19CT21885MB

OBTS Number

ARREST / NOTICE TO APPEAR

Juvenile Referral Report

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

Juvenile: N

ADMINISTRATIVE

Agency ORI Number: FLO 502600

Agency Name: PALM BEACH GARDENS POLICE DEPARTMENT

Agency Report Number (N.T.A.'s only): 78- 19006896

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): 2

Multiple Clearance Indicator:

Location of Arrest (Including Name of Business): NORTHLAKE BLVD/MT HOLLY DR, WPB, FL

Location of Offense (Business Name, Address): NORTHLAKE BLVD/SANDTREE DR, PBG, FL

Date of Arrest: 11/23/2019

Time of Arrest: 03:11

Booking Date:

Booking Time:

Jail Date:

Jail Time:

Location of Vehicle: KAUFF'S TOWING & RECOVERY 4301 East Avenue, West Palm Beach, FL 33405

DEFENDANT

Name (Last, First, Middle): MCCANN, NANCY, ANN

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

Race (W - White I - American Indian B - Black 0- Oriental/Asian): W

Sex: F

Date of Birth: 05/03/1963

Height: 5'1

Weight: 115

Eye Color: BRO

Hair Color: BRO

Complexion: LIGHT

Build: ~~SLIM~~ Small

Scars, Marks, Tatoos, Unique Physcal Features (Location, Type, Description): TAT- L/ANKLE, R/FOOT, R/SHOULDER, R/R/SHOULDER, RIGHT HIP, LEFT SHOULDER

Marital Status: SINGLE

Religion: LUTHER

Indication of:	Y	N	Unk.
Alcohol Influence	☑	☐	☐
Drug Influence	☐	☐	☑

Local Address (Street, Apt. Number): 535 W JASMINE DR, (City) LAKE PARK, (State) FL, (Zip) 33403

Phone: (561) 309-5015

Residence Type: 1. City 2. County 3. Florida 4. Out of State: 2

Permanent Address (Street, Apt. Number): 535 W JASIMNE DR, (City) LAKE PARK, (State) FL, (Zip) 33403

Phone: ( )

Address Source: VERBAL

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

Phone: ( )

Occupation: FINANCE

D/L Number, State: M250621636630 FL

Soc. Sec. Number: [redacted]

INS Number:

Place of Birth (City, State): Hialeah, FL

Citizenship: 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: 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 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/Deriv. P. Paraphernalia/ Equipment S. Synthetics U. Unknown Z. Other

CHARGE

Charge Description: DRIVING UNDER THE INFLUENCE

Counts: 1

Domestic Violence: ☐ Y ☒ N

Statute Violation Number: 316.193(1)

Violation of ORD #:

Drug Activity: N

Drug Type: N

Amount / Unit:

Offense #:

Warrant / Capias Number:

Bond: OR

CHARGE

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

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

CHARGE

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

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

CHARGE

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

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

NOTICE TO APPEAR

Location (Court, Room Number, Address): NORTH COUNTY COURTHOUSE, 3188 PGA BOULEVARD, PALM BEACH GARDENS, FL 33410 - PH: (561) 662-6700

Court Date and Time: Month DECEMBER Day 18 Year 2019 Time 10:00 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

Signature of Defendant (or Juvenile and Parent /Custodian)

Date Signed: 11/23/2019

ADMIN

HOLD for other Agency Name:

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other:

Signature of Arresting Officer: X 514

Name of Arresting Officer (Print): Ofc. ANDREW FLINK I.D. #: 514

Name Verification (Printed by Arrestee) (PRINT)

Intake Deputy: DScoll I.D. #: 7630 Pouch #:

Transporting Officer: ANDREW FLINK ID #: 514 Agency: PBGPD

Witness here if subject signed with an "X"

PAGE 1 OF 1

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

SCANNED NOV 26 2019

0512799 / 1347

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 23RD DAY OF NOVEMBER 20 19, AT 0255 [✓ AM] PM

SUBJECT: MCCANN, NANCY, ANN

CASE NUMBER: 19006896

AGENCY: PALM BEACH GARDENS POLICE DEPT.

ARRESTING OFFICER: Ofc. ANDREW FLINK 514

PERSONAL CONTACT

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

I observed the vehicle, a Hyundai Santa Fe (Z28HST/FL), to be stopped beyond the stop bar on east bound Northlake Blvd at the intersection of Sandtree Dr in the city of Palm Beach Gardens, FL. The vehicle was stopped approximately 20 feet east of the stop bar, with the rear wheels on the far side of the painted crosswalk path. I initiated a traffic stop on the vehicle just west of the intersection of Northlake Blvd and Mt Holly Dr. I made contact with the driver, later identified via Florida Driver License photo, Nancy McCann, while she was still in the driver seat of the running vehicle, in full actual physical control.

OBSERVATION OF DRIVER:

McCann had watery eyes, flushed red face, slurred speech, and the odor of an unknown alcoholic beverage emanating from her breath at conversational distance. McCann attempted to provide me a credit/debit card, when asked for her driver license. I had to inform McCann the card was not a driver license. McCann appeared lethargic and made slow and deliberate movements.

DRIVER'S STATEMENTS:

McCann said she had been coming from Jupiter and had consumed alcohol, "here and there".

ODORS:

Unknown alcoholic beverage.

GENERAL OBSERVATIONS

SPEECH: **Slurred**

ATTITUDE: **Compliant**

CLOTHING: **Pink dress, brown boots**

MEDICAL/OTHER: **None stated.**

TATE OF FLORIDA
OUNTY OF PALM BEACH

ignature of Arresting/Investigative Officer)

he foregoing instrument was sworn to or affirmed and subscribed before me this 23rd day of November 20 19 by **Ofc. ANDREW FLINK**

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

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

SHARI L. O'NEAL
Notary Public - State of Florida
Commission # FF 966354
y Comm. Expires Jun 25, 2020
Bonded through National Notary Assn.

SUBJECT: MCCANN, NANCY, ANN **CASE NUMBER** 19006896

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

ther Observations:

Vertical Gaze Nystagmus

WALK & TURN:

McCann had started the exercise two times, prior to be told to do so. McCann also lost her balance during the starting position and stepped off the line. During the first set of steps, McCann stepped off the line on the third step. McCann also only took eight steps rather than nine as instructed. McCann then executed an improper turnaround. On the return set, McCann stepped off the line and missed heel-to-toe on the first step. McCann took eight steps rather than nine as instructed. On each of the return steps, McCann missed heel-to-toe.

ONE LEG STAND:

During the instructions, McCann started once prior to being told to do so. McCann put her foot down four times, prior to the exercise ending. McCann also raised her arms more than six inches from her sides, two separate times.

ROMBERG ALPHABET:

Not performed

FINGER TO NOSE:

Not performed

REATH TEST RESULTS: 1) 2) 3) 4)

TATE OF FLORIDA
OUNTY OF PALM BEACH

ignature of Arresting/Investigative Officer)

e foregoing instrument was sworn to or affirmed and subscribed before me this **23rd** day of **November** 20**19** by **Ofc. ANDREW FLINK**

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

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

SHARI L. O'NEAL
Notary Public - State of Florida
Commission # FF 936354
My Comm. Expires Jun 25, 2020
Bonded through National Notary Assn.

PALM BEACH COUNTY SHERIFF'S OFFICE
DUI TESTING FACILITY
INFORMATION SHEET

PBSO CASE # 19-140577 PBSO ZONE 3-12

AGENCY CASE # 19006896 CRASH CASE #

TIME OF STOP/CRASH 0255 DATE 11/23/2019 DAY Saturday

SUBJECT'S NAME McCann, Nancy Ann RACE W SEX F

HGT 5'1 **WGT** 115 **DOB** 5/3/1963

LOCATION Northlake Blvd/Sandtree Dr, PBG, FL

ARRESTING OFFICER'S NAME & ID Andrew Klink 514 AGENCY PBGPD

DIVISION: Patrol

NOTIFIED BY COMMO

ARRIVAL AT FACILITY 0356

Arrest Time 0311

BREATH RESULTS:

1.

2.

3.

4.

REFUSED

TESTING OFFICER'S ID 6212 PBSO VIDEOTAPE # **N/A**

19006896

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

I, **Ofc. ANDREW FLINK**, a duly certified Law Enforcement Officer or Correctional Officer,
(Name of Officer reading Implied Consent Warning)

am a member of **Palm Beach Gardens Police Department**, and I do swear
(Name of law enforcement agency)

or affirm that on or about the **23RD** day of **NOVEMBER**, 20 **19**, at **03:11** ☐ P.M ☑ A.M.

DRIVER **NANCY** **ANN** **MCCANN**,
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# **M250621636630**, state of **FL**, was placed under lawful arrest for

the offense of **DRIVING UNDER THE INFLUENCE** by **Ofc. ANDREW FLINK** and
(Name of Arresting Officer)

issued Citation # A56H57E.

That on or about the **23RD** day of **NOVEMBER**, 20 **19**, at **0418** ☐ 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

SHARI [illegible]
My Comm. Expires Jun 25, 2020

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

(AFFIX SEAL)
The foregoing instrument was sworn and subscribed before

me this **23rd** day of **November**, 20 **19**,

by **Ofc. ANDREW FLINK**,

who is personally known to me or who has produced

Personally Known as identification

Notary Public S. Ci

The foregoing instrument was sworn and subscribed before me:

Signature of Attesting Officer

Title

Date **11/23/2019**

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)

TESTING FACILITY TASK REPORT

3

AGENCY: PBG Ofc. Flick #514

SUBJECT: [illegible] Nancy A.

CASE NUMBER: 19-1-10577

DATE: 11-25-19

VIDEO TAPE NUMBER: /

BEGINNING TIME: 0410 hrs

ENDING TIME: 0419 hrs

BREATH TESTS RESULTS: 1) REFUSED TIME 0412 [✓ A.M.]/P.M. 2) ______ TIME ______ A.M./P.M.

3) ______ TIME ______ A.M./P.M. 4) ______ TIME ______ A.M./P.M.

BREATH OPERATOR: [illegible] O'Neal #6212

MAINTENANCE TECHNICIAN: [illegible] #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: Slur

ATTITUDE: Calm, [illegible], Cooperative

CLOTHING: Dress-Pink

MEDICAL CONDITIONS: None

MEDICATIONS: None

OTHER: Eyes: Very Red, Glossy & Sleepy

COMMENTS: 20 min. observation done by A/O Flick #514

A/O requested the breath test.

D refused the breath request.

A/O read the implied consent on camera.

D understood the IC as read.

D still refused after the IC was read.

CIW read on camera.

D refused QTF.

SUBJECT: Mclann, Nancy CASE NUMBER: 19006896

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: Ofc Frink 5H

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

PBSO #0129C REV. 9/93

SUBJECT: McLann, Nancy CASE NUMBER: 19006596

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.

SUSPECT'S SIGNATURE: (X) Read on Video

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	☐		Other:	
	☐		Other:	

REVIEW COMPLETED BY

Booking Number: 2019037734	**Date:** 11/24/2019 **Specialist Name/ID:** AM/31562