0504223 1961 ~~7088~~

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

Juvenile: N

ADMINISTRATIVE

OBTS Number:

Agency ORI Number: FLO 5 0 2 6 0 0

Agency Name: PALM BEACH GARDENS POLICE DEPT.

Agency Report Number (N.T.A.'s only): 7 8 - 1 9 - 0 0 0 0 1 3

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

If Weapon Seized — Enter Type:

Multiple Clearance Indicator:

Location of Arrest (Including Name of Business): Central Blvd / Grand Flora

Location of Offense (Business Name, Address): Central Blvd / Grand Flora

Date of arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
01/02/19	04:41					Koff's Towing

DEFENDANT

Name (Last, First, Middle): Dickson, Philip Andrew

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

Race (W - White, B - Black, I - American Indian, O - Oriental)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	M	12/31/76	6-00	150	Green	Brown	light	Sm

Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description):

Marital Status: Single — Religion: Christ — Indication of: Alcohol Influence ☐ Y ☐ N ☐ Unk. / Drug Influence ☐ Y ☐ N ☑ Unk.

Local Address (Street, Apt. Number) (City) (State) (Zip): 4029 Fairway Trail Palm Beach Gardens, FL 33418 — Phone: (561) 601-9586 — Residence Type: 1. City 2. County 3. Florida 4. Out of State: 1

Permanent Address (Street, Apt. Number) (City) (State) (Zip): left hand (Family in numbers) right (Rose) — Phone: ( ) — Address Source: FL DL

Business Address (Name, Street) (City) (State) (Zip): — Phone: ( ) — Occupation: Bartender

DL Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
D250461764710	[redacted]		Tacoma, WA	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
				☐ 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 DCF 3. Incarcerated

Released To: (Name) — Relationship — Date — Time

The above address was provided by ☐ defendant and / or ☐ defendant's parent. The child and / or parent was told to keep the Juvenile Court Clerk's Office (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, F. Heroin, H. Hallucinogen, M. Marijuana, O. Opium/Deriv., P. Paraphernalia/Equipment, S. Synthetic, U. Unknown, Z. Other

CHARGE

Charge Description	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
DUI W/ Property Damage		☐ Y ☑ N	316.193(1)(c)(1)	OR

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

CHARGE

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

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant / Capias Number	Bond
					20

CHARGE

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

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

☐ Instruction No. 1 Mandatory Appearance in Court

☐ Instruction No. 2 You need not appear in Court but must comply with Instructions on Reverse Side.

Location (Court, Room Number, Address):

Court Date and Time: Month Day Year Time A.M. P.M.

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

ADMIN.

HOLD for other Agency — Name:

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other:

Intake Deputy — I.D. # — Pouch #

Signature of Arresting Officer: X [signature] 498

Name of Arresting Officer (Print) — I.D. #: D Coslov 498

Transporting Officer — I.D. # — Agency: [signature] 498 PBG

Name Verification (Printed by Arrestee) (PRINT)

Witness here if subject signed with an "X"

PAGE ___ OF ___

SCANNED JAN – 4 2019

DISTRIBUTION: WHITE - COURT COPY GREEN - STATE ATTORNEY YELLOW - AGENCY PINK - JAIL GOLD - DEFENDANT

PBGPD FORM-023

Coslov

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D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 2nd DAY OF January 20 18 AT 0327 AM PM

SUBJECT: Philip Dickson CASE NUMBER: 19-000013

AGENCY: PALM BEACH GARDENS POLICE DEPT. ARRESTING OFFICER: David Coslay #488

PERSONAL CONTACT

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

I responded to a traffic crash located at Grandiflora Road and Central Boulevard. Upon arrival the vehicle made contact with a tree, and the defendant was the only person on scene. The defendant was the owner of the vehicle. He stated he was not the driver, but his story was inconsistent. Based on physical evidence observed by Officer Witt #492 who has completed Traffic Homicide Reconstruction courses he was able to prove that the defendant was in fact the driver.

OBSERVATION OF DRIVER:

The defendant was unable to stand without loosing his balance or almost falling. His eyes were bloodshot, watery, and glassy. He smelled of an unknown alcoholic beverage. As the male spoke the odor became more prevelant. The defendants speech was slow and deliberate. He also slurred words as he spoke complete sentences.

DRIVER'S STATEMENTS:

The driver stated he consumed alcohol but did not know how much. He says he did not drive tonight. He stated he had no injuries. He said he consumed no drugs or prescription medication.

ODORS:

Alcohol

GENERAL OBSERVATIONS

SPEECH: Slow, deliberate, slurred

ATTITUDE: Indifferent

CLOTHING: Jacket, and Shorts

MEDICAL/OTHER: Stated no medical issues, and he felt ok after his crash

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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 _____ day of _____ 20 _____ by _____

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

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

SUBJECT: Philip Dickson CASE NUMBER: 19-000013

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:

The defendant moved his head while performing this exercise.

WALK & TURN:

I explained and demonstrated the exercise to the defendant. He stated he understood. While explaining the exercise he could not keep his balance while listening to instructions, and attempted to start too soon. Once the exercise began he walked slowly to steady himself, he missed heel to toe, he stepped off the line, he used his arms for balance. He attempted the first nine steps and completed 5 before restarting. He then took nine steps loosing his balance and turning incorrectly.

I observed 8 out of 8 indicators of impairment.

ONE LEG STAND:

I explained and demonstrated the exercise to the defendant. He stated he understood. Once the exercise began the defendant swayed while balancing, he used his arms for balance, he was hopping, and he put his foot down.

I observed 4 out of 4 indicators of impairment.

FINGER TO NOSE:

Not Standardized

ROMBERG/ALPHABET:

Not Standardized

BREATH TEST RESULTS: .219, .223

STATE OF FLORIDA
COUNTY OF PALM BEACH

_____
(Signature of Arresting/Investigative Officer)

The foregoing instrument was notarized or sworn before me this _____ day of _____, 20_____ by _____

who is personally known to me and/or produced identification. Type of identification produced _____

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

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TESTING FACILITY TASK REPORT

AGENCY: PBGPD-COSLAY

SUBJECT: DICKSON, PHILIP A

CASE NUMBER: 19-021372

DATE: Jan 2, 2019

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 0540

ENDING TIME: 0552

BREATH TESTS RESULTS: 1) .219 TIME 0544 A.M. ☒ P.M. ☐ 2) .223 TIME 0547 A.M. ☒ P.M. ☐

3) XX TIME XX A.M. ☐ P.M. ☐ 4) XX TIME XX A.M. ☐ P.M. ☐

BREATH OPERATOR: J Biggs# 7607

MAINTENANCE TECHNICAN: D/S J Karklecke #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED, SHORT

ATTITUDE: COOPERATIVE

CLOTHING: BLACK SHIRT, GREEN SHORTS

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

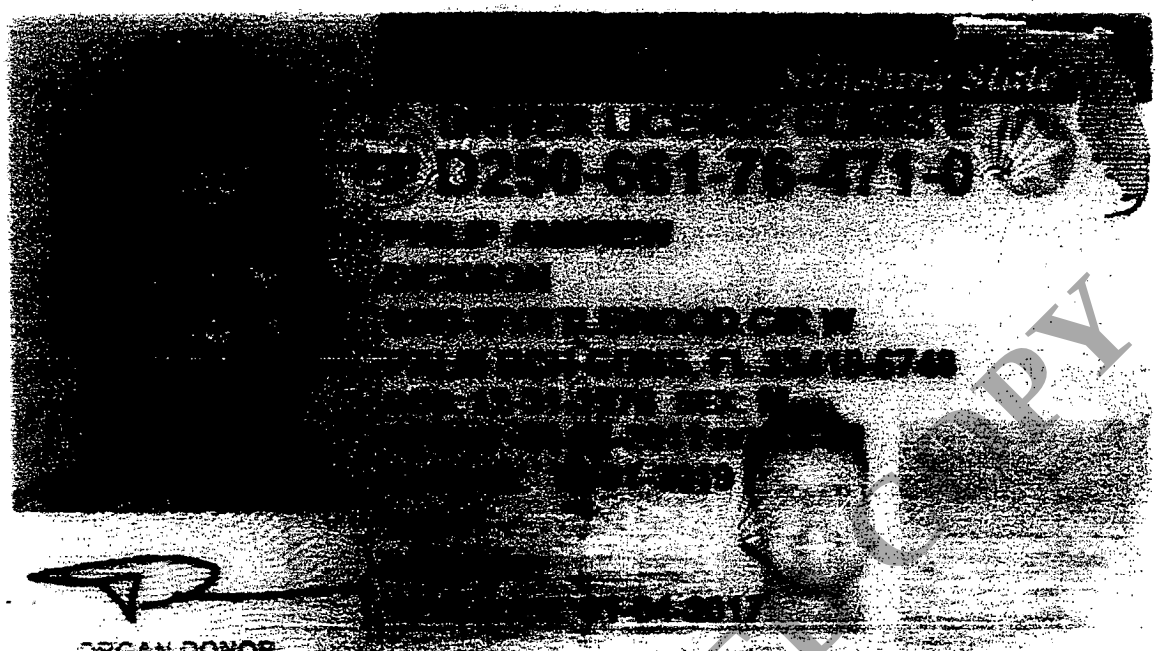
OTHER:

EYES GLASSY, RED
ODOR OF AN UNKNOWN ALCOHOLIC BEVERAGE ON SUBJECT

COMMENTS:

ARRESTING OFFICER CONDUCTED THE 20 MINUTE OBSERVATION BEGINNING AT 0520
SUBJECT ADVISED HE WOULD SUBMIT TO THE BREATH TEST
SUBJECT WAS GIVEN THE INSTUCTIONS FOR THE TEST
SUBJECT COMPLETED BOTH SAMPLES SUCCESSFULLY
RESULTS WERE GIVEN TO THE SUBJECT
MIRANDA WAS READ
SUBJECT REFUSED QUESTIONS AFTER ANSWERING 2 OF THEM

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ORGAN DONOR

SAFE DRIVER

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

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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:	

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REVIEW COMPLETED BY

Booking Number: 2019000108	**Date:** 1/2/2019
	Specialist Name/ID: J. Beck/9007