0 50 4444 19CT1323 3973

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

OBTS Number

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- 19000374

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

Weapon Seized / Type: 2 (1. Yes 2. No)

Multiple Clearance Indicator:

Location of Arrest (Including Name of Business): 3101 PGA BLVD, PALM BEACH GARDENS, FL 33410

Location of Offense (Business Name, Address): PGA BLVD / MINSK GARDENS BLVD, PBG, FL 33410

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle KAUFF'S TOWING & RECOVERY
01/17/2019	22:45					4301 East Avenue, West Palm Beach, FL 33405

DEFENDANT

Name (Last, First, Middle): SMITH, PATRICK, CARRIGAN

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

Race (W - White I - American Indian B - Black 0- Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	M	11/24/1958	508	165	BLU	BRO	LIGHT	SMALL

Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description): MEDICAL SCARS ACROSS HEAD

Marital Status: Divorced

Religion: CATHOLIC

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

Local Address (Street, Apt. Number) (City) (State) (Zip): 13901 US HWY 1 #9, JUNO BEACH, FL 33408

Phone: (561) 346-0100

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

Permanent Address (Street, Apt. Number) (City) (State) (Zip): 13901 US HWY 1 #9, JUNO BEACH, FL 33408

Phone: ( )

Address Source: FL DRIVER'S LICENSE

Business Address (Name, Street) (City) (State) (Zip): PATRICK C SMITH DDS/PA 13901 US HWY 1 #9, JUNO BEACH, FL 33408

Phone: (561) 694-9000

Occupation: OWNER/OPERATOR

DL Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
S530663584240 FL	[redacted]		ROYAL OAK, MI	USA

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 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	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
DRIVING UNDER THE INFLUENCE	1	☐Y ☒N	316.193(1)	

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

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

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

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

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

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

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 FEBRUARY Day 20 Year 2019 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: 01/17/2019

ADMIN

HOLD for other Agency Name:

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other:

Signature of Arresting Officer

Name of Arresting Officer (Print): Ofc. Cameron Carver I.D. #: #471

Transporting Officer: Ofc. Cameron Carver ID #: #471 Agency: PBGPD

Name Verification (Printed by Arrestee) (PRINT)

Witness here if subject signed with an -X-

Intake Deputy I.D. # Pouch #

PAGE 1 OF 1

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

SHERIFF'S OFFICE PALM BEACH COUNTY JAIL BOOKING CLERK JAN 18 2019 8:00 AM

NOT A CERTIFIED COPY

CERTIFIED COPY

3 23 2019

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 17 DAY OF JANUARY 20 19, AT 21:40 AM ✓ PM

SUBJECT: SMITH, PATRICK, CARRIGAN CASE NUMBER: 19000374

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)

Officer Jung #454 was running radar at PGA Boulevard and Minsk Gardens Boulevard and estimated the black Mercedes to be traveling at 65 miles per hour in the posted 45 mile per hour zone. His Decatur hand-held radar unit provided a reading of 63 miles per hour. Officer Jung conducted a traffic stop and the Mercedes came to final rest at the west entrance to the Gardens Mall, located at 3101 PGA Boulevard, Palm Beach Gardens, Fl.

OBSERVATION OF DRIVER:

After making contact and detecting the odor of an unknown alcoholic beverage, Officer Jung requested I respond to the scene. Upon my arrival, I made contact with Patrick Smith, and the sole occupant of the Black Mercedes, bearing Florida Tag IE65NM. Patrick Smith was slurring his words as he spoke and had the odor of an unknown alcoholic beverage coming off of his breath. Smith's eyes were bloodshot and glassy.

DRIVER'S STATEMENTS:

Admitted to drinking three glasses of wine with dinner, approximately 1 hour prior to the traffic stop. Stated he is in a divorce with his wife and received notice earlier today that she is claiming he stole property. Stated that notice is one reason he was out with friends tonight. Stated he may have had a glass of wine or two, too much this evening.

ODORS:

Odor of the impurities of an alcoholic beverage emitting from breath.

GENERAL OBSERVATIONS

SPEECH: **Slurred, Quiet, Repetative,**

ATTITUDE: **Calm, Aggravated,**

CLOTHING: **Purple Long Sleeve Shirt, Black Pants, Black Shoes**

MEDICAL/OTHER: **Repathaa 150mg; ASA 81mg; Augmentin 875mg**

STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer) 471

The foregoing instrument was sworn to or affirmed and subscribed before me this 17 day of January 20 19 by Ofc. Cameron Carver

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

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

Notary Public - State of Florida
Commission # FF 966954
My Comm. Expires Jun 25, 2020
Bonded through National Notary Assn.

SCANNED
JAN 23 2019

NOT A CERTIFIED COPY

SUBJECT: SMITH, PATRICK, CARRIGAN CASE NUMBER 19000374

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:

Refer to Agency PC for further details on HGN and other SFST's.

WALK & TURN:

I explained and demonstrated the instructions to Smith, who stated he understood. Smith was unable to keep balance and swayed during the instructional phase. Smith took his shoes off and did the task barefoot and still swayed and was unable to keep balance. Smith started prior to being directed to. Smith stopped walking to regain balance. He did not touch heel-to-toe as instructed. While walking down he walked off the multiple times. He did not turn as instructed and demonstrated, losing balance while completing the turn by staggering and stumbling. While walking back he walked off the line multiple times. Smith took the incorrect number of steps (10 steps). Smith raised his arms more than six-inches to regain balance. I observed 8 of 8 clues, indicating impairment. (2 or more clues are an indicator that BAC is at or above a 0.08).

ONE LEG STAND:

I explained and demonstrated the instructions to Smith, who stated he understood. Upon beginning the exercise, Smith swayed while balancing. He raised his arms over six inches to keep his balance. He bounced/hopped to keep his balance. He lowered his center of gravity to keep his balance. I observed 3 of 4 clues, indicating impairment. (2 or more clues are an indicator that BAC is at or above a 0.08). Due to Smith hopping and bouncing around the task was called for his safety.

ROMBERG ALPHABET:

I explained and demonstrated the instructions to Smith, who stated he understood. Smith asked if he could do the task in phonetics. I informed him he could not and to do them as instructed. Smith did not keep his eyes closed. He failed to maintain his head in the tilted back position as instructed. He did not recite the alphabet as instructed as Smith sang/sped recited the alphabet. After Smith completed the task, I allowed him to perform the task phonetically, to which Smith sped recited the alphabet then paused and had difficulty remembering the letters/phonetics.

FINGER TO NOSE:

I explained and demonstrated the instructions to Smith, who stated he understood. He failed to return arms to his/her side without instruction. He did not touch the tip of the finger to the tip of the nose as instructed and demonstrated. He used the wrong hand commanded one of time.

BREATH TEST RESULTS: **REFUSED**

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 17 day of January 2019 by Ofc. Cameron Carver

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

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

BRIAN L. O'NEAL
Notary Public - State of Florida
Commission # FF 205954
My Comm. Expires Jan 26, 2022
Bonded through National Notary Assn.

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SCANNED
JAN 23 2019

WITNESS LIST

CASE NUMBER: 19000374

ARRESTING OFFICER: Ofc. Cameron Carver

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

PHONE NUMBERS (HOME): N/A (WORK) (561) 799-4445

CAN TESTIFY TO: Facts of Case

NAME: Ofc. Jason Jung #454

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

PHONE NUMBERS (HOME) N/A (WORK) (561) 799-4445

CAN TESTIFY TO: Traffic Offense and Traffic Stop/ Scene Safety

NAME: Ofc. Kirsten Eriksson #496

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

PHONE NUMBERS (HOME) N/A (WORK) (561) 799-4445

CAN TESTIFY TO: Scene Safety

NAME:

ADDRESS

PHONE NUMBERS (HOME) (WORK)

CAN TESTIFY TO:

NAME:

ADDRESS

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:

NOT A CERTIFIED COPY

SCANNED
JAN 23 2019

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

PBSO CASE # 19-027066 PBSO ZONE 3-13

AGENCY CASE # 19000374 CRASH CASE #

TIME OF STOP/CRASH 21:40 DATE 01/17/2019 DAY THURSDAY

SUBJECT'S NAME SMITH (LAST) PATRICK (FIRST) CARRIGAN (MID) RACE W SEX M

HGT 508 WGT 165 DOB 11/24/1958

LOCATION 3101 PGA BLVD, PALM BEACH GARDENS, FL 33410

ARRESTING OFFICER'S NAME & ID Ofc. Cameron Carver #471 AGENCY PBGPD

DIVISION: Traffic Unit

NOTIFIED BY COMMO Yes

ARRIVAL AT FACILITY 2310hrs

ARREST TIME 22:45

BREATH RESULTS:

REFUSED

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

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SCANNED
JAN 23 2019

TESTING FACILITY TASK REPORT

AGENCY: PBG Ofc. Carver #471

SUBJECT: Smith, Patrick C. CASE NUMBER: 19-027066

DATE: 01-17-19 VIDEO TAPE NUMBER: —

BEGINNING TIME: 2334hrs ENDING TIME: 2348hrs

BREAST TESTS RESULTS: REFUSED 1) TIME 2337 A.M./P.M. 2) _____ TIME _____ A.M./P.M.

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

BREATH OPERATOR: S. O'Neal #6212

MAINTENANCE TECHNICIAN: Cpl. Karlecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: Mumbled at times

ATTITUDE: Calm, Emotional at times, Moodswings, Cooperative

CLOTHING: Shirt- Purple / Blue / Striped Pants- Black

MEDICAL CONDITIONS: Several, No Allergies

MEDICATIONS: Several

OTHER: Eyes: Red, Glassy

Strong odor of unknown alcoholic beverage.

COMMENTS: 20 min. observation done by A/O Carver #471
A/O requested the breath test.
D submitted to the breath request at first.
Then D asked what happened if he refused.
A/O read the implied consent on camera 2x's.
D refused to submit after the I/C was read.
C/W read on camera.
Q+A Conducted.

NOT A CERTIFIED COPY

SCANNED
JAN 23 2019

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

SUBJECT: Smith, Patrick CASE NUMBER: 19000374

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) Read 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 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 Camera

NOT A CERTIFIED COPY

SCANNED
JAN 23 2019

SUBJECT: Smith, Patrick CASE NUMBER: 19000374

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? Yes

WHERE WERE YOU GOING? Home, 2795 Caroline Drive, Jupiter FL.

WHAT STREET OR HIGHWAY WERE YOU ON? PGA Blvd

DIRECTION OF TRAVEL? W WHERE DID YOU START? Palm Beach, FL

WHAT TIME DID YOU START? Unsure WHAT TIME IS IT NOW? NO

WHAT IS TODAY'S DATE? Jan 17, 2019 WHAT DAY OF THE WEEK IS IT? Thursday

WHAT COUNTY AND CITY ARE YOU IN NOW? Palm Beach Gardens, Florida

WHEN DID YOU LAST EAT? Dinner | 8:30 WHAT DID YOU EAT? Prime rib

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? Sitting in Police Car / Driving home

HOW MUCH DO YOU WEIGH? 162 HAVE YOU BEEN DRINKING? Yes WHAT? Wine

HOW MUCH? 3 glasses WHERE? Palm Bch Grill WITH WHOM? 5 Friends

WHEN DID YOU HAVE YOUR FIRST DRINK? Refused AND YOUR LAST DRINK? Refused

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? Refused

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? No longer ARE YOU UNDER THE INFLUENCE? NO

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? NO HOW MUCH? /

WHAT? / WHERE? / WHEN? /

WHAT LINE OF WORK ARE YOU IN? Dentistry WHEN DID YOU LAST WORK? 5:00 today

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? Yes WHAT? Head Trauma, infected Sinus

ARE YOU SICK OR INJURED? Yes WHAT'S WRONG? Swollen head and head pain

DO YOU LIMP? Claims head trauma causes him to not have good balance DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? Yes entering vehicle leaving Palm Beach Grill.

WERE YOU IN AN ACCIDENT TODAY? NO

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? NO WHEN? /

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? NO WHO? / WHY? /

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? Yes WHAT? Augmentin, Lupathaa, Trazodone, Blood thinners WHEN? Tuesday 08:00 Today, 02:00 01/17/19

DO YOU HAVE:
- EPILEPSY? NO
- GLASS EYE? NO
- FALSE TEETH? NO
- EAR INFECTION? NO
- INNER EAR TROUBLE? NO
- DIABETES? NO

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? NO

DO YOU TAKE INSULIN? NO IF SO, WHEN WAS YOUR LAST INJECTION? /

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? Yes ~~ME, DC~~ WHERE? MI, DC.

INTERVIEWER:

NOT A CERTIFIED COPY

SCANNED
JAN 23 2019

19000374

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

I, **Ofc. Cameron Carver**, 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 **17** day of **January**, 20 **19**, at **22:45** ☑ P.M ☐ A.M.

DRIVER **PATRICK** **CARRIGAN** **SMITH**,
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# **S530663584240**, state of **FL**, was placed under lawful arrest for

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

issued Citation # **A56GYIE**.

That on or about the **17** day of **January**, 20 **19**, at **23:37** ☑ 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

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

SHARI L. O'NEAL
Notary Public - State of Florida
Commission # FF 930054
My Comm. Expires Jun 25, 2020
Bonded through National Notary Assn.

(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before me this **17** day of **January**, 20 **19**, by **Ofc. Cameron Carver**, who is personally known to me or who has produced **Personally Known** as identification.

Notary Public S. O'Neal

The foregoing instrument was sworn and subscribed before me:

Signature of Attesting Officer

Title

Date

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)

NOT A CERTIFIED COPY

SCANNED
JAN 23 2019

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:	

NOT A CERTIFIED COPY

REVIEW COMPLETED BY

Booking Number: 2019002070	**Date:** 1/18/2019
	Specialist Name/ID: 69Gammage/5660

SCANNED
JAN 23 2019