

049018

ARREST / NOTICE TO APPEAR

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

JUVENILE

ARREST / NOTICE TO APPEAR				1. Arrest		3. Request for Warrant		4. Request for Capias		1 JUVENILE											
OBTS Number 0500200		Agency Name Boca Raton Police Department		Agency Report Number (N.T.A.'s only) 3 1 2 2017-010726																	
Agency ORI Number 0500200		Charge Type: Check as many as apply. <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		If Weapon Seized Enter Type None/not Applicable		Multiple Clearance Indicator															
Location of Arrest (Including Name of Business) 5440 W GLADES ROAD				Location of Offense (Business Name, Address) 5440 W GLADES RD, BOCA RATON, FL 33431																	
Date of Arrest 07/30/2017		Time of Arrest 17:42		Booking Date 07/30/2017		Booking Time 17:52		Jail Date 07/30/2017		Jail Time 17:42											
Name (Last, First, Middle) OBERG, PETER RICHARD				Alias: Alias: (Name, DOB, Soc. Sec. #, Etc.)																	
Race W - White B - Black I - American Indian O - Oriental/Asian		Sex W M		Date of Birth 02/17/1975		Height 5'06		Weight 185		Eye Color BROWN											
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) TATT L NECK / CHINESE SYMBOL; TATTR ARM / TRIBAL; TATT L										Marital Status S											
Religion										Complexion BROWN											
Build M																					
Indication of: Alcohol Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unknown																					
Drug Influence Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown																					
Residence Type: 1. City 2. County 3. Florida 4. Out of State																					
Address Source: 1. City 2. County 3. Florida 4. Out of State																					
Business Address (Name, Street) FOSTER HOUSE,		(City)		(State)		(Zip)		Phone (561) 255-3573		Occupation DEFENDANT											
D/L Number, State 0162676750570 / FL		Soc. Sec. Number		INS Number		Place of Birth (City, State) MANCHESTER, CT,		Citizenship U.S.													
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											
<input type="checkbox"/> Parent <input type="checkbox"/> Other: _____		Name (Last, First, Middle) (Signature)								Residence Phone											
<input type="checkbox"/> Legal Custodian		(City)		(State)		(Zip)				Business Phone											
Notified by: (Name)						Date		Time		JUVENILE DISPOSITION											
Released To: (Name)		Relationship				Date		Time		1. Handled/Processed within Department and Released 2. TOT JAC 3. Incarcerated											
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.						School Attended				Grade											
<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									
Drug Activity N. N/A B. Buy P. Possess		S. Sell D. Deliver T. Traffic		R. Smuggle E. Use		K. Disperse/ 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. Synthetic		U. Unknown Z. Other	
Charge Description DUI												Statute Violation Number 316.193(1)		Violation of ORD #							
Drug Activity N		Drug Type		Amount / Unit /		Offense # 2017-010726		Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Warrant / Capias Number						Bond			
Charge Description												Statute Violation Number		Violation of ORD #							
Drug Activity		Drug Type		Amount / Unit /		Offense #		Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Warrant / Capias Number						Bond			
Charge Description												Statute Violation Number		Violation of ORD #							
Drug Activity		Drug Type		Amount / Unit /		Offense #		Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Warrant / Capias Number						Bond			
Health / Apparent Physical Condition of Defendant GOOD												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 <input type="checkbox"/> Posted Bond <input type="checkbox"/> South County Mental Health												PROPERTY - Received By GENDEN		Released By GENDEN		Released To TOT COUNTY					
Transported By												Date Transported		Time Transported		Other					
INSTRUCTION NO. 1 - Mandatory appearance in court <input checked="" type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.												Location (Court, Room) South County 200 W Atlantic Ave Delray Beach, FL 33444		Court Date and Time 08/28/2017 08:30:00							
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) Peter Oberg												Date Signed									
HOLD for Other Agency						Signature of Arresting Officer						Name Verification (Printed by Arrestee)									
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal						<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other						<input type="checkbox"/> (PRINT)									
Name of Arresting Officer (Print) GENDEN, ERIC B.						I.D. # 680															
Intake Deputy D/S B. SHATARA #7623						Transporting Officer 7a1 B.R.P.D.						I.D. # Agency JUVE									
												Witness here if subject signed with an "X".									

No
Photo
Available

Signature of Detention for Juvenile and Parent/Custodian)

Date Signed

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) GENDEN, ERIC B.	I.D. # 680	(PRINT) <i>JUL 30 2010 2001</i>
Intake Deputy D/S B. SHATARA #7623		Transporting Officer <i>[Signature]</i>	I.D. # 7a	Agency BRPD
Witness here if subject signed with an "X".				

Horne 791

SCANNED
AUG 02 2017

A D M I N	BTS Number		PROBABLE CAUSE AFFIDAVIT			1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	JUVENILE	
	Agency ORI Number FL 0500200	Agency Name BOCA RATON POLICE DEPARTMENT	Agency Report Number 3 2 2017-010726		Special Notes:					
D E F	Charge Type: Check as many as apply. <input type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input checked="" type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other		Name (Last, First, Middle) OBERG, PETER RICHARD		Alias		Race W	Sex M	Date of Birth 02/17/1975	
C H A R G E S	Charge Description 316.193(1) DUI		Charge Description							
V I C T I M	Charge Description		Charge Description							
Victim's Name (Last, First, Middle) STATE OF FLORIDA,				Race	Sex	Date of Birth				
Local Address (Street, Apt. Number) 100 NW 2ND AVE, BOCA RATON, FL 33432		(City)	(State)	(Zip)	Phone	(561) -			Address Source	
Business Address (Name, Street)		(City)	(State)	(Zip)	Phone	(56) -			Occupation	
<p>The undersigned certifies and swears that he/she has just and resonable grounds to believe, and does believe that the above named Defendant committed the following violation of law. The Person taken into custody...</p> <p><input checked="" type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> confessed to _____ admitting to the below facts.</p> <p><input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person committ the below acts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the <u>30</u> day of <u>July</u> <u>2017</u> at <u>17:04</u> (Specifically include facts constituting cause for arrest.)</p>										
<p>On 07/30/2017 at 1704 hours, I was in the area of 5440 W Glades Rd, Boca Raton, FL in reference to a possible impaired driver. I observed W/M Peter Oberg falling off his 2003 Harley Davidson motorcycle bearing FL Tag 3658RC in the west parking lot. The bike appeared to have fallen on Peter and he was struggling to pick it up. As I entered the west parking lot entrance I observed store employee W/F Genesis Ocasio exit the store to flag down Officer Ruiz and I. Officer Ruiz was in the north part of the lot and I requested him to back me up as I made a consentual encounter with Peter who was in actual physical control of the motorcycle and sitting on it. The motorcycle was not running and it appeared his fiancée W/F Dara Kane was trying to stop him from driving away. Additionally, W/F Genesis Ocasio (BP store employee) advised in a sworn written witness statement that Peter came in the store and she said hello but he did not answer. She went outside to help someone else and Peter was trying to drive away on his bike and fell after 3 feet. The bike fell on Peter and another man went to help Peter.</p> <p>I asked Peter if he had any medical problems and he said he had a knee injury a while back. Peter advised he takes Lithium, Busbar, Klonopin, Haloperidol, Seroquel and Topomax. It should be noted he originally told me he does not take any medications. Peter appeared lethargic, uncoordinated, disoriented, sluggish and he displayed a drunk like behavior. I requested BRFD on scene to rule out any immediate medical issues and they advised Peter was medically okay.</p> <p>At this point I asked Peter if he would conduct some roadside exercises and he said "yes." Peter was uneasy on his feet and he was slow to get off his motorcycle. First, Peter conducted the Horizontal Gaze Nystagmus Exercise and he advised he understood my instructions. He displayed a lack of smooth pursuit in the right and left eye. He also displayed a distinct nystagmus at maximum deviation and an onset of nystagmus prior to forty five degrees in the right and left eyes. Lastly, Peter's right left eye did not converge normally.</p>										
ADMINISTRATIVE	SWORN AND SUBSCRIBED BEFORE ME <i>9/2</i>									
	<u>HARDING, BRANDON BLAZE</u> NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)		SIGNATURE OF ARRESTING / INVESTIGATING OFFICER <i>9/2</i>							
	<u>07/30/2017</u> DATE		<u>GENDEN, ERIC BRADLEY (680)</u> NAME OF OFFICER (PLEASE PRINT)							
			<u>07/30/2017</u> DATE							
			PAGE 1 OF 2							

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS
SCAN

P. I. O.

AUG 02 2017

AGENCY ORI Number	PROBABLE CAUSE AFFIDAVIT SUPPLEMENT			1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	JUVENILE
FL 0500200	BOCA RATON POLICE DEPARTMENT			Agency Report Number 3 2 2017-010726		Special Notes:	
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				
Name (Last, First, Middle)	Alias			Race	Sex	Date of Birth	
OBERT, PETER RICHARD				W	M	02/17/1975	

Next, I asked Peter to conduct the Walk and Turn exercise. Peter advised he understood my instructions. Peter did not remain in the starting position and he took too many steps. I had to remind Peter to turn around. Peter stepped off the line and he did not count out loud. Peter was swaying, shaking and he was having difficulties balancing on the line. Peter did not use heel to toe steps on all of his steps.

Next, I asked Peter to conduct the one leg stand exercise and he advised he understood my instructions. Peter did not count out loud and he dropped his foot on the ground. Peter was swaying and shaking during this exercise.

Lastly, I asked Peter to conduct the finger to nose exercise and he advised he understood my instructions. Peter was extremely slow moving his finger to his nose and his finger was shaking. The sequence I requested and the results are: Left - Slow; Right - touched his mustache; Left- Inside nose; Right- Tip of nose; Right - Tip of nose; Left - Inside nose.

Based on my training (DRE #028046), experience and the totality of circumstances, Peter was placed under arrest for driving under the influence. I transported him to the Boca Raton Police Department and Officer Frenz conducted the breath tech operation. Peter provided two breath samples of .000 and .000. Next, Peter provided a urine sample and it was sent for analysis to the Palm Beach County Sheriff's Office Toxicologist on 07/30/2017. I asked Peter if he would cooperate with a drug influence evaluation and he said "yes." It is my opinion that Peter was under the influence of CNS depressants. See my drug influence evaluation report for further information.

Peter was transported to Palm Beach County Jail and his motorcycle was released to his fiancée Dara Kane. The video of the incident was downloaded into evidence on 07/30/2017. A copy of the sworn statement by Genesis and the Urine sample were submitted into evidence on 07/30/2017.

Per Florida State Statute 316.193(1), Peter did drive or was in actual physical control of a vehicle, while under the influence of alcoholic beverages/ chemical substances and was affected to the extent that his normal faculties were impaired.

SWORN AND SUBSCRIBED BEFORE ME

HARDING, BRANDON BLAZE

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

07/30/2017

DATE

SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

GENDEN, ERIC BRADLEY (680)

NAME OF OFFICER (PLEASE PRINT)

07/30/2017

DATE

PAGE
2 OF 2

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STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.

AUG 02 2017

2017-010726

1742 - 10-15

Obs 1802

D. U. I. INFLUENCE REPORT

NOT A COPY

Boca Raton Police Services Department
100 Northwest Second Avenue
Boca Raton, Florida 33432

SCANNED
AUG 02 2017

WITNESS LIST

ARRESTING OFFICER: GendenName: Genden Phone # Home _____ Work 561-338-1234Address: 100 NW 2nd Ave Boca RatonCan testify to: InvestigationName: ofc Ruiz, Lecarosale Phone # Home _____ Work _____Address: Same as aboveCan testify to: Backup

Name: _____ Phone # Home _____ Work _____

Address: _____

Can testify to: _____

Name: _____ Phone # Home _____ Work _____

Address: _____

Can testify to: _____

Name: _____ Phone # Home _____ Work _____

Address: _____

Can testify to: _____

Name: _____ Phone # Home _____ Work _____

Address: _____

Can testify to: _____

Name: _____ Phone # Home _____ Work _____

Address: _____

Can testify to: _____

BOCA RATON POLICE DEPARTMENT

Agency Case# 2017-010726

PART II D.U.I. REPORT
To be filled out at testing facility

I. INTRODUCTION

(Instrument Operator faces video camera)

A. The day is: Sunday, July, 30, 2017
(day) (month) (date) (year)

B. The time is now approximately 1821 AM/PM

C. The following is in reference to case number 2017-010726

D. Present at this time is Gordon of the Boca Raton Police
Department. (Officer's Name)

E. Officer Gordon, Have you arrested Peter Oberg
In violation of Florida State Statute 316.193? (Defendant's name)

F. Did this violation occur within the City of Boca Raton, Palm Beach County, Florida?

G. Mr./Mrs./Ms. Oberg, I am required to
Inform you these proceedings are being video taped.

Operator Note: Video tape breath request, breath sample, and interview.

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AUG 02 2017

BOCA RATON POLICE DEPARTMENT

Agency Case # 2017-016726

H. AT THIS TIME THE ARRESTING OFFICER WILL REQUEST A BREATH SAMPLE.

Note: Read only the paragraph applicable to the type of test you are requesting.

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

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

C. I am now requesting that you submit to a lawful test of your **BLOOD** for the purpose of determining its alcohol content and the presence of chemical or controlled substances.

IMPLIED CONSENT WARNINGS

Note: Read only if the subject does not comply with your request.

2. 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 signature: _____

ALSO READ FOR CDL HOLDERS

IN ADDITION, your refusal to submit will result in the loss of your commercial privileges for one year from today. If this is your SECOND REFUSAL, you will be permanently disqualified from operating a commercial motor vehicle.

After reading the implied consent warning, the arresting officer must request a breath sample again.

(IF REFUSAL THEN)

At this time Mr/Mrs/Ms. _____ has refused to submit to a breath test.

The date is _____ (Month) _____ (Day) _____ (Year) and the time _____ AM/PM

A refusal form will be completed by the arresting officer.

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AUG 02 2007

BOCA RATON POLICE DEPARTMENT
TESTING FACILITY TASK REPORT

SUBJECT: Oberg, Peter

CASE #: 2017-010726 DATE 7/30/17

BREATH TESTS RESULTS .000 / .000

1) TIME 6:24 AM/PM 2) TIME 6:27 AM/PM

3) TIME _____ AM/PM 4) TIME _____ AM/PM

BREATH OPERATOR: Frenz

MAINTENANCE TECHNICIAN: Pare

TESTING OFFICER'S OBSERVATIONS

SPEECH: slow

ATTITUDE: cooperative

CLOTHING: Red movie shirt, blue jeans

MEDICAL CONDITION: none

OTHER: _____

COMMENTS: walking slowly, white coming in, lethargic

Lithium, topamine, quinatene, busbore, topamine

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BOCA RATON POLICE DEPARTMENT

Agency Case # 2017-016716 634 wineADULT CONSTITUTIONAL WARNINGS
(Juvenile warning on reverse side)

"I am required to warn you before you make any statement that you have the following rights":

- 1) You have the right to remain silent and not answer any questions.
- 2) Any statement you make must be freely and voluntarily given.
- 3) You have the right to the presence of a lawyer and representation 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 statement 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 be and will be used against you in a court of law.

DO YOU UNDERSTAND THESE RIGHTS AS I HAVE READ THEM TO YOU AND DO YOU WISH TO SPEAK TO ME?

(X)

QUESTIONS AND ANSWERS

Were you operating a motor vehicle at the time of the accident/stop? Yes

Where were you going? out of gas station

What street or highway were you on? Glades/Briggs

Direction of travel? North

Where did you start driving from? Cash House circle east

What City (County) were you stopped in? Boca Raton, FL

What time did you start? Don't know AM/PM What time is it now Don't know

What is today's date? 28th 2017 What day of the week is it? Sunday SCANNED
AUG 11

When did you last eat? yesterday night What did you eat? spaghetti hamburger
 What have you been doing the past three hours prior to this stop/accident? getting gas figuring out
bike
route
 How much do you weigh? 184 Have you been drinking? 10 What were you drinking? water, coke
 How much? 1 Where? gas station With whom were you drinking? Brian, Scott & Dr
 When did you have your first drink? that day AM/PM AM When did you stop drinking? AM/PM Minut after
 How did you consume your last two drinks? Gulps

Are you under the influence of alcohol now? Yes No

Can you feel the affects of alcohol? Yes No

Have you consumed alcohol since the accident? Yes No

Can you feel the affects of alcohol? Yes No

Have you consumed alcohol since the accident? Yes No How much? What?

Where?

What line of work are you in? Substance abuse + mental health

When did you last work? Friday

Do you have any physical defects or injuries? Yes No If yes, explain:

Are you sick or injured? Yes No If yes explain:

Do you limp? no Did you get a bump on the head? no

Were you involved in an accident today? no

Have you taken any drugs or smoked marijuana today? no

What? When?

Have you seen a doctor or dentist today? no Who?

Are you taking any prescription medicines? Yes No What? When?

Do you have: Epilepsy? Yes No

Inner ear trouble? Yes No

Glass Eye? Yes No

Ear Infection? Yes No

False Teeth? Yes No

Diabetes? Yes No

All at
night

tramox
Huperdo/
Lysonopam
Lithium
BenzAR

Any eye problems not correctable by glasses or contact lenses? no

Do you take insulin? Yes No If yes, when was your last injection?

Have you ever had a driver's license in any other state? no

I am now ending this videotaping. The time now is approximately 6:43 AM/PM

SCANNED

The date is: July (month) 30 (day) 2017 (year) AUG 11