

0491978

ARREST / NOTICE TO APPEAR
Juvenile Referral Report1. Arrest
2. N.T.A.
3. Request for Warrant
4. Request for Capias

1 Juvenile N

OBTS Number			Agency ORI Number Agency Name						Agency Report Number (N.T.A.'s only)										
FLO 502600			Palm Beach Gardens Police Department						78- 17005521										
ADMINISTRATIVE	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						
Location of Arrest (Including Name of Business)			Location of Offense (Business Name, Address)																
PBG CITY HALL 10500 N. MILITARY TRAIL, PBG			10500 N. MILITARY TRAIL, PBG, FL 33410																
Date of Arrest		Time of Arrest		Booking Date		Booking Time		Jail Date		Jail Time		Location of Vehicle							
09/18/2017		23:41										4701 East Ave, WPB, FL 33407 (K)							
Alias (Name, DOB, Soc. Sec. #, Etc.)																			
Name (Last, First, Middle) TAYLOR, PATRICE DEBBIE																			
Race W - White I - American Indian B - Black O - Oriental/Asian		Sex B F		Date of Birth 05/02/2017 (Age)		Height 502		Weight 98		Eye Color BROWN		Hair Color BROWN							
Multiple Clearance Indicator																			
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) L- Arm: Rose, Anchor, Stopwatch, Arrow; R-Shoulder: "Princess Daisy"																			
Marital Status Single		Religion Christian		Indication of: Y N Alcohol Influence Drug Influence															
Local Address (Street, Apt. Number) 5020 Elpine Way		(City) Palm Beach Gardens		(State) FL		(Zip) 33418		Phone (561) 373-7396		Residence Type: 1. City 2. County 3. Florida 4. Out of State									
Permanent Address (Street, Apt. Number) 5020 Elpine Way		(City) Palm Beach Gardens		(State) FL		(Zip) 33418		Phone () Same		Address Source FL Driver's License									
Business Address (Name, Street) Wells Fargo - 4441 Beacon Circle		(City) West Palm Beach		(State) FL		(Zip) 33407		Phone ()		Occupation Lead Teller									
D/L Number, State T460664946620 FL		Soc. Sec. Number [REDACTED]		INS Number [REDACTED]		Place of Birth (City, State) New York City, NY		Citizenship USA											
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		[REDACTED]											
Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		[REDACTED]											
Parent Legal Custodian Other: Name (Last) [REDACTED]		(First)		(Middle)		Residence Phone ()													
Address (Street, Apt. Number) [REDACTED]		(City)		(State)		(Zip)		Business Phone ()											
Notified by: (Name) [REDACTED]		Date		Time		Juvenile Disposition 1. Handled/processed within Dept. and Released. 2. TOT HRS / DYS 3. Incarcerated													
Released To: (Name) [REDACTED]		Relationship		[REDACTED]			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) [REDACTED]		School Attended			[REDACTED]			Grade											
Property Crime? [] Yes [] No		Description of Property		Value of Property			[REDACTED]												
Drug Activity S. Sell N. A/A P. Possess		R. Smuggle B. Buy T. Traffic		K. Dispense/ D. Deliver E. Use		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	
Violation of ORD #																			
Charge Description Driving Under the Influence		Counts 1		Domestic Violence [] Y [] N		Statute Violation Number 316.193(1)			[REDACTED]										
Drug Activity N N		Drug Type N/A		Amount / Unit N/A		Offense # 1		Warrant / Capias Number			Bond								
Charge Description		Counts		Domestic Violence [] Y [] N		Statute Violation Number			[REDACTED]			Violation of ORD #							
Drug Activity		Drug Type		Amount / Unit		Offense #		Warrant / Capias Number			Bond								
Charge Description		Counts		Domestic Violence [] Y [] N		Statute Violation Number			[REDACTED]			Violation of ORD #							
Drug Activity		Drug Type		Amount / Unit		Offense #		Warrant / Capias Number			Bond								
Charge Description		Counts		Domestic Violence [] Y [] N		Statute Violation Number			[REDACTED]			Violation of ORD #							
Drug Activity		Drug Type		Amount / Unit		Offense #		Warrant / Capias Number			Bond								
Drug Activity		Drug Type		Amount / Unit		Offense #		Warrant / Capias Number			Bond								
SEP 19 AM 2:35																			
Location (Court, Room Number, Address) North County Courthouse 3188 PGA Blvd, Palm Beach Gardens, FL 33410																			
Court Date and Time Month OCTOBER Day 25 Year 2017 Time 10:00 AM ✓ 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 [Signature]																			
HOLD for other Agency Name:		Signature of Arresting Officer X		Name Verification (Printed by Arrestee) NR															
Dangerous Suicidal		Resisted Arrest Other:		Name of Arresting Officer (Print) Ofc. Cameron Carver #471		I.D. # #471													
Intake Deposit SPANN 8(b)		I.D. # Pouch #		Transporting Officer C. Carver		ID # 471		Agency PBGPD											
Witness here if subject signed with an X [Signature]																			
DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - AGENCY GOLD - DEFENDANT (IF APPLICABLE) OF																			

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 18 DAY OF September 20 17, AT 23:14 AM PM

SUBJECT: TAYLOR, PATRICE DEBBIE CASE NUMBER: 17005521

AGENCY: PALM BEACH GARDENS POLICE DEPT. ARRESTING OFFICER: Ofc. Cameron Carver #471
PERSONAL CONTACT

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

Observed vehicle bearing FL-510VRR traveling northbound on Military Trail passing through Burns Road intersection. Driver, Patrice Taylor, was driving with two-flat tires on her left side. Patrice pulled into the parking lot of the Palm Beach Gardens City Hall where I initiated my overhead lights. Patrice stopped the vehicle and exited the driver's side door and surveyed her damage.

OBSERVATION OF DRIVER:

Driver was conversing with her passengers and answered questions on the condition of the vehicle. Driver was chewing gum and was concerned about her vehicle. While speaking with driver I detected the odor of an unknown alcoholic beverage.

DRIVER STATEMENT:

Driver stated she pulled out of her residential complex (Woodbine) and ran into the positive median barrier separating the lanes of travel with the left side of her vehicle. Driver continued to drive northbound on

DRIVER'S STATEMENTS:

Military Trail where she noticed myself and another officer on a traffic stop and subsequently pulled into the City Hall Parking lot. Driver stated around 10:00pm on 09/18/17 she had a margarita.

ODORS:

While speaking with driver I detected the odor of an unknown alcoholic beverage.

GENERAL OBSERVATIONS

SPEECH: Clear, articulate

ATTITUDE: Calm, cooperative

CLOTHING: Clean, dry, unsoiled.

MEDICAL/OTHER: N/A

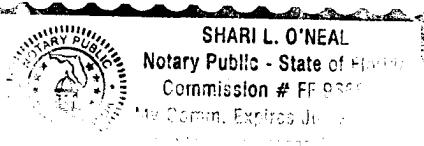
STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 19 day of September 20 17 by _____

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

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



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SEP 24 2017

WITNESS LIST

CASE NUMBER: 17005521

ARRESTING OFFICER: Ofc. Cameron Carver #471

ADDRESS: 10500 N. Military Trail, Palm Beach Gardens, FL 33410

PHONE NUMBERS (HOME): (561) 799-4445 (WORK) (561) 799-4445

CAN TESTIFY TO: Facts of Case

NAME: Ofc. Philip Colletti

ADDRESS: 10500 N. Military Trail, Palm Beach Gardens, FL 33410

PHONE NUMBERS (HOME) (561) 799-4445 (WORK) (561) 799-4445

CAN TESTIFY TO: Facts of Case

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

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NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

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SEP 24 2017

TESTING FACILITY TASK REPORT

AGENCY: FBC OF CLEVELAND #471

SUBJECT: Taylor, Justice M.

DATE: 04-19-17

BEGINNING TIME: 00:41:00

BREATH TESTS RESULTS: 1) .074 TIME 8:45 A.M./P.M. 2) .016 TIME 9:42 A.M./P.M.
3) _____ TIME _____ A.M./P.M. 4) _____ TIME _____ A.M./P.M.

BREATH OPERATOR: S. O'Neal #0212

MAINTENANCE TECHNICIAN: 173 J. Morris #6487

TESTING OFFICER'S OBSERVATIONS

SPEECH: _____

ATTITUDE: Calm, Cooperative, Alert

CLOTHING: 30.00

MEDICAL CONDITIONS:

MEDICATIONS: None

OTHER: Eyes: red + Glare

COMMENTS: 20 min. observation done by AIC Custer

Also requires the truth test.

Summary of the main report

D completed the task correctly.

Ch 100 on Cursive

Page 1 of 1

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SFP 24 2017

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? _____

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HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? _____ WHERE? _____

SEP 24 2017

INTERVIEWER: _____

WHITE - STATE ATTY.

YELLOW - DHSMV

PINK - CENTRAL RECORDS

GOLD - JAIL

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) _____

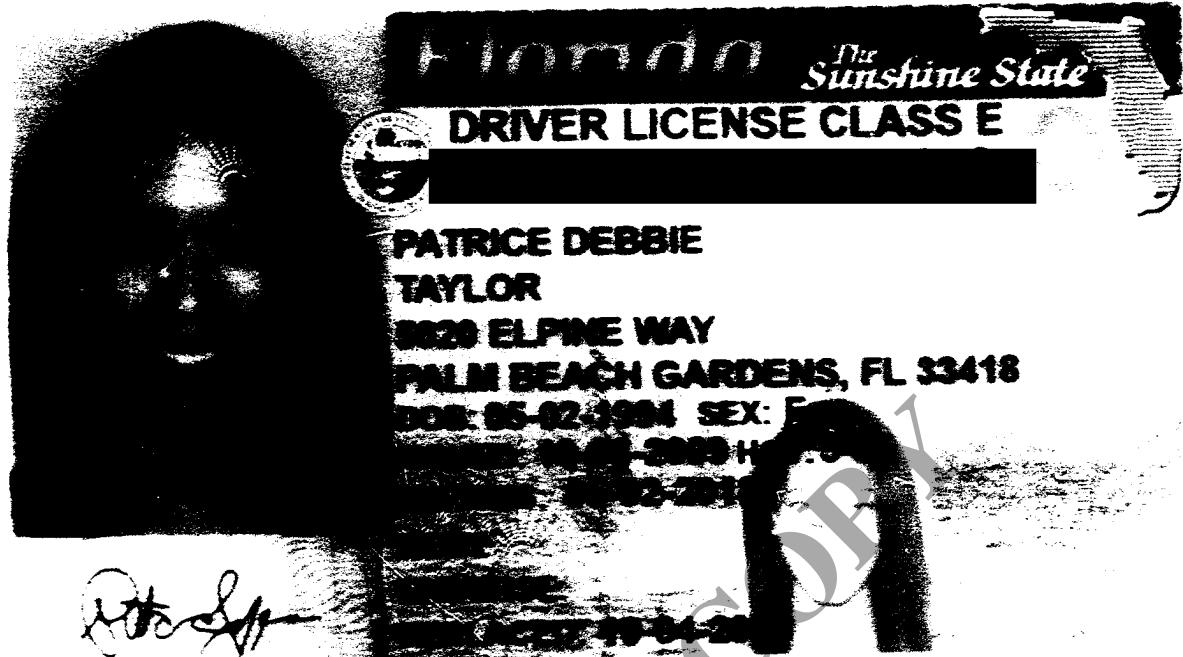
CONSTITUTIONAL WARNINGS

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.

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SEP 24 2017

SUSPECT'S SIGNATURE: (X) _____



Operation of a motor vehicle constitutes consent to any sobriety test required by law.

NOT A CERTIFIED COPY

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