

0484833

2674

ARREST / NOTICE TO APPEAR

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

1 JUVENILE

OBTS Number			ARREST / NOTICE TO APPEAR						1 JUVENILE		
Agency ORI Number		Agency Name			Agency Report Number (N.T.A.'s only)						
0500800		West Palm Beach Police Department			9 4 2017-0001721						
Charge Type: Check as many as apply.		<input type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other			If Weapon Seized			Multiple Clearance Indicator			
Location of Arrest (Including Name of Business)		Location of Offense (Business Name, Address)									
3300-BLK AUSTRALIAN AVE		3300 AUSTRALIAN AVE, WEST PALM BEACH, FL 33409									
Date of Arrest		Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle				
01/27/2017		25									
Name (Last, First, Middle)											
MOHAMMADI, MATTHEW MAJID											
Alias:											
Race W - White B - Black		Sex M		Date of Birth 11/06/1993		Height 5'09		Weight 230		Eye Color BROWN	
Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description)										Marital Status S	
Religion										Indication of: Alcohol Influence Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk. <input type="checkbox"/> Drug Influence <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Local Address (Street, Apt. Number)		(City)		(State)		(Zip)		Phone		Residence Type: 1. City 3. Florida 2. County 4. Out of State 3	
10437 EMERALD WOODS AVE, ORLANDO, FL 32836								(407) 202-4378			
Permanent Address (Street, Apt. Number)		(City)		(State)		(Zip)		Phone		Address Source	
10437 EMERALD WOODS AVE, ORLANDO, FL 32836								(407) 202-4378		FL DL	
Business Address (Name, Street)		(City)		(State)		(Zip)		Phone		Occupation	
										Self	
D/L Number, State M530553934060 / FL		Soc. Sec. Number		INS Number		Place of Birth (City, State) LOUIEVILLE, KY,		Citizenship US			
Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor	
Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor	
JUVENILE											
Name (Last, First, Middle)											
<input type="checkbox"/> Parent <input type="checkbox"/> Other: _____ <input type="checkbox"/> Legal Custodian											
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 <input type="checkbox"/> defendant and/or <input type="checkbox"/> defendant's parents. School Attended Grade The child and/or parent was told to keep the Juvenile Court Clerk's Office (Phone 355-2526) informed of any change of address.											
<input type="checkbox"/> Yes, by: <input type="checkbox"/> No: Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Description of Property Value of Property											
C O D E											
Drug Activity N. N/A P. Possess		S. Sell B. Buy T. Traffic		R. Smuggle D. Deliver E. Use		K. Disperses/ Distribute		M. Manufacture/ Produce/ Cultivate		Z. Other	
Drug Type N. N/A P. Possess		Drug Type B. Barbiturate C. Cocaine E. Heroin		Drug Type H. Hallucinogen M. Marijuana O. Opium/Deriv.		Drug Type P. Paraphernalia/ Equipment S. Synthetic		Drug Type U. Unknown Z. Other			
C H A R G E											
Charge Description DRIVING WHILE UNDER INFLUENCE Statute Violation Number 316.193(I) Violation of ORD #											
Drug Activity Drug Type Amount / Unit Offense # Counts Domestic Violence Warrant / Capias Number Bond											
N 2017-0001721 1 <input type="checkbox"/> Y <input checked="" type="checkbox"/> N											
C H A R G E											
Charge Description Statute Violation Number											
Drug Activity Drug Type Amount / Unit Offense # Counts Domestic Violence Warrant / Capias Number											
N JAN 27 2017 Bond											
C H A R G E											
Charge Description Statute Violation Number											
Drug Activity Drug Type Amount / Unit Offense # Counts Domestic Violence Warrant / Capias Number											
N JAN 27 2017 Bond											
I N T A K E											
Health / Apparent Physical Condition of Defendant Any knowledge of the following: <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries Explain:											
Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> T.O.T. County Jail PROPERTY - Received By Released By Released To											
<input type="checkbox"/> Posted Bond <input type="checkbox"/> South County Mental Health											
Transported By Date Transported Time Transported Other											
N O T I C E											
<input checked="" type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court <input type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.						Location (Court, Room) Criminal Justice CRIMINAL JUSTICE COMPLEX Court Date and Time 02/23/2017 08:30:00 3228 GUN CLUB ROAD					
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 COMTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED. Signature of Defendant (or Juvenile and Parent Custodian) Date Signed											
A D M I N											
HOLD for Other Agency				Signature of Arresting Officer				Name Verification (Printed by Arrestee)			
<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other				Name of Arresting Officer (Print) I.D. #				(PRINT) Matthew Mohammed I.D. # 01530			
Intake Deputy		I.D. #		Pouch #		Transporting Officer		I.D. #		Agency	
Witness here if subject signed with an "X". W W											

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

SCANNED

JAN 27 2017

DUI PROBABLE CAUSE AFFIDAVIT

Subject:

Mohammadi, Matthew

Case Number:

17-0001721

Roadside Tasks

Horizontal Gaze Nystagmus

<input checked="" type="checkbox"/> Left Eye Does Not Follow Smoothly	<input checked="" type="checkbox"/> Right Eye Does Not Follow Smoothly
<input checked="" type="checkbox"/> Left Eye Jerks at 45 Degree Angle or Less	<input checked="" type="checkbox"/> Right Eye Jerks at 45 Degree Angle or Less
<input checked="" type="checkbox"/> Distinct Jerking Left Eye at Maximum Deviation	<input checked="" type="checkbox"/> Distinct Jerking Right Eye at Maximum Deviation

Brown eyes

Upon starting this task, I showed him how I wanted him to follow the light. The driver did follow the pen. I also had to warn the driver not to move his head. Began to talk to me during task and lost focus. Re attempted onset I observed the driver swaying during the exercise.

Walk and Turn Task

– Began task WITHOUT instructions took approx 12 steps and then asked should I go back. "I feel that its the right thing to do" "I watched cops" I instructed the driver to stand with his left on the line with his right foot directly in front of the left touching heel to toe with his hands/arms down by his sides. The line was a chalk line. The driver was told to remain in this position until told to begin. I explained and demonstrated the exercise and he said he understood the instructions. He stepped out of position wanted a lot of explanations I explained the road sides through his interruptions. Stepped out of position at least two more times before start.. Driver removed shoes willing. Instructions re explained told not to practice driver began 1st step post balance foot not on line step 6 was off line and repositioned on line turn was correct 9 steps back.

One Leg Stand

Was explained instructions refused to preform "task is unfair" "I don't like it". Thought the count 1001-1005 and until I tell you stop "would be for ever".

Finger To Nose

– I had the driver stand with his feet together, arms/hands down at his sides and index fingers pointed out. I explained and demonstrated the exercise and he stated he understood the instructions. I asked the driver to tilt his head back and close his eyes. On the first left, he held his finger on the tip after re positioning it to tip. Asked how long should keep finger to nose. Driver mentioned he believed the instruction were to hold his nose "did not know if I wanted him to put his finger down" reexplained and conducted again the driver brought up his left finger to under his tip of his nose and the motion was similar to a flick of the finger the 1st right was to the nostril area of the nose not the tip and a rib motion. 2nd left tip of nostril 2 right was tip 3rd right left arm moved slightly and a quick motion of right arm and a rub to the bridge of his nose. I observed the driver swaying. "I was shitty" on this.

Romberg Alphabet

I explained the exercise and he stated he understood the instructions. Preformed annunciated each letter with a pause between several .

Breath Results from Instrument

1st Result

refused

2nd Result

3rd Result

If Applicable

State of Florida

County of Palm Beach

The Following Instrument was notarized or sworn before me this

(DATE)

Personally Known

Produced Identification

Notary Public

Notary / Clerk of Courts / Officer (FSS: 117.10)

Signature of Arresting Officer

SCANNED

JAN 27 2017

DUI PROBABLE CAUSE AFFIDAVIT

On the 27th Day of January at 0211 A.M. P.M.
Subject: Mohammadi, Matthew Case Number: 17-0001721
Agency: West Palm Beach Police Department Arresting Officer: Donde 1530

Personal Contact

Driving Pattern	Actual physical control (physical evidence putting the driver behind the wheel)
Subject was driving his car and was stopped by Officer Nichols for speeding 60mph -35mph he was a 2014 Merz Fl tag Y84BNT.	

Observation of Driver	Subject was sitting in car upon arrival had classy eyes slightly disheveled clothing.
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Drivers Statements:	"Yes I was speeding" I feel forced to do this SAID MANY TIMES "I'm not trying to be difficult" During WAT wanted the instructions explained before standing in position At one point during . Believed WAT was ridiculous. During Finger to nose Driver believed he was being "segregated" "that does not make sense"
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Odors:	Clear distinct slight odor of unknown alcoholic beverage coming from person in car More during tasks
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General Observations

Speech:	slightly slurred
Attitude:	cooperative though questioned EVERYTHING
Clothing:	tan pants button down shirt with print
Medical Problems/Medications:	NONE /NONE
Other:	Had refused to exit car was asked and explained options

SCANNED

Page 1 of 2

JAN 27 2017

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

I, Donde 1530, a duly certified Law Enforcement Officer or Correctional Officer, am a member of THE WEST PALM BEACH POLICE DEPARTMENT, and I do swear or affirm that on or about the 27 day of January at 0305 P.M. A.M.

NAME: Mohammadi, Matthew

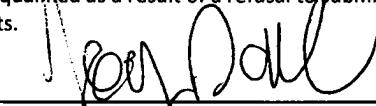
(Type or Print) LAST FIRST MIDDLE OR MAIDEN

DL#: m530553934060, state of Florida, was placed under lawful arrest for the offense of DUI by Donde 1530.
issued Citation a5601ae.

That on or about the 27th day of January at 0449 P.M. A.M.

In Palm Beach County (PLEASE CHECK THE BOX OR BOXES THAT APPLY) I did request said person to submit to a breath urine, or blood test to determine the content of alcohol in his or her blood or breath or the presence chemical or controlled substances therein. I did inform said person that any refusal to submit to such test or tests would result in the suspension of his or her privilege to operate a motor vehicle for a period of one (1) year for a first refusal, or for a period of eighteen (18) months if the driving privilege of such person has been suspended previously for refusing to submit to such test or tests. I did inform said person that he or she commits a misdemeanor, if said person refuses to submit to a lawful test as requested above, and his or her driving privilege has been previously suspended for a prior refusal to submit to a lawful test of his or her breath, urine, or blood. If driver holds a CDL or is operating a CMV, I did inform the driver that this refusal will result in the disqualification of the driver's Commercial Driver's License/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 such test.

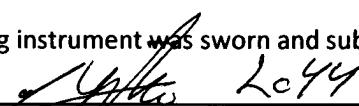
Said person did at that time and place refuse to submit to such test or tests.


Signature of Law Enforcement or Correctional Officer

THE AFFIDAVIT MUST BE NOTARIZED OR ATTESTED TO (F.S. 117.10)

(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before me:


Signature of Attesting Officer

The foregoing instrument was sworn and subscribed before
Me this _____ day of _____, _____,
by _____,

Title _____ Officer
Date: 01/27/17

who is personally known to me or who has produced
_____ as identification.
Notary Public _____

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. If no DUI arrest is made, attach HSMV 78005 (Notice of Commercial Driver's License/Privilege Disqualification)



West Palm Beach Police Department
Breath Testing Facility Report



Defendant: Mohammadi, Matthew Case #: 17-0001721
Arresting Officer: Donde 1530 Date: 1/27/17

Breath Test Results: refused g/210L 0449 Time _____ g/210L _____ Time
_____ g/210L _____ Time _____ g/210L _____ Time

Note: Times are in Military Time

Breath Operator: Donde 1530
Maintenance Technician Ofc. R. Secord #1639

Testing Officer Observations:

Speech: Clear
Attitude: cooperative asked many questions
Clothing: Tan pants brown loafer shoes red button down shirt
Medical Conditions: none
Medications: none
Other: na

Arrival Time at Facility/ Time Twenty (20) Minute Observation Started: 0410/0421

Comments:

Implied consent read before request and after due to driver asking "what if" questions
confusion.

SCANNED
JAN 27 2017

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 determining its alcohol content.

OR

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

NOTE: READ ONLY IF THE SUBJECT DOES NOT COMPLY WITH YOUR REQUEST.

I am Donde 1530 of the West Palm Beach Police Department. 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.

SUBJECTS SIGNATURE: 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 can not 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.

SUBJECTS SIGNATURE: ON CAMERA

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 OPERATION A MOTOR VEHICLE AT THE TIME OF THE STOP/ACCIDENT:	yes sir				
WHERE WERE YOU GOING?	to my hotel				
WHAT STREET OR HIGHWAY WERE YOU ON?	to be honest not form this area				
DIRECTION OF TRAVEL?	no sir using map	WHERE DID YOU START FROM?	dropping friens off		
WHAT TIME DID YOU START?	no sir	WHAT TIME IS IT NOW?	no comment		
WHAT IS TODAY'S DATE?	no comment	WHAT DAY OF THE WEEK IS IT?	not answering question		
WHAT COUNTY AND CITY ARE YOU IN NOW?	west palm beach dont know county				
WHEN DID YOU LAST EAT?	no answer	WHAT DID YOU EAT?	no answer		
WHAT HAVE YOU BEEN DOING FOR THE LAST THREE(3) HOURS?	no comment officer				
HOW MUCH DO YOU WEIGHT?	245	HAVE YOU BEEN DRINKING?	no	WHAT?	nothing officer
HOW MUCH?	na	WHERE?	na	WITH WHOM?	na
WHEN DID YOU HAVE YOUR FIRST DRINK?	na	AND YOUR LAST DRINK?	na		
HOW DID YOU CONSUME YOUR LAST TWO DRINKS?	na				
CAN YOU FEEL THE EFFECTS OF THE ALCOHOL?	have not drank any alcohol officer				
ARE YOU UNDER THE INFLUENCE?	no comment				
HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT?	no	HOW MUCH?	na		
WHAT?	na	WHERE?	na	WHEN?	na
WHAT LINE OF WORK ARE YOU IN?	build arcade games				
WHEN DID YOU LAST WORK?	today				
DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES?	yes	WHAT?	just being fat		
ARE YOU SICK OR INJURED?	no	WHAT'S WRONG?	na		
DO YOU LIMP?	noa	DID YOU RECEIVE A BUMP ON YOUR HEAD RECENTLY?	no		
WERE YOU IN AN ACCIDENT TODAY?	no				
HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY?	no	WHEN?	na		
HAVE YOU SEEN A DOCTOR OR DENTIST TODAY?	no	WHO?	na	WHEN?	na
ARE YOU TAKING ANY PRESCRIPTION MEDICINES?	no	WHAT?	na	WHEN?	na
DO YOU HAVE:					
EPILEPSY?	no				
GLASS EYE?	no				
FALSE TEETH?	no				
EAR INFECTION?	no				
INNER EAR TROUBLE?	had tubes 1yr ago				
DIABETES?	no				
DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTABLE BY GLASSES?	no				
DO YOU TAKE INSULIN?	no	IF SO, WHEN WAS YOUR LAST INJECTION?	no		
HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE?	no	WHERE?	na		

INTERVIEWER: