0505193

ARREST / NOTICE TO APPEAR
Juvenile Referral Report

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

LAKD

Juvenile: 1 N

OBTS Number

ADMINISTRATIVE

Agency ORI Number	Agency Name	Agency Report Number (N.T.A.'s only)
FLO 500000	PALM BEACH COUNTY SHERIFF'S OFFICE	06- 19-034807

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

Multiple Clearance Indicator

Location of Arrest (Including Name of Business): 3590 DONALD ROSS ROAD PALM BEACH GARDENS FL 33404

Location of Offense (Business Name, Address): 3590 DONALD ROSS ROAD, PALM BEACH GARDENS FL 33404

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
02/08/2019	08:00AM					

DEFENDANT

Name (Last, First, Middle): **Tamm, Raven, Cassandra**

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	F	11/21/1985	5'05	132	GREN	BRN	LIGHT	SLIM

Scars, Marks, Tatoos, Unique Physcal Features (Location, Type, Description)

Marital Status: Single | Religion: BAPTIST | Indication of: Alcohol Influence Y ☐ N ☒ Unk. ☐ ; Drug Influence Y ☐ N ☒ Unk. ☐

Local Address (Street, Apt. Number) (City) (State) (Zip): 921 Sanctuary Cove Dr, North Palm Beach, FL 33410 | Phone: (512) 8103363 | Residence Type: 1. City 2. County 3. Florida 4. Out of State

Permanent Address (Street, Apt. Number) (City) (State) (Zip): , | Phone: ( ) | Address Source: FLDL

Business Address (Name, Street) (City) (State) (Zip): | Phone: ( ) | Occupation: BAR MANAGER

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
T500723859210, FL	[redacted]		AUSTIN TX	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:

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	Counts	Domestic Violence	Statute Violation Number	Violation of ORD #
DUI	1	☐Y ☒N	316.1931	

Drug Activity	Drug Type	Amount / Unit	Offense #	Warrant I Capias Number	Bond
N	N		19-034807		

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

Received WB FEB 12 2019

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

Location (Court, Room Number, Address): North County 3188 PGA Blvd

Court Date and Time: Month 3 Day 13 Year 2019 Time 1:30 AM

2019 FEB -9 PM 2:27

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: 02/08/2019

ADMIN

HOLD for other Agency Name:

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other:

Intake Deputy I.D. # Pouch #

Signature of Arresting Officer: X

Name of Arresting Officer (Print): CLEMENTI I.D. #: 8499

Transporting Officer: CLEMENTI ID #: 8499 Agency: PBSO

Name Verification (Printed by Arrestee) (PRINT)

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)

PBSO #148 REV. 8/97

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2019CT2869

PROBABLE CAUSE AFFIDAVIT

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

ADMIN

Agency ORI Number: FLO 500000 | Agency Name: PALM BEACH COUNTY SHERIFF'S OFFICE | Agency Report Number: 06- 19-034807

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

Special Notes:

DEF

Name (Last, First, Middle): Tamm, Raven, Cassandra | Alias | Race: W | Sex: F | Date of Birth: 11/21/1985

CHARGES

Charge Description: DUI 316.1931

Charge Description:

Charge Description:

Charge Description:

VICTIM

Victim's Name (Last, First, Middle): Hurtgen, David, Richard | Race: W | Sex: M | Date of Birth: 08/17/1983

Local Address (Street, Apt. Number) (City) (State) (zip): 92 Fairview W, Tequesta, FL 33469 A | Phone: ( ) | Address Source: FLDL

Business Address (Name, Street) (City) (State) (zip): | Phone: ( ) | Occupation: FP&L

PROBABLE CAUSE STATEMENT

The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe that the above named Defendant committed the following violation of law.

The Person taken into custody

- ☐ committed the below acts in my presence.
- ☐ confessed to _____ admitting to the below facts.
- ☐ was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.
- ☒ was found to have commited the below acts, resulting from my (described) investigation.

On the 8 day of FEB 20 19 at 08:00 ☒ A.M. ☐ P.M. (Specifically include facts constituting cause for arrest.)

On the above date I was dispatched to an accident around 3590 Donald Ross road in unincorporated Palm Beach county. During the course of my accident investigation it was determined that Raven Tamm did strike the back of an FP&L truck with its amber lights on. The truck driven by David Hurtgen did have damage to the rear bumper and the driver side tire was damaged to the point that the truck had to be towed. Tamm's car had both air bags deploy and during the accident investigation she continued to state that the truck hit her, by the evidence this was not possible. I noticed the smell of an unknown alcoholic beverage from Tamm and at that time she was sitting on the sidewalk. I asked her what she did for a living and she stated that she was a bar tenter. I then requested that she get me her FLDL and car registration and proof of insurance as she got up she was unable to steady herself and I asked her if she was injured after the airbag deployment and she stated no that she is fine, I asked her on video if she needed fire rescue to come and just check her out and stated no that she is fine. Tamm had to be told several times that she had given me her insurance and if she could please find me her car registration, she stated that her car is leagal and could I just look it up. I then asked her for her phone number and she gave the the wrong area code and the corrected it and gave me the correct phone number.

Fire rescue responded after Hurtgen was complaining of pain, they also check on Tamm and she refused to be transported.

After I was done with my accident investigation I then asked Tamm to come to my car that I needed to continue my investigation. The smell of an unknown alcoholic beverage was still very strong. I asked her if she had been drinking this evening and she stated that she is a bar tenter and yes she had a drink. I asked her if she has any medical contentions such as epilepsy or diabetes and she stated no. She did state that she did get and elbow to her right eye and that she had to wear and eye patch for 5 days and it just came off yesterday. I asked if she was on any prescription medication and she stated that she has taken over the counter medications and 800 mgs of Ibuprofen. I then stated that my investigation has now changed from an accident to a DUI. I asked her if she will stand with her feet together and hands down by her side for me to determine to go further. This was meet with some comments as seen on the video and as I observied her reactions I was able to determine based on my knowledge, training and experience that she needed to be put through road side tasks. I then asked Tamm three times if she would do road side tasks and she stated no that she is not drunk but she will do a blood test on the road and she will do a blow test on the road way. Each time I explained that these are not done on the road way and each time she refused to do the tasks. At that time I placed her in handcuffs, double locked and checked for tightness and placed her in the back of my marked PBSO patrol car. I contacted dispatch and stated that I have a white female in custody and to call the BAT. Tamm was trasported to the BAT for testing.

The 20 minute observation was done and then Tamm was taken into the testing room. Tamm did submit to the breath and blew .276.

Tamm was taken walked over to the jail without incident.

ADMINISTRATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH

D/S C. Clementi #8499 CLEMENTI
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 8th day of FEB 20 19 by D/S S. CLEMENTI

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

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

Notary Public State of Florida
Gary J Parent
My Commission GG 085486
Expires 06/21/2021

PAGE 1 OF 1

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PBSO #0004 REV. 04/01

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 8 DAY OF FEB 20 19, AT 08:00 ✓ AM PM

SUBJECT: Tamm, Raven, Cassandra CASE NUMBER: 19-034807

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: CLEMENTI

PERSONAL CONTACT

DRIVING PATTERN: ACTUAL PHYSICAL CONTROL (PHYSICAL EVIDENCE OR STATEMENTS PUTTING DEF. BEHIND WHEEL OF VEHICLE)
ACCIDENT NO DRIVING PATTERN

OBSERVATION OF DRIVER:
EMOTIONAL AND STATED OVER AND OVER THAT THE TRUCK THAT WAS STOPPED HIT HER

DRIVER'S STATEMENTS:
THAT SHE WILL BLOW AND WE CAN TAKE HER BLOOD ON THE SIDE OF THE ROAD AND REFUSED TO DO ROAD SIDE TASK

ODORS:
STRONG SMELL OF UNKNOWN ALCHOLO

GENERAL OBSERVATIONS

SPEECH: **SLURED AND HEAVY**

ATTITUDE: **PLEASE FORGIVE HER**

CLOTHING: **MESSY**

MEDICAL/OTHER:

NOT A CERTIFIED COPY

STATE OF FLORIDA
COUNTY OF PALM BEACH

CLEMENTI Cruti #8499
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 8th day of FEB 20 19 by CLEMENTI

(Print name of Arresting/Investigative Officer), who is personally known to me [illegible] KNOWN

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

Notary Public State of Florida
Gary J Parent
My Commission GG 085486
Expires 06/21/2021

SUBJECT: Tamm, Raven, Cassandra CASE NUMBER 19-034807

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

Other Observations:

WALK & TURN:
REFUSED

ONE LEG STAND:
REFUSED

ROMBERG ALPHABET:
REFUSED

ROMBERG ALPHABET:
REFUSED

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BREATH TEST RESULTS: 1) .276 | 2) .254 | 3) .249 | 4)

STATE OF FLORIDA
COUNTY OF PALM BEACH

CLEMENTI Clementi #8499
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 8th day of FEB 2019 by CLEMENTI

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

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

Notary Public State of Florida
Gary J Parent
My Commission GG 085486
Expires 06/21/2021

WITNESS LIST

CASE NUMBER: 19-034807

ARRESTING OFFICER: CLEMENTI

ADDRESS: 3436 GUN CLUB ROAD

PHONE NUMBERS (HOME): _____ (WORK) 688-3400

CAN TESTIFY TO: FACTS OF THE CASE

NAME: DAVID HURGA

ADDRESS: 91 92 FAIRVIEW W TEQUESTA

PHONE NUMBERS (HOME) 954-675-1802 (WORK) _____

CAN TESTIFY TO: THE ACCIDENT

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) 0 (WORK) 0

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

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CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

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TESTING FACILITY TASK REPORT

AGENCY: PBSO DIS Cleveti #2499

SUBJECT: [redacted] CASE NUMBER: 19-034807

DATE: 02-02-19 VIDEO TAPE NUMBER: N/A

BEGINNING TIME: 0254 hrs ENDING TIME: 0419 hrs

BREATH TESTS RESULTS: 1) .274 TIME 0309 (A.M./P.M.) 2) .249 TIME 0406 (A.M./P.M.)

3) .254 TIME 0506 A.M./P.M. 4) _____ TIME _____ A.M./P.M.

BREATH OPERATOR: J. O'Neal #6212

MAINTENANCE TECHNICIAN: Cpl. Parker #6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: Slurred

ATTITUDE: Calm, Cooperative Upset because of DUI

CLOTHING: Jacket - Black Shirt - Red Shoes - Tennis shoes

MEDICAL CONDITIONS: Just had surgery on right eye

MEDICATIONS: Several meds

OTHER: Eyes: Red, Watery from surgery

Strong odor of unknown alcoholic beverage.

COMMENTS: 20 min observation done by AIO Cleveti #2499

AIO requested the breath test.

D submitted to the breath request.

D completed the test correctly.

CW read as Correct.

WTF conducted

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SUBJECT: Tamm, Russ C. CASE NUMBER: 14-029309

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) Refused to Sign

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SUBJECT: [redacted] CASE NUMBER: 19-034807

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? Home WHERE DID YOU START? Work

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: _____

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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: 2019004483	**Date:** 02/09/2019
	Specialist Name/ID: AM/31562