

ARREST / NOTICE TO APPEAR

6-1# 3679

Agency ORI Number 0500400	Agency Name Delray Beach Police Department	Agency Report Number (O.T.A.'s only) 4, 0 19-015311	1. Arrest 2. N.T.A.	3. Request for Warrant	4. Request for Citation	JUVENILE
Charge Type: Check as many as apply 1. Felony 2. Traffic Felony 3. Misdemeanor 4. Traffic Misdemeanor 5. Ordinance 6. Other	Location of Arrest (Including Name of Business)	Location of Office (Business Name, Address)	Star Type None/not Applicable	Multiple Citations Indicated N		
Date of Arrest 09/27/2019	Time of Arrest 20:57	Booking Date 09/27/2019	Booking Time 21:07	Jail Date 11/11/19	Jail Time	Location of Vehicle 1 SE 3RD AVE DELRAY
Name (Last, First, Middle) REINLICH, RICHARD PAUL			Alias (Name, DOB, Soc. Sec. #, Etc.)			
Sex W - White A - American Indian O - Oriental/Asian M - Male F - Female	Date of Birth 03/09/1970	Height 5'11"	Weight 235	Eye Color HAZE	Hair Color BROWN	Complexion MEDIUM
Local Address (Street, Apt. Number) 301 COLONIAL CLUB DR, BOYNTON BEACH, FL 33436	(City) BOYNTON BEACH	(State) FL	(Zip) 33436	Phone (631) 461-5038	Religion NOT INDICA	Indication of Alcohol Influence Yes <input type="checkbox"/> No <input type="checkbox"/> Unk. <input type="checkbox"/>
Permanent Address (Street, Apt. Number) 301 COLONIAL CLUB DR, BOYNTON BEACH, FL 33436	(City) BOYNTON BEACH	(State) FL	(Zip) 33436	Phone (631) 461-5038	Address Source VERBAL	Drug Influence 1. City 2. County 3. Florida 4. Out of State 2
Business Address (Name, Street) 301 COLONIAL CLUB DR, BOYNTON BEACH, FL 33436	(City) BOYNTON BEACH	(State) FL	(Zip) 33436	Phone (631) 461-5038	Occupation Construction	
DVI Number, State B053246207386207970000	Sec. Sec. Number	DOB Number	Place of Birth (City, State) MIDDLE ISLAND, NY	Citizenship US		
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		
Parent <input type="checkbox"/> Other <input type="checkbox"/>	Name (Last, First, Middle)					Residence Phone
Address (Street, Apt. Number)	(City)	(State)	(Zip)	Business Phone		
Notified by (Name)	Date	Time	JUVENILE DISPOSITION 1. Held/Processed within Department and Released 2. TOT JAC 3. Incarcerated			
Released To (Name)	Relationship	Date	Time			
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.						
Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Description of Property	Value of Property				
Drug Activity S. Sell M. M/A F. Possess T. Traffic R. Sample D. Deliver R. Use K. Disperse/Distribute M. Manufacture/Producer/Cultivate Z. Other	Drug Type N. N/A A. Amphetamine B. Barbiturate C. Cocaine E. Heroin H. Hallucinogen M. Marijuana O. Other/Drugg P. Paraphernalia/Equipment S. Synthetic U. Unknown Z. Other	State Violation Number 316.193(3)(C)(1)				
Charge Description DUI-DAMAGE TO PERSON/PROPERTY	Drug Type N	Amount / Unit	Offense #	Counts 1	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant / Citation Number
Charge Description	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant / Citation Number
Charge Description	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant / Citation Number
Health / Apparent Physical Condition of Defendant	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 Parent/Guardian <input type="checkbox"/> Posted Bond <input checked="" type="checkbox"/> South County Mental Health	T.O.T. County Jail	PROPERTY - Received By	Released By	Released To		
Transported By	Date Transported	Time Transported	Other			
<input checked="" type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court <input 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 10/21/2019 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 CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.						No Photo Available
Signature of Defendant (or Juvenile and Parent/Custodian)						Date Signed
HOLD for Other Agency	Signature of Arresting Officer	Name (Printed)	Name (Printed)			
<input type="checkbox"/> Dangerous <input type="checkbox"/> Escalated Arrest <input type="checkbox"/> Susceptible <input type="checkbox"/> Other	Agency CACERES DUQUE, JOHN F	ID.# 1073	(PRINT)			
Enlist Deputy ID.# D/S B. SHATARA #7623	Transporting Officer CACERES	ID.# 1073	Agency DBPD	PAGE 1 OF 1		

2019 CT 18/31 ASB

COPY

2019 SEP 30 AM

09/27/2019

PROBABLE CAUSE AFFIDAVIT

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

Agency ORI Number: FL 0500400 Agency Name: DELRAY BEACH POLICE DEPARTMENT Agency Report Number: 410 19-015311

Charge Type: 1. Felony 2. Traffic Felony 3. Misdemeanor 4. Traffic Misdemeanor 5. Ordinance 6. Other

Name (Last, First, Middle): BEINLICH, RICHARD PAUL Race: W Sex: M Date of Birth: 03/09/1970

Charge Description: 316.193(3)(C)1 DUI-DAMAGE TO PERSON/PROPERTY

Victim's Name (Last, First, Middle): State Of Florida

Local Address (Street, Apt. Number): (City) (State) (Zip) Phone Address Source

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

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... was observed by... who told... confessed to OFC CACERES... that he/she saw the arrested person commit the below acts... admitting to the below facts... was found to have committed the below acts, resulting from my (described) investigation. On the 27 day of September, 2019 at 19:05 (Specifically include facts constituting cause for arrest.)

The following incident occurred in the City of Delray Beach, Palm Beach County, Florida.

On 09/27/2019 at 1827 hours, dispatch advised that they received a call about a black Jeep Grand Cherokee bearing NY tag GRM9298 driving recklessly all over the road and driving over curbs in the 200 block of SE 5th Ave. at 1838 hours, I was patrolling the area of 300 E Atlantic Ave in my marked police vehicle when I heard what sounded like a vehicle crash. When I looked over, I observed the same black Jeep which appeared to have rear ended another vehicle in the northbound lanes of the 1st block of SE 3rd Ave. I then arrived at the scene of the crash and the driver and sole occupant of the Jeep, Richard Beinlich, was stepping out of the car and talking with the occupants of the other vehicle. I then started to talk to Beinlich to ask him if he was okay. While talking to Beinlich, I observed that he had glossy and bloodshot eyes and he had the odor of alcohol coming from his breath. Beinlich was also unsteady on his feet. I then advised Beinlich that I would be conducting a criminal investigation and asked him if he would submit to standardized field sobriety tasks. Beinlich consented and I began the tasks listed below.

Horizontal Gaze Nystagmus: Beinlich stated he did not have any medical condition that would prevent her from performing this task. Beinlich stated he was wearing contacts that corrected his vision. Beinlich demonstrated lack of smooth pursuit for his left and right eyes. Beinlich demonstrated distinct and sustained nystagmus at maximum deviation for his left and right eyes. Beinlich had onset of nystagmus prior to 45 degrees in his left and right eyes.

Walk and turn: Beinlich was able to stand with his feet together and hands at his sides while I demonstrated the task. Beinlich stated he did not have any medical condition that would

SWORN AND SUBSCRIBED BEFORE ME Notary Public State of Florida Gary J Parent My Commission GG 085486 Expires 06/21/2021 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER CACERES DUQUE JOHN F (1073) NAME OF OFFICER (PLEASE PRINT) 09/27/2019 DATE 09/27/2019 DATE PAGE 1 OF 2

Agency ORI Number: FL 0500400 Agency Name: DELRAY BEACH POLICE DEPARTMENT Agency Report Number: 4 0 19-015311

Charge Type: 1. Felony 2. Traffic Felony 3. Misdemeanor 4. Traffic Misdemeanor 5. Ordinance 6. Other Special Notes: Name (Last, First, Middle): BEINLICH, RICHARD PAUL Race: W Sex: M Date of Birth: 03/09/1970

prevent him from performing this task. While completing the task, Beinlich raised his hands to keep his balance. Beinlich did not walk in a heel to toe manner. Beinlich was unable to walk in the straight line and stepped off the line several times. Beinlich failed count out loud all of his steps. Beinlich surpassed the number of steps he was instructed to take. One leg stand: Beinlich was able to stand still with his feet together and hands at his side while I demonstrated the task. Beinlich stated he did not have any medical condition that would prevent him from performing this task. Beinlich was unable to raise one leg properly without touching the ground with his foot. Beinlich failed to keep his arms at his side. Beinlich did not count as instructed and when reminded to count, he counted in single numbers which was not as instructed. Beinlich was finally able to keep one leg raised but he was leaning back and had his hands extended in front of him which he was instructed not to do. Finger to Nose: Beinlich stated he had a torn pectoral muscle and therefore for Beinlich's safety, I did not have Beinlich perform this task. Number Rhombus: Beinlich stated he knew his number from 1 to 100. I asked Beinlich to count from 56 to 67. Beinlich started to count from 56 and stopped at 75. I then placed Beinlich under arrest and transported him to the FBCJ BAT facility. While at the facility, Beinlich consented to provide a sample of his breath to determine the alcohol content. On the first sample, Beinlich's breath alcohol content returned a result of .164. on the second sample, Beinlich's breath alcohol content returned a result of .168. I advised Beinlich of his Miranda Warnings which he understood. Beinlich stated he had been drinking long island iced teas and had his last drink at approximately 1700 hours. Beinlich state that he drove from two Georges in Boynton Beach to meet up with his girlfriend in Delray Beach. Beinlich also stated that he last took his heart and anxiety medication last night. Based on the above stated facts, probable cause exists to charge the defendant, Richard Beinlich, with DUI crash causing property damage per F.S.S. 316.193(3) (A) (B) (C) (1) whereby the defendant's BAC was .164/.168 which is over the legal limit of .08.

SWORN AND SUBSCRIBED BEFORE ME Notary Public State of Florida Gary J Parent Notary Public / Clerk of Court / Officer of the Peace State of Florida Commission GG 085486 Expires 03/21/2021 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER GACERES DUQUE, JOHN F (1073) NAME OF OFFICER (PLEASE PRINT) 09/27/2019 DATE 09/27/2019 DATE PAGE 2 of 2

FLORIDA DEPARTMENT OF LAW ENFORCEMENT
ALCOHOL TESTING PROGRAM
BREATH ALCOHOL TEST AFFIDAVIT

Instrument Type: Intoxilyzer 8000
Instrument Registered To: PALM BEACH CO SO
Instrument Serial Number: 80-006240 Software: 8100.27
Date of Test: 09/27/2019

Date of Last Agency Inspection: 09/13/2019
Observation Period Began: 19:31
Subject's Name: RICHARD P BEINLICH

DOB: 03/09/1970 Sex: M

The subject was observed for at least twenty-minutes prior to the administration of the breath test to ensure that the subject did not take anything orally and did not regurgitate.

Results:	Test	g/210L	Time
	Diagnostics Check OK		20:31
	Air Blank	0.000	20:32
	Control Test	0.081	20:32
	Air Blank	0.000	20:33
	Subject Sample #1	0.164	20:33
	Air Blank	0.000	20:34
	Air Blank	0.000	20:36
	Subject Sample #2	0.168	20:36
	Air Blank	0.000	20:37
	Control Test	0.079	20:37
	Air Blank	0.000	20:38
	Diagnostics Check OK		20:38

Cylinder Lot: 00919080A3
Exp: 03/05/2021

State of Florida, County of Palm Beach.

Personally appeared before me the undersigned authority, who is personally known to me or produced _____ as identification, and who after being placed under oath, states:

I GARY J PARENT, hold a valid Breath Test Operator permit issued by the Florida Department of Law Enforcement, I administered the above breath test to the subject named above in accordance with Chapter 11D-8, Florida Administrative Code, and this form is a true and accurate report of that breath test.

Breath Test Operator: _____ Date: 09/27/19
Signature

Sworn to (or affirmed) before me this 27 day of SEPTEMBER, 2019

[Signature] Signature of Notary Public-State of Florida
OFF. J. CACERES Printed Name of Notary Public-State of Florida

Note: Pursuant to section 117.10, Florida Statutes, law enforcement officers, correctional officers, traffic accident investigation officers and traffic infraction enforcement officers are notaries public when engaged in the performance of official duties. In accordance with section 316.1934(5), F.S., this completed form is admissible without further authentication and is presumptive proof of the results herein. To be used in accordance with Section 316.1934(5), F.S., and in administrative proceedings pursuant to 322.2615, F.S.



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

PBSO CASE # 19-120076 PBSO ZONE 4-11

AGENCY CASE # 1905311 CRASH CASE # _____

TIME OF STOP/CRASH 1900 DATE 9/27/19 DAY Friday

SUBJECT'S NAME Beinlich, Richard RACE W SEX M

HGT 511 WGT 230 DOB 03/09/70

LOCATION 1 Se 3rd Ave Delray Beach FL

ARRESTING OFFICER'S NAME & ID Caceres 1073 AGENCY Delray PD

DIVISION: _____

NOTIFIED BY COMMO YES

ARRIVAL AT FACILITY 1931

Arrest Time 1905

BREATH RESULTS:

- 1. 164
- 2. 168
- 3. N/A
- 4. N/A

TESTING OFFICER'S ID 7909 PBSO VIDEOTAPE # N/A

NOT A CERTIFIED COPY

TESTING FACILITY TASK REPORT

AGENCY: PBPD

SUBJECT: Barryman, Roman P

CASE NUMBER: 19-120626

DATE: 08/27/19

VIDEO TAPE NUMBER: aka

STARTING TIME: 2026

ENDING TIME: 2037

HEARING TESTS RESULTS: 1) 169 TIME 2033 A.M. (P.M.) 2) 167 TIME 2037 (P.M.)
3) aka TIME --- A.M./P.M. 4) aka TIME --- A.M./P.M.

HEARING OPERATOR: G. P... # 2909

MAINTENANCE TECHNICIAN: ... # 6467

HEARING OPERATOR'S OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: IRRITABLE, CARELESS, EGOISTIC, COOPERATIVE

CLOTHING: AKA, T-SHIRT, SHORTS, T-SHIRT, SHORTS

MEDICAL CONDITION: AKA, SPOONFEED, LAXATIVE

EDUCATION: AKA, HIGH SCHOOL GRADUATE

CITY: AKA, BOCA OF AN UNK...

REASON FOR REFERRAL: AKA

COMMENTS: A ADMITS TO BEING IN LONG ISLAND ISLAND...

BASED ON HIS 1931 MRS

A STATED HE UNDERSTOOD RESULTS

AKA...

A STATED HE UNDERSTOOD RESULTS

TECH RECALCULATED TEST RESULTS A STATED ON BOX THAT HE UNDERSTOOD AND STATES HE UNDERSTOOD RESULTS

AKA...

A STATED HE UNDERSTOOD RESULTS

AKA...

IMPLIED CONSENT FOR DUI IN A MOTOR VEHICLE

NOTE: READ ONLY THE PARAGRAPH APPLICABLE TO THE TYPE OF TEST YOU ARE BEING GIVEN.

I am now requesting that you submit to a lawful test of your BREATH for the purpose of detecting the presence of alcohol.

OR

I am now requesting that you submit to a lawful test of your URINE for the purpose of detecting the presence of alcohol or controlled substances.

OR

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

NOTE: READ ONLY IF THE SUBJECT DOES NOT COMPLY WITH YOUR REQUESTS.

I am _____ of the _____

If you refuse to submit to the test I have requested of you, your privilege to operate a motor vehicle is suspended for a period of 180 days or a first refusal suspension (180 months if your privilege to operate a motor vehicle is suspended for a second or subsequent refusal to submit to a test of your breath, urine or blood. Additionally, you may be charged with a crime if you have been previously suspended for a license to operate a motor vehicle for a period of 180 days or more for refusing to submit to the test I have requested of you or for submitting a misdemeanor. Refusal to submit to the test I have requested of you is a criminal offense under the law.

SUBJECT'S SIGNATURE: _____

ADDITIONAL WARNINGS

PLEASE READ THESE WARNINGS CAREFULLY AND MAKE ANY STATEMENTS YOU MAKE VOLUNTARILY.

1. You have the right to remain silent. Anything you say can be used against you in court.
2. Anything you say can be used against you in court.
3. You have the right to stop answering questions at any time. You have the right to stop answering questions at any time.
4. If you cannot afford a lawyer, one will be appointed for you before any questioning if you cannot afford a lawyer.
5. If at any time during the questioning you do not wish to answer any questions, you are entitled to stop answering questions.
6. If you make any statement, it will be written down and you will have a chance to read it over before you sign it. If you sign it, it will be given to the police.
7. Anything you say can be used against you in a court of law.

SUSPECT'S SIGNATURE: _____

Rico P. Banilech

CASE NUMBER

QUESTIONS AND ANSWERS

PLEASE ANSWER THESE QUESTIONS TO THE BEST OF YOUR KNOWLEDGE. YOU MAY ANSWER SOME OR ALL OF THEM.

WERE YOU OPERATING A MOTOR VEHICLE AT THE TIME OF THE STOP/ACCIDENT? YES

WHAT TYPE OF VEHICLE WAS IT? TRUCK

WHERE DID YOU START? 7000 W. 10th

WHAT TIME DID YOU START? 7:00 AM WHAT TIME IS IT NOW? 10:00 AM

WHAT DAY OF THE WEEK IS IT? THURSDAY

WHAT DID YOU DO? DRIVER WHAT DID YOU EAT? NO

WHAT HAVE YOU BEEN DRIVING SINCE? TRUCK SINCE HOW MANY HOURS? 10

HAVE YOU BEEN DRINKING? NO WITH WHOM? ALONE

HOW MUCH? NO AND YOUR LAST DRINK? NO

ARE YOU CURRENTLY ON ANY MEDICATION? NO

CAN YOU HEAR? YES ARE YOU UNDER THE INFLUENCE OF ANY DRUGS? NO

HAVE YOU BEEN IN ANY ACCIDENTS? NO HOW MANY? NO

WHAT? NO WHEN? NO

WHAT TYPE OF VEHICLE WAS IT? TRUCK WHERE DID YOU START? 7000 W. 10th

WHAT TIME DID YOU START? 7:00 AM WHAT TIME IS IT NOW? 10:00 AM

WHAT DAY OF THE WEEK IS IT? THURSDAY WHAT DID YOU DO? DRIVER

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ARE YOU CURRENTLY ON ANY MEDICATION? NO

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HAVE YOU BEEN IN ANY ACCIDENTS? NO HOW MANY? NO

WHAT? NO WHEN? NO

WHAT TYPE OF VEHICLE WAS IT? TRUCK WHERE DID YOU START? 7000 W. 10th

WHAT TIME DID YOU START? 7:00 AM WHAT TIME IS IT NOW? 10:00 AM

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ARE YOU CURRENTLY ON ANY MEDICATION? NO

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HAVE YOU BEEN IN ANY ACCIDENTS? NO HOW MANY? NO

WHAT? NO WHEN? NO

WHAT TYPE OF VEHICLE WAS IT? TRUCK WHERE DID YOU START? 7000 W. 10th

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WHAT HAVE YOU BEEN DRIVING SINCE? TRUCK SINCE HOW MANY HOURS? 10

HAVE YOU BEEN DRINKING? NO WITH WHOM? ALONE

HOW MUCH? NO AND YOUR LAST DRINK? NO

ARE YOU CURRENTLY ON ANY MEDICATION? NO

OPY

CACERES DUQUE
(1073)

19015311



COMPLAINT

CASE NO. _____ DOCKET NO. _____ PAGE NO. _____

FLORIDA DUI UNIFORM TRAFFIC CITATION **A1UR2VE**

COUNTY OF **PALM BEACH**
CITY OF APPLICABLE **DELRAY BEACH**
AGENCY NAME **DELRAY BEACH POLICE**
AGENCY # **40**

IN THE COURT INDIKATED BELOW THE UNDERSIGNED CERTIFY THAT HE/SHE HAS BEEN AND REASONABLE DUBIOUS TO BELIEVE AND DOES BELIEVE THAT ON **FRIDAY 09 27 2019 09:38** P.M. **PAUL BEINLICH** **301 COLONIAL CLUB DR ROYNTON BEACH FL 33436** (631)461-5038 03 09 1970 W M 511 B 0 5 3 2 4 6 2 0 7 3 8 6 2 0 7 9 7 0 2026 2015 JEEP SUV BLK GRM9298 NY 2020

UPON A PUBLIC STREET OR HIGHWAY, OR OTHER LOCATION, HABITLY **1 SE 3RD AVE (Block BLK), DELRAY BEACH**

1 SE 3RD AVE (Block BLK), DELRAY BEACH

1 SE 3RD AVE (Block BLK), DELRAY BEACH

1 SE 3RD AVE (Block BLK), DELRAY BEACH

1 SE 3RD AVE (Block BLK), DELRAY BEACH

1 SE 3RD AVE (Block BLK), DELRAY BEACH

1 SE 3RD AVE (Block BLK), DELRAY BEACH

1 SE 3RD AVE (Block BLK), DELRAY BEACH

1 SE 3RD AVE (Block BLK), DELRAY BEACH

1 SE 3RD AVE (Block BLK), DELRAY BEACH

1 SE 3RD AVE (Block BLK), DELRAY BEACH

1 SE 3RD AVE (Block BLK), DELRAY BEACH

1 SE 3RD AVE (Block BLK), DELRAY BEACH

1 SE 3RD AVE (Block BLK), DELRAY BEACH

1 SE 3RD AVE (Block BLK), DELRAY BEACH

1 SE 3RD AVE (Block BLK), DELRAY BEACH

1 SE 3RD AVE (Block BLK), DELRAY BEACH

1 SE 3RD AVE (Block BLK), DELRAY BEACH

1 SE 3RD AVE (Block BLK), DELRAY BEACH

1 SE 3RD AVE (Block BLK), DELRAY BEACH

1 SE 3RD AVE (Block BLK), DELRAY BEACH

1 SE 3RD AVE (Block BLK), DELRAY BEACH

1 SE 3RD AVE (Block BLK), DELRAY BEACH

1 SE 3RD AVE (Block BLK), DELRAY BEACH

1 SE 3RD AVE (Block BLK), DELRAY BEACH

1 SE 3RD AVE (Block BLK), DELRAY BEACH

1 SE 3RD AVE (Block BLK), DELRAY BEACH

1 SE 3RD AVE (Block BLK), DELRAY BEACH

1 SE 3RD AVE (Block BLK), DELRAY BEACH

1 SE 3RD AVE (Block BLK), DELRAY BEACH

1 SE 3RD AVE (Block BLK), DELRAY BEACH

1 SE 3RD AVE (Block BLK), DELRAY BEACH

DATE _____ COURT ACTION AND OTHER ORDERS _____

BAIL FIXED AT \$ _____ OR CASH DEPOSIT OF \$ _____

SIGNATURE OF PERSON GIVING BAIL _____

SIGNATURE OF PERSON TAKING BAIL _____

FINE IN THE AMOUNT OF \$ _____ RECEIVED AS REQUIRED BY COURT SCHEDULE.

SIGNATURE OF CLERK _____

CONTINUANCE TO _____ REASON _____

CONTINUANCE TO _____ REASON _____

BOND ESTREATED _____

WARRANT ISSUED _____

VIOLATOR FAILED TO APPEAR-DRIVER LICENSE SUSPENDED

VIOLATOR ARRAIGNED ON _____ (DATE)

PLEA: _____

FINDING: _____

ADJUDICATION: _____

SENTENCE: FINE _____ COST _____

JAILED _____ DAYS

DRIVER IMPROVEMENT SCHOOL _____

OTHER _____

DRIVER LICENSE SUSPENDED OR REVOKED FOR _____ DAYS

RECOMMEND DRIVER LICENSE SUSPENSION FOR _____ DAYS

RECOMMEND RE-TEST _____

SIGNATURE OF JUDGE _____

TESTIMONY - JUDGE'S NOTES (OR OTHER COURT ORDERS):

APPEAL BOND OF \$ _____

VIOLATOR'S FINGERPRINT WHEN APPLICABLE _____

OUT-DAMAGE TO PERSON/PROPERTY | Dual Crash

ADJUDICATED DRIVER _____ STATE STATUTE **316.193** SECTION **(3)(C)(1)**

THIS IS A CRIMINAL VIOLATION, COURT APPEARANCE REQUIRED, AS INDICATED BELOW.

10/21/2019 08:30 AM **A1UR2VE**

200 W ATLANTIC AVE

200 W ATLANTIC AVE, DELRAY BEACH, FL 33444

VIOLATOR DELIVERED TO _____ DATE _____

I HEREBY AND PROMISE TO COMPLY AND ABIDE BY THE CHARGES AND INSTRUCTIONS SPECIFIED IN THIS CITATION, WILLFUL REFUSAL TO ACCEPT AND SIGN THIS CITATION MAY RESULT IN ARREST. I HEREBY SIGN MY SIGNATURE IN FULL KNOWLEDGE OF SAID CHARGES AND RIGHTS. IF YOU NEED REASONABLE FACILITY ACCOMMODATIONS TO COMPLY WITH THIS CITATION, CONTACT THE CLERK OF THE COURT.

SIGNATURE OF VIOLATOR _____

EFFECTIVE IMMEDIATELY, YOUR DRIVING PRIVILEGE IS SUSPENDED/DISQUALIFIED FOR:

DRIVING WITH AN UNLAWFUL BLOOD OR BREATH ALCOHOL LEVEL. THIS SUSPENSION IS FOR A PERIOD OF SIX MONTHS IF THIS IS THE FIRST VIOLATION OR ONE YEAR IF PREVIOUSLY SUSPENDED FOR DRIVING WITH AN UNLAWFUL BLOOD OR BREATH ALCOHOL LEVEL. IF YOU HOLD A CDL OR YOU ARE OPERATING A CMV YOUR COMMERCIAL DRIVER LICENSE/PRIVILEGE WILL ALSO BE DISQUALIFIED FOR A PERIOD OF ONE YEAR FOR A FIRST REFUSAL OR PERMANENTLY DISQUALIFIED FOR A SUBSEQUENT OFFENSE.

REFUSAL TO SUBMIT TO LAWFUL BREATH, BLOOD OR URINE TEST SECTION 322.2615, F.S. THIS SUSPENSION IS FOR A PERIOD OF ONE YEAR IF THIS IS A FIRST REFUSAL OR 18 MONTHS IF PREVIOUSLY SUSPENDED FOR THIS OFFENSE. IF YOU HOLD A CDL OR YOU ARE OPERATING A CMV, YOUR COMMERCIAL DRIVER LICENSE/PRIVILEGE WILL ALSO BE DISQUALIFIED FOR A PERIOD OF ONE YEAR FOR A FIRST REFUSAL OR PERMANENTLY DISQUALIFIED FOR A SUBSEQUENT REFUSAL.

LICENSE SURRENDERED? YES NO REASON **OUT OF STATE**

ELIGIBLE FOR PERMIT? YES NO REASON _____

UNLESS INELIGIBLE, THIS CITATION SHALL SERVE AS A TEMPORARY DRIVER LICENSE AND WILL EXPIRE AT MIDNIGHT ON THE 10TH DAY FOLLOWING THE DATE OF SUSPENSION.

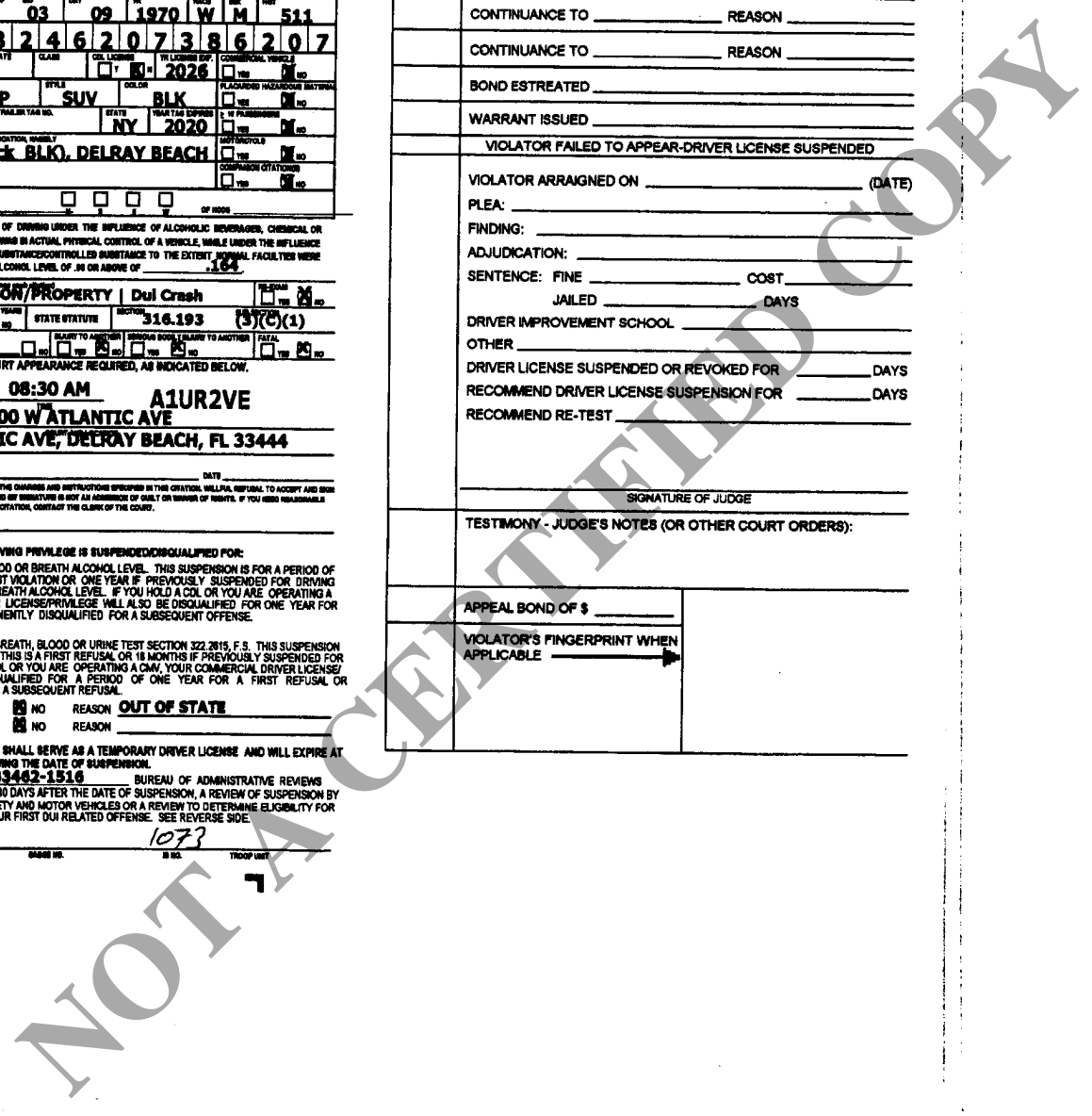
AT THE **LANTANA 33462-1516** BUREAU OF ADMINISTRATIVE REVIEWS

OFFICE, YOU MAY REQUEST, WITHIN 10 DAYS AFTER THE DATE OF SUSPENSION, A REVIEW OF SUSPENSION BY THE DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES OR A REVIEW TO DETERMINE ELIGIBILITY FOR A RESTRICTED LICENSE IF THIS IS YOUR FIRST DUI RELATED OFFENSE. SEE REVERSE SIDE.

Liittel **1073**

AGENCY - SIGNATURE OF OFFICER _____ NAME NO. _____ TROOP UNIT _____

FORM 70004 (Rev. 10/14)





COMPLAINT

WHEN PRESENTED TO VIOLATOR, THE FOLLOWING AMOUNT WAS ENTERED.
PAY A CIVIL PENALTY IN THE AMOUNT OF \$ _____

FLORIDA UNIFORM TRAFFIC CITATION AC5YV9E

CASE NO. _____ DOCKET NO. _____ PAGE NO. _____

COUNTY OF **PALM BEACH** (1) F.A.P. (2) P.P. (3) S.A. (4) OTHER
 CITY OF APPLICABLE AGENCY NAME **DELRAY BEACH POLICE**
 AGENCY # **40**

IN THE COURT OF APPEALS BELOW THE UNDERSIGNED CERTIFIES THAT HE/SHE HAS JUST AND HONORABLY OBLIGED TO DELIVER AND DOES BELIEVE TRUST ON

DATE OF VIOLATION **FRIDAY 09 27 2019 09:38** A.M. P.M.
 NAME (FIRST) **RICHARD** LAST **BEINLICH**
 STREET **301 COLONIAL CLUB DR**
 CITY **BOYNTON BEACH** STATE **FL** ZIP CODE **33436**
 TELEPHONE NUMBER **(631) 481-5038** DATE OF BIRTH **03 09 1970** SEX **M** HAIR **B** EYES **B**
 DRIVER LICENSE NUMBER **B 0 5 3 2 4 6 2 0 7 3 8 6 2 0 7** EXPIRES **9 7 0** STATE **FL** CLASS **2026** YES NO COMMERCIAL VEHICLE YES NO
 PLACARDED HAZARDOUS MATERIALS YES NO
 VEHICLE MAKE **2015 JEEP** MODEL **SUV** COLOR **BLK** YES NO PASSENGER YES NO
 VEHICLE LICENSE NO. **GRM9298** TRAILER TAG NO. **NY** YEAR THIS LICENSE **2020** YES NO
 VIOLATION OCCURRED ON HIGHWAY, OR OTHER LOCATION, NUMBER **1 SE 3RD AVE (Block BLK), DELRAY BEACH** YES NO
 DID UNLAWFULLY COMMIT THE FOLLOWING OFFENSE. CHECK ONLY ONE OFFENSE EACH CITATION.
 UNLAWFUL SPEED MPH SPEED APPLICABLE MPH
 (1) INTERSTATE SCHOOL ZONE CONSTRUCTION WORKERS PRESENT
 SPEED MEASUREMENT DEVICE
 CARELESS DRIVING CHILD RESTRAINT EXPIRED DRIVER LICENSE 60 (6) MONTHS OR LESS
 VIOLATION OF TRAFFIC CONTROL DEVICE SAFETY BELT VIOLATION EXPIRED DRIVER LICENSE MORE THAN 60 (6) MONTHS
 FAILURE TO STOP AT A TRAFFIC SIGNAL IMPROPER OR UNSAFE EQUIPMENT NO VALID DRIVER LICENSE
 IMPROPER LANE CHANGE OR COURSE EXPIRED TAG 60 (6) MONTHS OR LESS EXPIRED TAG MORE THAN 60 (6) MONTHS DRIVING UNDER THE INFLUENCE OF ALCOHOL OR DRUGS
 NO PROOF OF INSURANCE EXPIRED DRIVER LICENSE 60 (6) MONTHS OR LESS PASSENGER UNDER 18 YRS. OF AGE
 VIOLATION OF RIGHT-OF-WAY DRIVING WHILE LICENSE SUSPENDED OR REVOKED
 IMPROPER PASSAGE

DATE	COURT ACTION AND OTHER ORDERS
	BAIL FIXED AT \$ _____ OR CASH DEPOSIT OF \$ _____ SIGNATURE OF PERSON GIVING BAIL _____ SIGNATURE OF PERSON TAKING BAIL _____
	FINE IN THE AMOUNT OF \$ _____ RECEIVED AS REQUIRED BY COURT SCHEDULE SIGNATURE OF CLERK _____
	CONTINUANCE TO _____ REASON _____
	CONTINUANCE TO _____ REASON _____
	BOND ESTREATED _____
	WARRANT ISSUED _____
	VIOLATOR FAILED TO APPEAR-DRIVER LICENSE SUSPENDED
	VIOLATOR ARRAIGNED ON _____ (DATE) PLEA: _____ FINDING: _____ ADJUDICATION: _____ SENTENCE: FINE _____ COST _____ JAILED _____ DAYS DRIVER IMPROVEMENT SCHOOL _____ OTHER _____ DRIVER LICENSE SUSPENDED OR REVOKED FOR _____ DAYS RECOMMEND DRIVER LICENSE SUSPENSION FOR _____ DAYS RECOMMEND RE-TEST _____ SIGNATURE OF JUDGE _____
	TESTIMONY - JUDGE'S NOTES (OR OTHER COURT ORDERS):
	APPEAL BOND OF \$ _____
	VIOLATOR'S FINGERPRINT WHEN APPLICABLE _____

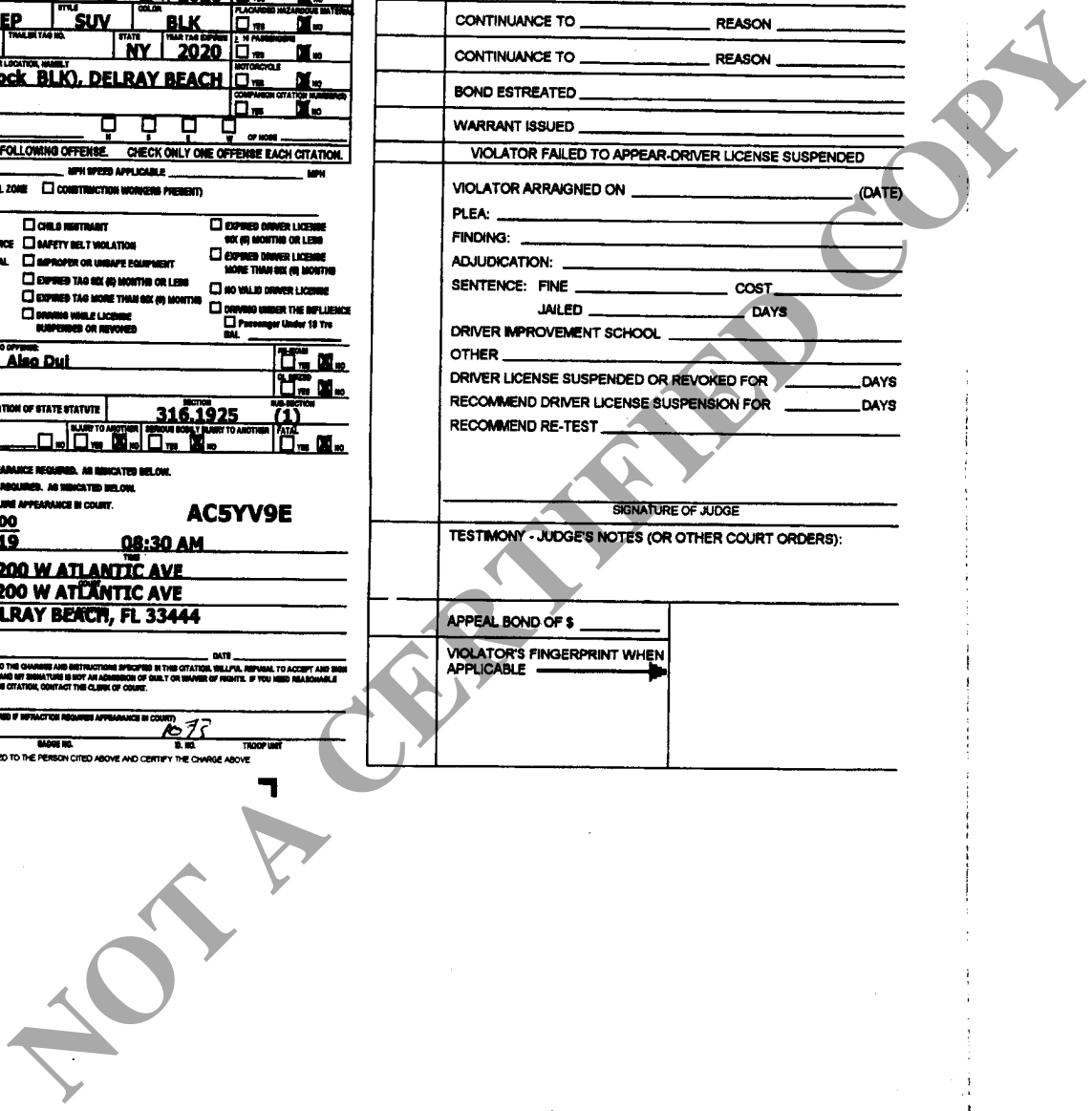
OTHER VIOLATIONS OR OFFENSES PERTAINING TO OFFENSE: **CARELESS DRIVING | Also Dui**

AGGRESSIVE DRIVING VIOLATION OF STATE STATUTE **316.1925 (1)**

CRIMINAL VIOLATION. COURT APPEARANCE REQUIRED, AS INDICATED BELOW.
 INFRACTION. COURT APPEARANCE REQUIRED, AS INDICATED BELOW.
 INFRACTION WHICH DOES NOT REQUIRE APPEARANCE IN COURT.

CIVIL PENALTY IS \$ **166.00** **AC5YV9E**
 COURT INFORMATION **10/21/2019 08:30 AM**
200 W ATLANTIC AVE
200 W ATLANTIC AVE
DELRAY BEACH, FL 33444

ARREST DELIVERED TO _____ DATE _____
 I AGREE AND PROMISE TO COMPLY AND ANSWER TO THE CHARGES AND INSTRUCTIONS SPECIFIED IN THIS CITATION, WITHOUT DELAY, PENALTY, TO ACCEPT AND SIGN THE CITATION AND PROMISE TO APPEAR IN COURT AND IF SIGNATURE IS NOT AN ADMONITION OF ONLY OR WAIVER OF RIGHTS. IF YOU NEED REASONABLE FACILITY ACCOMMODATIONS TO COMPLY WITH THIS CITATION, CONTACT THE CLERK OF COURT.
 SIGNATURE OF VIOLATOR (SIGNATURE IS REQUIRED IF INFRACTION REQUIRES APPEARANCE IN COURT)
Caceres
 NAME - NAME OF OFFICER **1078** BADGE NO. **1078** TROOP UNIT





Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	<input type="checkbox"/>	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	<input type="checkbox"/>	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	<input type="checkbox"/>	119.071(4)(c)	Undercover personnel.	
	<input type="checkbox"/>	119.071(2)(f)	Confidential informants (CIs).	
	<input type="checkbox"/>	119.071(2)(e)	Confession.	
Public Info. Exemptions	<input type="checkbox"/>	985.04(1)	Juvenile offender records.	
	<input type="checkbox"/>	119.071(h)(i)	Assets of a crime victim.	
	<input type="checkbox"/>	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	<input type="checkbox"/>	394.4615(7)	Mental health information.	
	<input type="checkbox"/>	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)	<input checked="" type="checkbox"/>	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	<input type="checkbox"/>	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	<input type="checkbox"/>	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	<input type="checkbox"/>	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
Other	<input type="checkbox"/>	119.071(2)(j)1	Other: Addresses, telephone numbers and personal assets of domestic vio. and other specified crime victims	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2019031604	Date: 9/28/2019
	Specialist Name/ID: Tiara Jones/34072