

0496685

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ARREST / NOTICE TO APPEAR

AD M I N S T R A T I O N	OBTS Number	Agency ORI Number <b>0500200</b>		Agency Name <b>Boca Raton Police Department</b>		Agency Report Number (N.T.A.'s only) <b>3 1 2   2018-003897</b>		1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias <b>1</b>	JUVENILE			
D E F E N D A N T	Charge Type: Check as many as apply: <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other	Location of Arrest (Including Name of Business) <b>800 MEADOWS RD, BOCA RATON FL 33486</b>		Location of Offense (Business Name, Address) <b>800 MEADOWS RD, BOCA RATON, FL 33486</b>		If Weapon Seized Enter Type: <b>None/not Applicable</b>		Multiple Clearance Indicator				
	Date of Arrest <b>03/18/2018</b>	Time of Arrest <b>03:29</b>	Booking Date <b>03/18/2018</b>	Booking Time <b>03:39</b>	Jail Date	Jail Time	Location of Vehicle <b>EMERALD</b>					
C O D E F	Name (Last, First, Middle) <b>FERNANDEZ, NADYA LIANA</b>		Alias: <b>EMERALD</b>		Alias (Name, DOB, Soc. Sec. #, Etc.)							
	Race W - White B - Black	I - American Indian O - Oriental/Asian	Sex <b>F</b>	Date of Birth <b>12/27/1988</b>	Height <b>5'03</b>	Weight <b>120</b>	Eye Color <b>BROWN</b>	Hair Color <b>BLACK</b>	Complexion <b>Light</b>	Build <b>SM</b>		
	Local Address (Street, Apt. Number) <b>6148 UNITED STREET, WEST PALM BEACH, FL 33411</b>		(City)	(State)	(Zip)	Marital Status <b>D</b>	Religion <b>CHRISTIAN</b>	Indication of: Alcohol Influence Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Drug Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk. <input type="checkbox"/>				
	Permanent Address (Street, Apt. Number) <b>6148 UNITED STREET, WEST PALM BEACH, FL 33411</b>		(City)	(State)	(Zip)	Phone <b>(561) 801-4518</b>		Residence Type: 1. City 2. County 3. Florida 4. Out of State <b>1 2</b>				
Business Address (Name, Street)		(City)	(State)	(Zip)	Phone <b>(561) 801-4518</b>		Address Source <b>Subject</b>					
J U V E N I L E	D/L Number, State <b>F655632889671 / FL</b>	Soc. Sec. Number	INS Number	Place of Birth (City, State) <b>NEW YORK, NY, United</b>		Citizenship <b>US</b>						
	Co-Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large <input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile					
	Co-Defendant Name (Last, First, Middle)		Race	Sex	Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 2. At Large <input type="checkbox"/> 3. Felony <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile					
	Parent <input type="checkbox"/> Other: <input type="checkbox"/>		Name (Last, First, Middle)		Address (Street, Apt. Number)		(City)		(State)	(Zip)	Residence Phone	
Legal Custodian		Name (Last, First, Middle)		Address (Street, Apt. Number)		(City)		(State)	(Zip)	Business Phone		
Notified by: (Name)		Relationship		Date	Time	JUVENILE DISPOSITION <input type="checkbox"/> 1. Handled/Processed within Department and Released <input type="checkbox"/> 2. TOT JAC <input type="checkbox"/> 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. 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:												
C O D E	Drug Activity		S. Sell N. N/A P. Possess	R. Smuggle D. Deliver E. Use	K. Disperses/ Distribute	M. Manufacture/ Produce/ Cultivate	Z. Other	Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Description of Property	Value of Property	
	Drug Type		Drug Description		Drug Type		B. Barbiturate C. Cocaine E. Heroin		H. Hallucinogen M. Marijuana O. Opium/Deriv.		P. Paraphernalia/ Equipment S. Synthetic U. Unknown Z. Other	
C H A R G E	Charge Description <b>DUI</b>		Drug Activity	Drug Type <b>N</b>	Amount / Unit	Offense # <b>2018-003897</b>	Counts <b>1</b>	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant / Capias Number	Statute Violation Number <b>316.193(1)</b>	Violation of ORD #	
	Charge Description		Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Warrant / Capias Number	Statute Violation Number	Violation of ORD #	
	Charge Description		Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Warrant / Capias Number	Statute Violation Number	Violation of ORD #	
I N T A K E	Health / Apparent Physical Condition of Defendant <b>INTOXICATED</b>		Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> Posted Bond <input type="checkbox"/> South County Mental Health <input checked="" type="checkbox"/> T.O.T. County Jail		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: <b>NONE</b>		PROPERTY - Received By		Released By	Released To		
	Transported By		Date Transported	Time Transported	Other		Date and Time <b>04/16/2018 08:30:00</b>		Location (Court, Room) <b>South County 200 W Atlantic Ave Delray Beach, FL 33444</b>			
N O T I C E T O A P P E A R	<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.							
	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	
A D M I N	Signature of Defendant (or Juvenile and Parent/Custodian)		Signature of Arresting Officer		Name Verification (Printed by Arresting Officer)		Date Signed <b>3-18-18</b>		Witness here if subject signed with an "X"			
	Intake Deputy <b>D/S [Signature]</b>		Pouch #		Name of Arresting Officer (Print) <b>MURPHY, BRITTANIE J.</b>		ID # <b>751</b>		Agency <b>BRPD</b>			
	Transporting Officer <b>Cashilo</b>		ID # <b>804</b>		Name of Arresting Officer (Print) <b>MURPHY, BRITTANIE J.</b>		ID # <b>751</b>		Agency <b>BRPD</b>			
	Date <b>03/18/2018</b>		Pouch #		Name of Arresting Officer (Print) <b>MURPHY, BRITTANIE J.</b>		ID # <b>751</b>		Agency <b>BRPD</b>			

2018 MAR 19 PM 5:14  
SOUTH COUNTY JUVENILE COURT  
CLERK'S OFFICE  
DELRAY BEACH, FL 33444

MAR 19 2018

PROBABLE CAUSE AFFIDAVIT

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

1 JUVENILE

OBTS Number		
Agency ORI Number <b>FL 0500200</b>	Agency Name <b>BOCA RATON POLICE DEPARTMENT</b>	Agency Report Number <b>3   2   2018-003897</b>
Charge Type: Check as many as apply. <input type="checkbox"/> 1. Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other		Special Notes:

Name (Last, First, Middle) <b>FERNANDEZ, NADYA LIANA</b>	Alias	Race <b>W</b>	Sex <b>F</b>	Date of Birth <b>12/27/1988</b>
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Charge Description <b>316.193(1) DUI</b>	Charge Description
Charge Description	Charge Description

Victim's Name (Last, First, Middle) <b>STATE OF FLORIDA,</b>	Race	Sex	Date of Birth
Local Address (Street, Apt. Number) <b>100 NW 2ND AVE, BOCA RATON, FL 33432</b>	(City)	(State)	(Zip)
Business Address (Name, Street)	(City)	(State)	(Zip)
Phone <b>(561) -</b>	Address Source	Phone <b>(56) -</b>	Occupation

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.     was observed by \_\_\_\_\_ who told \_\_\_\_\_ that he/she saw the arrested person commit the below acts.  
 confessed to \_\_\_\_\_ admitting to the below facts.     was found to have committed the below acts, resulting from my (described) investigation.  
 On the 18 day of March, 2018 at 03:29 (Specifically include facts constituting cause for arrest.)

On 3/18/2018 at approximately 0250 hours, I was dispatched to 800 Meadows Road, Boca Raton Regional Hospital, in reference to a possible drunk driver. BRPD Dispatch advised that a witness, later identified as W/M Kyle King, was following a red Kia bearing FL tag 458PMT. King stated that the vehicle was driving across the hospital grass with no tires.

Upon arrival, Officer Castellanos observed the red Kia in front of BRRH and conducted a traffic stop on the vehicle. It should be noted that the vehicle did not have two front tires. I approached the vehicle and came into contact with a W/F driver, later identified as Nadya Fernandez. I immediately could smell the odor of an alcoholic beverage emitting from her person and her eyes were red and glassy. I asked Fernandez to step out of the vehicle and walk towards my car. As she got out of her vehicle, she lost balance and fell into her vehicle. I then grabbed her arm to assist her walking. Fernandez stated that she was in West Palm Beach at Blue Martini. She stated that she did not have anything to drink. I explained to Fernandez that she had no front tires on her vehicle and she was surprised. While speaking with Fernandez, I was able to still smell a strong odor of alcohol emitting from her person, her speech was slurred, her eyes were red and glassy, and she was unable to maintain her balance. I then asked Fernandez if she would do some field sobriety exercises to dispel my alarm that she is driving under the influence and she stated she would.

The first exercise was the horizontal gaze nystagmus. I explained the instructions and she stated she understood. I attempted to have her complete the exercise multiple times; however, she continuously just stared at me and did not complete the task. It should be noted that she had trouble maintaining the starting position and had to be assisted by Officer Calhoun and Officer Leinonen. Due to Fernandez not being able to do the exercise, I went onto the next one.

SWORN AND SUBSCRIBED BEFORE ME _____ <b>FRENZ, JONATHAN RYAN</b> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) _____ <b>03/18/2018</b> DATE	_____ SIGNATURE OF ARRESTING / INVESTIGATING OFFICER <b>MURPHY, BRITTANIE JEAN (751)</b> NAME OF OFFICER (PLEASE PRINT) _____ <b>03/18/2018</b> DATE	PAGE 1 OF 2
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SCANNED  
MAR 19 2018

PROBABLE CAUSE AFFIDAVIT  
SUPPLEMENT

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

1 JUVENILE

DBTS Number

Agency ORI Number  
**FL 0500200**

Agency Name  
**BOCA RATON POLICE DEPARTMENT**

Agency Report Number  
**3 | 2 | 2018-003897**

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

Special Notes:

Name (Last, First, Middle)  
**FERNANDEZ, NADYA LIANA**

Alias

Race Sex Date of Birth  
**W F 12/27/1988**

The second exercise was the walk and turn. I explained the instructions and she stated she understood. She was not able to maintain the starting position. She didn't touch heel to toe on any step. Fernandez had to be held up by Officer Calhoun and Officer Leinonen because she was unable to stand by herself. Due to Fernandez being unable to stand and not being able to complete the exercises without assistance, I stopped the exercises to assure that she did not get hurt.

I then placed Fernandez under arrest for DUI under FSS 316.193(1). She was transported to BRPD booking for processing. Officer Reissi conducted the 20 minute observation period and the intoxilyzer 8000. I requested a breath sample from Fernandez and she consented. While conducting the breath sample, she then refused and was read implied consent. Fernandez again then agreed to provide a breath sample. While she was waiting to provide a second attempted breath sample, she stated that she now refused. She was then issued a refusal at 0409 hours.

Fernandez was then TOT CJ.

NOT A CERTIFIED COPY

PROBABLE CAUSE STATEMENT

SWORN AND SUBSCRIBED BEFORE ME

**FRENZ, JONATHAN RYAN**

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

**03/18/2018**  
DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

**MURPHY, BRITTANIE JEAN (751)**  
NAME OF OFFICER (PLEASE PRINT)

**03/18/2018**  
DATE

PAGE  
**2 OF 2**