

17mm9489

OBTS Number		ARREST / NOTICE TO APPEAR Juvenile Referral Report		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1		Juvenile N	
Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number (N.T.A.'s only) 06-17-108337							
Charge Type: Check as many as apply: <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input checked="" type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Weapon Seized / Type 2 1. Yes 2. No		Multiple Clearance Indicator							
Location of Arrest (Including Name of Business) 50th St. S/S State Road 7 Wellington, FL 33414				Location of Offense (Business Name, Address)							
Date of Arrest 07/29/2017		Time of Arrest 05:03		Booking Date		Booking Time		Jail Date		Jail Time	
Name (Last, First, Middle) Klosinski		Richard Daniel		Alias (Name, DOB, Soc. Sec. #, Etc.) S.S #							
Race W - White I - American Indian B - Black O - Oriental/Asian W		Sex M		Date of Birth 09/22/1994		Height 5'06"		Weight 165		Eye Color Brown	
Hair Color Brown		Complexion Med		Build Med							
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) Misc tattoos left arm, Misc tattoos right arm				Marital Status Single		Religion NONE		Indication of: Alcohol Influence Drug Influence <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Unk.			
Local Address (Street, Apt. Number) 10666 Greenwich Lane				(City) Wellington FL 33414		(State) FL		(Zip) 33414		Phone (845) 493-7520	
Permanent Address (Street, Apt. Number)				(City)		(State)		(Zip)		Residence Type: 1. City 2. County 3. Florida 4. Out of State 1	
Business Address (Name, Street)				(City)		(State)		(Zip)		Occupation Retail Sales	
D/L Number, State Y3452138, CA		Soc. Sec. Number		INS Number		Place of Birth (City, State) Riverside, CA		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"/> Legal Custodian <input type="checkbox"/> Other:		Address (Street, Apt. Number)		(City)		(State)		(Zip)		Residence 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 <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 (Phone 355-2526) informed of any change of address. <input type="checkbox"/> Yes, by: (Name) <input type="checkbox"/> No: (Reason)				School Attended		Grade					
Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property		Value of Property							
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 Description DUI		Counts 1		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number 316.193 (1)		Violation of ORD #			
Drug Activity N		Drug Type N		Amount / Unit N/A		Offense # 17-108337		Warrant / Capias Number (2)		Bond	
Charge Description Possession of Cannabis less than 20 grams		Counts 1		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number 893.13 (6)(B)		Violation of ORD #			
Drug Activity P		Drug Type M		Amount / Unit UNDER 20 GRAMS		Offense # 17-108337		Warrant / Capias Number		Bond	
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number		Violation of ORD #			
Drug Activity		Drug Type		Amount / Unit		Offense #		Warrant / Capias Number		Bond	
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number		Violation of ORD #			
Drug Activity		Drug Type		Amount / Unit		Offense #		Warrant / Capias Number		Bond	
Charge Description		Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Statute Violation Number		Violation of ORD #			
Drug Activity		Drug Type		Amount / Unit		Offense #		Warrant / Capias Number		Bond	
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 AUGUST Day 23RD Year 2017 Time 08:30 AM <input checked="" type="checkbox"/> PM <input type="checkbox"/>											
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. 07/29/2017 Signature of Defendant (or Juvenile and Parent / Custodian) _____ Date Signed _____											
HOLD for other Agency Name:		Signature of Arresting Officer		Name Verification (Printed by Arrestee)							
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal <input type="checkbox"/> Other:		Name of Arresting Officer (Print) D/S St. Hilaire #15070		I.D. #		(PRINT)					
Intake Deputy		Transporting Officer D/S DEVITO-VARGAS #15330		ID # 15330		Agency PBSO		PAGE 1 OF 1			
Witness here if subject signed with an -X"											

J#0490 134

OBTS Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 3. Request For Warrant 2. N.T.A. 4. Request For Capias		Juvenile <input type="checkbox"/>
Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE		Agency Report Number 06		17-108332
Charge Type: Check as many as apply <input type="checkbox"/> 1. Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other _____		Special Notes				
Defendant Name (Last, First, Middle) KLOSINSKI, RICHARD, DANIEL				Race W	Sex M	Date of Birth 09/22/1994
Charge VUI		Charge				
Charge		Charge				
Victim Name (Last, First, Middle) STATE OF FL				Race	Sex	Date of Birth
Local Address (Street, Apt. Number) 10666 GREENWICH LN		City WELLINGTON	State FL	Zip 33414	Phone 845-392-7520	Address Source VERBAL / CA DL
Business Address (Street, Apt. Number)		City	State	Zip	Phone	Occupation
I, the undersigned, 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...						
<input type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> confessed to admitting to the below facts.		<input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from (described) investigation.				
On the 29 day of 07 20 17 at 0415 <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM						

On the above date and time, I was dispatched to the area of State Road 7 just south of SW 50th St S in the unincorporated area of Lake Worth, FL for a report of a crash.

Upon arrival I observed a silver vehicle off the roadway in the embankment. A white male was seated in the drivers seat. As I approached him, I saw that his eyes where watery and bloodshot. I asked him if he was okay and he said "Yes" but shouldn't have been driving tonight.

As he spoke I was able to detect an odor of an unknown alcoholic beverage emanating from his mouth area as he was speaking with me. He was also slurring his speech. He stated that he had two beers to drink tonight. Driver had his California drivers license, which was expired.

At this time, I believed the driver was impaired and requested a DUI unit. DUI 13 Investigator S. Levey (9415) responded, see his report for details.

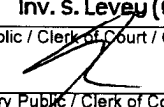
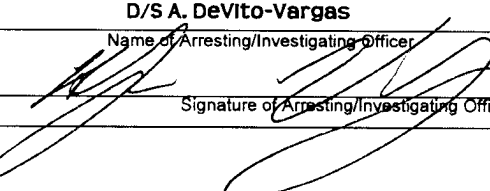
The foregoing instrument was sworn to and affirmed before me this 29 day of 07 20 17 , by:	
Inv S. Levey (9415) Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	D/S J. VILLAR 24746 Name of Arresting/Investigating Officer
Signature of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)	Signature of Arresting/Investigating Officer
Page 1 of ____	

OBTS Number		PROBABLE CAUSE AFFIDAVIT				1. Arrest 3. Request For Warrant 2. N.T.A. 4. Request For Capias		1	Juvenile	N
Agency ORI Number FLO 5 0 0 0 0 0		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE				Agency Report Number 06		17108332		
Charge Type: Check as many as apply <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other						Special Notes				
Defendant Name (Last, First, Middle) Klosinski Richard Daniel										
		Race W		Sex M		Date of Birth 09/22/1994				
Charge DUI		Charge								
Charge		Charge								
Victim Name (Last, First, Middle) State of FL										
Local Address (Street, Apt. Number) 10666 Greenwich LN		City Wellington		State FL		Zip 33414		Phone 845-392-7520		Address Source Verbal/ CA DL
Business Address (Street, Apt. Number)		City		State		Zip		Phone		Occupation
The undersign 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... <input checked="" type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts. <input type="checkbox"/> confessed to admitting to the below facts. <input type="checkbox"/> was found to have committed the below acts, resulting from (described) investigation. On the 29 day of 07 20 17 at 0510 <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM										

On 07/29/2017 at approximately 0510 hours I responded to 50th St South and South State Road 7 In reference to a prisoner transport.

Upon my arrival I placed Richard D. Klosinski to the rear compartment of my patrol vehicle and he was secured with a seat belt. While transporting Richard to the BAT located at 3228 Gun Club Road West Palm Beach FL 33406, Richard made the following statements. Richard asked me if I could just take him home because he is not a criminal and does not have a criminal record. Richard then stated if I could have one of his friends pick him up and explain the situation to him. Richard began rapid breaths in an out multiple times while in the vehicle as he continued this I could smell an over whelming odder of an unknown alcohol beverage.

I classified the video from my in-car video camera which was uploaded.

The foregoing instrument was sworn to and affirmed before me this 29 day of 07 20 17 , by:			
Inv. S. Levey (9415) Name of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)		D/S A. DeVito-Vargas 15330 Name of Arresting/Investigating Officer	
 Signature of Notary Public / Clerk of Court / Officer (F.S.S. 117.00)		 Signature of Arresting/Investigating Officer	
		Page 1 of 1	

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 29th DAY OF July 20 17, AT 03:52 ☒ AM ☐ PM
SUBJECT: Klosinski Richard Daniel CASE NUMBER: 17-108337

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: D/S St. Hilaire #15070

PERSONAL CONTACT

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

I arrived on scene of a reported single vehicle crash on S State Road 7 just south of 50th St. S. in Wellington, FL 33414 in Unincorporated Palm Beach County. Upon arrival, I witnessed Richard Klosinski, identified by his California Driver's License, sitting in the driver's seat of the Silver Honda Civic which sustained significant damage due to a crash. I observed the area of the crash, and learned that it was a single vehicle crash, on a three lane per side roadway. I did not observe that any other vehicles were involved. I observed skid marks, fluid spread, and debris coming from the median area of the roadway. These marks and fluid trail, lead to where the silver Honda was located about 20 yards from the roadway to the east.

Klosinski confirmed that he was driving and that there were no other occupants in the vehicle at the time of the crash.

OBSERVATION OF DRIVER:

I noticed that all of the airbags had been deployed on the vehicle. I noticed that Klosinski was the only occupant of the vehicle, and that there were no other occupants in the vehicle.

DRIVER'S STATEMENTS:

I asked him if he was okay, and he responded that he was. I read Klosinski his constitutional rights off of a department issued Miranda Warning Card, and verbally confirmed with him that he understood his rights. Klosinski was informed that the responding deputies were conducting an investigation regarding the crash. He was told by Investigator Levey, that he and I would be conducting a criminal investigation into a DUI. I noticed his eyes were reddened and glassy looking. He had a slight slur to his speech. I asked him if he had anything to drink and he advised he had 2 drinks earlier in the evening. He claimed to have consumed a mixed cocktail and another drink. He advised that he knew he probably shouldn't have been driving and called for a ride. He said that he pulled over to wait but it was too late. He stated several times that he would accept whatever decision was made. He was made several comments about not drinking and driving, and that he has never been in trouble, implying that he would appreciate leniency.

ODORS:

As I approached Klosinski, I could smell the odor of an unknown alcohol emanating from the him, from several feet away. As I had Klosinski exit the vehicle, and we conversed away from the vehicle, the odor was still prevalent.

GENERAL OBSERVATIONS

SPEECH: Speech pattern was slurred

ATTITUDE: Nervous, talkative, and cooperative

CLOTHING: Sweatpants, T-Shirt, Tennis Shoes

MEDICAL/OTHER: All roadside tasks were conducted on in vehicle video. He stated no medical issues on scene.

STATE OF FLORIDA
COUNTY OF PALM BEACH


(Signature of Arresting/Investigative Officer)

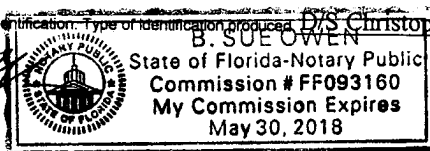
D/S St. Hilaire #15070

The foregoing instrument was sworn to or affirmed and subscribed before me this 29th day of July 20 17 by D/S St. Hilaire #15070

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced D/S Christopher St. Hilaire

Sue Owen (#3184)

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



SUBJECT KlosinskiRichardCASE NUMBER 17-108337

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- | | |
|---|---|
| <input checked="" type="checkbox"/> LT EYE-LACK OF SMOOTH PURSUIT | <input checked="" type="checkbox"/> RT EYE-LACK OF SMOOTH PURSUIT |
| <input checked="" type="checkbox"/> LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION | <input checked="" type="checkbox"/> RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION |
| <input checked="" type="checkbox"/> LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES | <input checked="" type="checkbox"/> RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES |

Other Observations:

Inv. Levey conducted the HGN tasks. Inv Levey informed me that he observed the above indicators. Inv. Levey also observed Vertical Gaze Nystagmus. Inv. Levey conducted Lack of Convergence, and observed that both eyes did not converge.

WALK & TURN:

The subject acknowledged he understood all of the instructions read to him and also demonstrated for him. The subject missed his heel to toe, stepped off of the line, made an improper turn, and did not count to 9 on the return, he also took more steps than instructed; he counted counted to 20.

ONE LEG STAND:

The subject acknowledged he understood all of the instructions read to him and also demonstrated for him. The subject swayed while balancing, put his foot down prior to 30 seconds, could not keep his foot parallel to the ground, and his toe was pointed upwards instead of parallel to the ground.

FINGER TO NOSE:

The subject acknowledged he understood all of the instructions read to him and also demonstrated for him. The subject started the task before he was instructed. Upon being instructed to begin, the subject did not return his hands to his side as instructed, the subject missed his nose with his fingertip, touched his nose with the pad of his finger instead of the tip as instructed, and he did not keep his head tilted back as instructed.

ROMBERG ALPHABET:

The subject acknowledged he understood all of the instructions read to him and also demonstrated for him. The subject did not keep his eyes closed while conducting the task. The subject swayed while reciting the letters, he also put both of his arms straight out to maintain balance, and also incorrectly recited the lettersJ,K,L,N,O.....U,V,U,X....

BREATH TEST RESULTS: .176 .172 n/a n/a

STATE OF FLORIDA
COUNTY OF PALM BEACH

D/S St. Hilaire #15070

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 29th day of July, 2017 by D/S St. Hilaire #15070

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced D/S Christopher St. Hilaire

Sue Owen (#3184)

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

