ YES ☐ NO

THIS IS A CRIMINAL VIOLATION, COURT APPEARANCE REQUIRED, AS INDICATED BELOW.

COURT DATE 1/2/20 TIME 8:30

COURT AND LOCATION 3228 Gun Club Rd A2GD41P
WPB, FL 33406

ARREST DELIVERED TO DATE

I AGREE AND PROMISE TO COMPLY AND ANSWER TO THE CHARGES AND INSTRUCTIONS SPECIFIED IN THIS CITATION. WILLFUL REFUSAL TO ACCEPT AND SIGN THE CITATION MAY RESULT IN ARREST. I UNDERSTAND MY SIGNATURE IS NOT AN ADMISSION OF GUILT OR WAIVER OF RIGHTS. IF YOU NEED REASONABLE FACILITY ACCOMMODATIONS TO COMPLY WITH THIS CITATION, CONTACT THE CLERK OF THE COURT.

X Refused To Sign
SIGNATURE OF VIOLATOR

EFFECTIVE IMMEDIATELY, YOUR DRIVING PRIVILEGE IS SUSPENDED/DISQUALIFIED FOR:

☐ DRIVING WITH AN UNLAWFUL BLOOD OR BREATH ALCOHOL LEVEL. THIS SUSPENSION IS FOR A PERIOD OF SIX MONTHS IF THIS IS THE FIRST VIOLATION OR ONE YEAR IF PREVIOUSLY SUSPENDED FOR DRIVING WITH AN UNLAWFUL BLOOD OR BREATH ALCOHOL LEVEL. IF YOU HOLD A CDL OR YOU ARE OPERATING A CMV, YOUR COMMERCIAL DRIVER LICENSE/PRIVILEGE WILL ALSO BE DISQUALIFIED FOR ONE YEAR FOR THE FIRST OFFENSE OR PERMANENTLY DISQUALIFIED FOR A SUBSEQUENT OFFENSE.

☒ REFUSAL TO SUBMIT TO LAWFUL BREATH, BLOOD OR URINE TEST SECTION 322.2615, F. S. THIS SUSPENSION IS FOR A PERIOD OF ONE YEAR IF THIS IS A FIRST REFUSAL OR 18 MONTHS IF PREVIOUSLY SUSPENDED FOR THIS OFFENSE. IF YOU HOLD A CDL OR YOU ARE OPERATING A CMV, YOUR COMMERCIAL DRIVER LICENSE/PRIVILEGE WILL ALSO BE DISQUALIFIED FOR A PERIOD OF ONE YEAR FOR A FIRST REFUSAL OR PERMANENTLY DISQUALIFIED FOR A SUBSEQUENT REFUSAL.

LICENSE SURRENDERED? ☒ YES ☐ NO REASON

ELIGIBLE FOR PERMIT? ☒ YES ☐ NO REASON

UNLESS INELIGIBLE, THIS CITATION SHALL SERVE AS A TEMPORARY DRIVER LICENSE AND WILL EXPIRE AT MIDNIGHT ON THE 10TH DAY FOLLOWING THE DATE OF SUSPENSION.

AT THE BUREAU OF ADMINISTRATIVE REVIEWS OFFICE, YOU MAY REQUEST, WITHIN 10 DAYS AFTER THE DATE OF SUSPENSION, A REVIEW OF SUSPENSION BY THE DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES OR A REVIEW TO DETERMINE ELIGIBILITY FOR A RESTRICTED LICENSE IF THIS IS YOUR FIRST DUI RELATED OFFENSE. SEE REVERSE SIDE.

RANK - SIGNATURE OF OFFICER | BADGE NO. | ID. NO. | TROOP UNIT

HSMV 73904 (Rev. 7/13)

FLORIDA UNIFORM TRAFFIC CITATION

In the court designated below the undersigned certifies that he/she has just and reasonable grounds to believe and does believe that on:

Citation #: **ACKEVME**

County: **PALM BEACH** County Code: **06**
City: City Code: **00**
Date/Time: **Sun 12/01/2019 02:26 AM** Agency Type: **SO**

VIOLATOR

First Name: **LUDWIG** Middle: **PETER ANTHONY**
Last: **VITA** DOB: **11/09/1962**
Address: **737 WHIPPOORWILL LN**
City: **DELRAY BEACH** State: **FL** Zip: **33445**
Telephone: Race: **W** Sex: **M** Hgt: **600**
DL #: **V300535624090** DL State: **FL** Lic. Expires: **2027**
CDL: **N** Ethnicity: **NH** Class: **E** Diff. Addr. on DL: **N**

REGISTRATION

Yr. Veh: **2019** Veh. Tag: **BYJZ22**
Color: **WHI** Trailer Tag:
Make: **TOYT** Yr. Tag Expires: **20** State: **FL**
Style: **PK**
Comm. Mtr. Veh.: **N** Plac. Haz. Mat: **N**
>= 16 Passengers: **N** Motorcycle: **N**

LOCATION

Upon a Public Street or Highway or Other Location Namely:
BOYNTON BCH BV (E) OF KNUTH LANE

Located Ft. Miles **W** Of Node

VIOLATION

Did unlawfully commit the following Offense, In violation of State Statute,
REFUSAL TO SIGN TRAFFIC SUMMON **318.14(3)**

Speed - Enhanced Penalty Zone: **N**
Unlawful Speed: Posted Speed:
Crash: **N** Prop. Dam.: **N** Prop. Dam. Amt.: Aggressive Driv: **N**
Injury: **N** Ser. Injury: **N** Fatal: **N** Red Light/Stop Sign: **N**
Companion Citation Number(s):
Driving Under the Influence of Alcoholic Beverages, Chemical, or Controlled Substances, Driving/Actual Physical Control While Impaired, or Driving/Actual Physical Control with Unlawful Blood/Urine Alcohol Level Bal.:

COURT INFORMATION

Criminal Violation, Court Required
PALM BEACH COUNTY COURTHOUSE CRIMINAL JUSTICE COMPLEX
3228 GUN CLUB ROAD
WEST PALM BEACH, FL 33406
Court Date: **01/02/2020**
Court Time: **8:30 AM**
Civil Penalty: **N/A (N/A)**

Arrest Delivered To:
On:

SIGNATURE

I AGREE AND PROMISE TO COMPLY AND ANSWER TO THE CHARGES AND INSTRUCTIONS SPECIFIED IN THIS CITATION. WILLFUL REFUSAL TO ACCEPT AND SIGN THE CITATION MAY RESULT IN ARREST. I UNDERSTAND MY SIGNATURE IS NOT AN ADMISSION OF GUILT OR WAIVER OF RIGHTS. IF YOU NEED REASONABLE FACILITY ACCOMMODATIONS TO COMPLY WITH THIS CITATION, CONTACT THE CLERK OF THE COURT.

Signature of Defendant: x

Signature of Officer:

☒ I CERTIFY THIS CITATION WAS DELIVERED TO THE PERSON CITED ABOVE
Officer name: **INV. K. WHITE** Officer ID: **7209**
Case number: Troop/Unit: **VCD/DUI WB** Misc:
Agency Name: **PALM BEACH SHERIFF'S OFFICE**
Agency #: