0474872 718

ARREST / NOTICE TO APPEAR

19CT5440

1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Copies | 1 | JUVENILE

ADMINISTRATION

OBTS Number

Agency ORI Number: 0500400 | Agency Name: Delray Beach Police Department | Agency Report Number (N.T.A.'s only): 4 0 19-004637

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: 2

Location of Arrest (Including Name of Business): NE 2ND ST/NE 6TH AVE DELRAY BCH, FL

Location of Offense (Business Name, Address): 599 NE 2ND ST/NE 6TH AVE, DELRAY BEACH, FL 33483

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
03/22/2019	21:01	03/22/2019	21:11			

DEFENDANT

Name (Last, First, Middle): FARIA MALACZEWSKI, MARIZA

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	F	07/11/1956	5'00	100	BROWN	BLOND OR	FAIR	SMALL

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description):

Marital Status: M | Religion | Indication of: Alcohol Influence ☒ Yes ☐ No ☐ Unk. Drug Influence

Local Address (Street, Apt. Number): 18786 CLOUD LAKE CIR, BOCA RATON, FL 33496 (City) (State) (Zip) | Phone | Residence Type: 1. City 2. County 3. Florida 4. Out of State: 2

Permanent Address (Street, Apt. Number): 18786 CLOUD LAKE CIR, BOCA RATON, FL 33496 (City) (State) (Zip) | Phone | Address Source: FL DL

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

DL Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
F654540567510 / FL	[redacted]		, Brazil	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 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/Deriv. P. Paraphernalia/ Equipment S. Synthetic U. Unknown Z. Other

CHARGE

Charge Description: DRIVING WHILE UNDER INFLUENCE | Statute Violation Number: 316.193(1) | Violation of ORD #

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

CHARGE

Charge Description: REFUSAL TO SUMIT TO BAL TEST | Statute Violation Number: 316.1939(1)(E) | Violation of ORD #

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

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		

INTAKE

Health / Apparent Physical Condition of Defendant | Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries Explain:

Check which applies: ☐ Released O.R. ☐ Released to Parent/Guardian ☐ T.O.T. County Jail ☐ Posted Bond ☐ South County Mental Health | 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: 04/15/2019 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.

No Photo Available

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

ADMIN

HOLD for Other Agency

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other

Issuing Deputy: DS Cello 7622 | I.D. # | Pouch #

Signature of Arresting Officer: [signature]

Name of Arresting Officer (Print): DELICE, OLLINSON | I.D. #: 1182

Transporting Officer: DELICE | I.D. #: 1182 | Agency: DBPD

Name Verification (Printed by Arrestee) (PRINT)

Witness here if subject signed with an "X"

2019 MAR 23 AM 11:03

PAGE 1 OF 1

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SCANNED
MAR 23 2019
MAR 23 AM 1:18

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 22 DAY OF March 20 19, AT 2214hrs ☐AM ☑PM

SUBJECT: Mariza Faria Malaczewski CASE NUMBER: 19-004637

AGENCY: Delray Beach ARRESTING OFFICER: Ollinson Delice

PERSONAL CONTACT

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

A caller on 911 advised that a white Saturn SUV bearing FL tag HASU11 was unable to maintain a lane and at one time was stuck on a median. Officers first got into contact with the vehicle on S Federal Hwy in heavy traffic. Ofc. Green intiated a traffic stop for the tag light being out. The Saturn SUV pulled onto a sidewalk. Ofc. Green met with the driver, Mariza Faria Malaczewski, identified by her Florida driver's license (F654-540-56-751-0).

OBSERVATION OF DRIVER:

The driver Mariza Faria Malaczewski was in the driver's seat of the Saturn SUV. She had the smell of an unknown alcoholic beverage emanating from her person. Mariza Faria Malaczewski appeared impaired, had glassy eyes, slow dexterity, slow comprehension, slurred speech, and was unstable while walking and standing in an area for roadside tasks.

DRIVER'S STATEMENTS:

Mariza Faria Malaczewski adivsed that she had one glass of wine at work thirty minutes prior to being stopped. She then advised that she was just upset because her mother died thirty minutes ago. When asked if she wished to perform roadside tasks to dispel Ofc. Cianciaruli's belief that she was under the influence, she said yes. Then she stated, no it's better for her not to do them.

ODORS:

Strong odor of an unknown alcoholic beverage emanating from her person.

GENERAL OBSERVATIONS

SPEECH: Slow, slurred, and mumbled.

ATTITUDE: Was originally calm, then upset while being handcuffed. At the BAT she was banging on the cell door.

CLOTHING: Green shirt, blue jeans, and gold sandals.

MEDICAL/OTHER:

STATE OF FLORIDA
COUNTY OF PALM BEACH

O. Delice
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 22nd day of March 20 19 by O.E. Delice

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

Cianciaruli
Notary Public, Clerk of Court, Officer (F.S.S 117.10)

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SCANNED
MAR 2 3 2019

SUBJECT: Mariza Faria Malaczewski CASE NUMBER 19-004637

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- [x] LT EYE-LACK OF SMOOTH PURSUIT
- [x] RT EYE-LACK OF SMOOTH PURSUIT
- [x] LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
- [x] RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
- [x] LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES
- [x] RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

Other Observations:

Mariza Faria Malaczewski had to be reminded to follow the tip of the pen multiple times as she would just stare straight ahead at Ofc. Cianciaruli. She moved her head to follow the pen.

WALK & TURN:

Mariza Faria Malaczewski had her right leg on the line during instructions instead of her right as instructed to. She started before being told to start. She never once touched heel to toe and continued walking straight for approximately fourteen steps and she lost her balance three times, almost falling to the ground. Due to her not being able to hold her balance she was taken into custody because it was unsafe to have her continue.

ONE LEG STAND:

Not performed due to safety.

FINGER TO NOSE:

Not performed due to safety.

ROMBERG ALPHABET:

Not performed due to safety.

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

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 22nd day of March 20 19 by Ofc Delice

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

Notary Public, Clerk of Court, Officer (F.S.S 117.10)

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SCANNED
MAR 2 3 2019

WITNESS LIST

CASE NUMBER: 19-004637

ARRESTING OFFICER: Ofc. Ollinson Delice #1182

ADDRESS: 300 W Atlantic Ave Delray Beach, Florida 33444

PHONE NUMBERS (HOME): _____ (WORK) 561-243-7800

CAN TESTIFY TO: Information contained in the report.

NAME: Ofc. Cianciaruli #868

ADDRESS: 300 W Atlantic Ave Delray Beach, Fl 33444

PHONE NUMBERS (HOME) _____ (WORK) 561-243-7800

CAN TESTIFY TO: Information contained in the report.

NAME: Ofc. Travis Green #1155

ADDRESS 300 W Atlantic Ave Delray Beach, FL 33444

PHONE NUMBERS (HOME) _____ (WORK) 561-243-7800

CAN TESTIFY TO: Traffic stop and observations of driver

NAME: Ofc. Matthew Kitzerow #1091

ADDRESS 300 W Atlantic Ave Delray Beach, FL 33444

PHONE NUMBERS (HOME) _____ (WORK) 561-243-7800

CAN TESTIFY TO: Traffic stop and obeservations of driver.

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: _____

NAME: _____

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PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

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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: _____

NOT A CERTIFIED COPY

SCANNED
MAR 2 3 2019

TESTING FACILITY TASK REPORT

AGENCY: DBPD/DELICE

SUBJECT: FARIA MALACZEWSKI, MARIZA

CASE NUMBER: 19-051110

DATE: Mar 22, 2019

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 2208

ENDING TIME: 2220

BREATH TESTS RESULTS: 1) R TIME 2214 A.M.☐ P.M.☒ 2) XX TIME XX A.M.☐ P.M.☐

3) XX TIME XX A.M.☐ P.M.☐ 4) XX TIME XX A.M.☐ P.M.☐

BREATH OPERATOR: S. PALMER #24520

MAINTENANCE TECHNICAN: J Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED, MUMBLED

ATTITUDE: CALM, QUIET

CLOTHING: GREEN BLOUSE, BLUE JEANS, GOLD SANDALS

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER:

EYES GLASSY AND BLOODSHOT, UNSTEADY ON HER FEET, ODOR OF UNKNOWN ALCOHOLIC BEVERAGE COMING FROM BREATH AND PERSON

COMMENTS:

ARRESTING OFFICER CONDUCTED THE 20 MINUTE OBSERVATION BEGINNING AT 2145
SUBJECT REFUSED TO TAKE BREATH TEST
A/O READ I/C
SUBJECT STATED SHE DID NOT UNDERSTOOD I/C
A/O EXPLAINED I/C MULTIPLE TIMES
SUBJECT AGAIN REFUSED TO TAKE BREATH TEST
A/O CALLED REFUSAL @ 2214
A/O READ RIGHTS
SUBJECT STATED SHE DID NOT UNDERSTOOD RIGHTS
A/O DID NOT ATTEMPT Q&A

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SCANNED
MAR 2 3 2019

SUBJECT: _____ CASE NUMBER: _____

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: _____

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SCANNED
MAR 2 3 2019

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

SUBJECT: _____ CASE NUMBER: _____

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.

SCANNED
MAR 2 3 2019

SUSPECT'S SIGNATURE: (X)_____

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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	☐	539.003	Other: Florida Pawnbroking Act	
	☐	119.0712(2)(b)	Other: Personal information contained in a motor vehicle record.	

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REVIEW COMPLETED BY

Booking Number: 2019009751	**Date:** 03/23/2019
	Specialist Name/ID: WATSON/6665

SCANNED
MAR 2 3 2019