

0493270

ARREST / NOTICE TO APPEAR

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

1 JUVENILE

7090200

OBTS Number \_\_\_\_\_ Agency Report Number (N.T.A.'s only) **3 2 2017-015515**

Agency ORI Number **0500200** Agency Name **Boca Raton Police Department** Multiple Clearance Indicator \_\_\_\_\_

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

Check as many as apply:  2. Traffic Felony  4. Traffic Misdemeanor  6. Other

If Weapon Seized Enter Type **None/not Applicable**

Location of Offense (Business Name, Address) **4000 N FEDERAL HWY, BOCA RATON, FL 33431**

Location of Arrest (Including Name of Business) **4000 N FEDERAL HWY**

Date of Arrest **11/12/2017** Time of Arrest **00:49** Booking Date **11/12/2017** Booking Time **01:00** Jail Date **11/12/2017** Jail Time **01:49** Location of Vehicle **EMERALD**

Alias (Name, DOB, Soc. Sec. #, Etc.) \_\_\_\_\_

Name (Last, First, Middle) **COLANGELO, ROBERT ANTHONY** Alias: \_\_\_\_\_

Race **W** Sex **M** Date of Birth **01/07/1992** Height **6'00** Weight **170** Eye Color **BROWN** Hair Color **BLONDE** Complexion **LIGHT** Build **Medium**

Indication of Alcohol Influence Yes  No  Unk.

Indication of Drug Influence Yes  No  Unk.

Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) \_\_\_\_\_

Local Address (Street, Apt. Number) (City) (State) (Zip) **1700 SE 15TH ST 302, FORT LAUDERDALE, FL 33316** Phone \_\_\_\_\_

Permanent Address (Street, Apt. Number) (City) (State) (Zip) **1700 SE 15TH ST 302, FORT LAUDERDALE, FL 33316** Phone \_\_\_\_\_

Business Address (Name, Street) (City) (State) (Zip) **SAILORMAN,** Phone \_\_\_\_\_

Occupation **Sales Rep**

D/L Number, State **CA52761920070 / FL** Soc. Sec. Number \_\_\_\_\_ INS Number \_\_\_\_\_

Place of Birth (City, State) **YONKERS, FL, United** Citizenship **US**

Co-Defendant Name (Last, First, Middle) \_\_\_\_\_ Race \_\_\_\_\_ Sex \_\_\_\_\_ Date of Birth \_\_\_\_\_

Co-Defendant Name (Last, First, Middle) \_\_\_\_\_ Race \_\_\_\_\_ Sex \_\_\_\_\_ Date of Birth \_\_\_\_\_

Name (Last, First, Middle) \_\_\_\_\_

Parent  Other \_\_\_\_\_

Legal Custodian \_\_\_\_\_

Address (Street, Apt. Number) (City) (State) (Zip) \_\_\_\_\_

Business Phone \_\_\_\_\_

Notified by: (Name) \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

Relationship \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

Released To: (Name) \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

JUVENILE DISPOSITION: 1. Handled/Processed within Department and Released 2. TOT JAC 3. Incarcerated

The above address was provided by  defendant and/or  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?  Yes  No

Description of Property \_\_\_\_\_ Value of Property \_\_\_\_\_

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 \_\_\_\_\_ Drug Type **N** Amount / Unit \_\_\_\_\_ Offense # **2017-015515** Counts **1** Domestic Violence  Y  N Warrant / Capias Number \_\_\_\_\_ Bond \_\_\_\_\_

Charge Description \_\_\_\_\_ Statute Violation Number \_\_\_\_\_ Violation of ORD # \_\_\_\_\_

Drug Activity \_\_\_\_\_ Drug Type \_\_\_\_\_ Amount / Unit \_\_\_\_\_ Offense # \_\_\_\_\_ Counts \_\_\_\_\_ Domestic Violence  Y  N Warrant / Capias Number \_\_\_\_\_ Bond \_\_\_\_\_

Charge Description \_\_\_\_\_ Statute Violation Number \_\_\_\_\_ Violation of ORD # \_\_\_\_\_

Drug Activity \_\_\_\_\_ Drug Type \_\_\_\_\_ Amount / Unit \_\_\_\_\_ Offense # \_\_\_\_\_ Counts \_\_\_\_\_ Domestic Violence  Y  N Warrant / Capias Number \_\_\_\_\_ Bond \_\_\_\_\_

Health / Apparent Physical Condition of Defendant **GOOD** Any knowledge of the following:  Mental  Escape Risk  Medication  Deformities  Injuries

Check which applies:  Released O.R.  Released to Parent/Guardian  T.O.T. County Jail  Posted Bond  South County Mental Health

PROPERTY - Received By **KIRK** Released By **KIRK** Released To **COUNTY JAIL**

Transported By \_\_\_\_\_ Date Transported \_\_\_\_\_ Time Transported \_\_\_\_\_ Other \_\_\_\_\_

INSTRUCTION NO. 1 - Mandatory appearance in court  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 **12/11/2017 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 CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.

Signature of Defendant (or Juvenile and Parent/Custodian) \_\_\_\_\_ Date Signed **11/12/17**

HOLD for Other Agency \_\_\_\_\_ Signature of Arresting Officer **KIRK** Name Verification (Printed by Arrestee) **Robert Colangelo**

Dangerous  Resisted Arrest  Suicidal  Other \_\_\_\_\_ Name of Arresting Officer (Print) **KIRK, ANDRAE** I.D. # **808** (PRINT) \_\_\_\_\_

Inmate # **798** Pouch # \_\_\_\_\_ Transporting Officer **Burnette** I.D. # **BRPD** Agency \_\_\_\_\_

Witness here if subject signed with an "X". \_\_\_\_\_

SCANNED NOV 16 2017 NOV 12 AM 5:30

PROBABLE CAUSE AFFIDAVIT

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

1 JUVENILE

OBTs Number	Agency ORI Number <b>FL 0500200</b>		Agency Name <b>BOCA RATON POLICE DEPARTMENT</b>	Agency Report Number <b>3   2   2017-015515</b>
Charge Type: Check as many as apply.	<input type="checkbox"/> 1. Felony	<input checked="" type="checkbox"/> 3. Misdemeanor	<input type="checkbox"/> 5. Ordinance	Special Notes:
	<input type="checkbox"/> 2. Traffic Felony	<input type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 6. Other	

Name (Last, First, Middle) <b>COLANGELO, ROBERT ANTHONY</b>	Alias	Race <b>W</b>	Sex <b>M</b>	Date of Birth <b>01/07/1992</b>
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Charge Description <b>316.193(1) DUI</b>	Charge Description
Charge Description	Charge Description

Victim's Name (Last, First, Middle) <b>STATE OF FLORIDA,</b>	Race	Sex	Date of Birth
Local Address (Street, Apt. Number) <b>100 NW 2ND AVE, BOCA RATON, FL 33432</b>	Phone <b>(561) -</b>	Address Source	
Business Address (Name, Street)	Phone <b>(56) -</b>	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 \_\_\_\_\_ that he/she saw the arrested person commit the below acts.

confessed to \_\_\_\_\_ admitting to the below facts.  was found to have committed the below acts, resulting from my (described) investigation.

On the **12** day of **November**, **2017** at **00:49** (Specifically include facts constituting cause for arrest.)

On 11/10/2017, Officer Bissoon and I responded to 4000 North Federal Highway, in reference to a motor vehicle crash. We met with Officer Fong at the scene of the crash, who informed me that Robert Colangelo was traveling southbound on North Federal Highway where he was involved in a motor vehicle accident.

According to Officer Fong, Colangelo stated that he was coming from O'Connor's, a bar in Delray Beach and that he had approximately 3 to 4 drinks tonight. Ofc Fong advised Colangelo that he was finished with his crash investigation and we took over to begin a criminal investigation.

I then approached Colangelo and read him his Constitutional Warnings. Colangelo advised that he would speak with me. While speaking to him I could smell an odor of an alcoholic beverage emanating from his person, and he was slurring his speech. I asked Colangelo if he had been drinking tonight, and he advised that he had 3 or 4 beers tonight.

Based on my observations I asked Colangelo if he would submit to Roadside Sobriety Tasks. Colangelo stated that he would perform the tasks. I then walked him over to a well-lit area and asked if he had any medical problems or medical issues that would prevent him from performing the tasks. Colangelo advised that he had no medical or physical issues that would prevent him from performing the tasks. The tasks conducted were the Walk and Turn, One Leg Stand, Finger to Nose, and the Rhomberg Alphabet.

The first Standardized Field Sobriety Task was the Walk and Turn. Robert was unable to maintain the starting position while listening to instructions. He stepped completely off the line during the task. Colangelo made an improper turn by not conducting it the way I demonstrated and proceeded to continue in a circular pattern until being told to continue the task. He then walked back towards the staring position

SWORN AND SUBSCRIBED BEFORE ME	SIGNATURE OF ARRESTING / INVESTIGATING OFFICER <i>Andrae Kirk</i>
<b>GRAHAM, KEITH T</b> #114 NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)	<b>KIRK, ANDRAE (808)</b> NAME OF OFFICER (PLEASE PRINT)
<b>11/12/2017</b> DATE	<b>11/12/2017</b> DATE

Agency ORI Number <b>FL 0500200</b>	Agency Name <b>BOCA RATON POLICE DEPARTMENT</b>	Agency Report Number <b>3   2   2017-015515</b>
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		Special Notes: <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other
Name (Last, First, Middle) <b>COLANGELO, ROBERT ANTHONY</b>		Alias Race: <b>W</b> Sex: <b>M</b> Date of Birth: <b>01/07/1992</b>

and when he got to the ninth step, he started to turn around again making circles. Colangelo also failed to keep his feet heel to toe.

The second Standardized Field Sobriety Task was the One-Leg-Stand. Colangelo continuously swayed back and forth during the task. Colangelo also placed his foot on the ground one time. He failed to maintain his foot six inches off the ground only having his foot off the ground 3 to 4 inches. Additionally, Robert repeated the numbers 1015 and 1016 twice while counting.

The third Standardized Field Sobriety Task was the Finger to Nose (Left-Right-Left-Right-Right-Left). Robert did not stand the way I instructed him to instead he stood with his feet apart instead of together. Colangelo on the third right raised his left hand, then corrected, and brought his right finger up to his nose. He also touched the left nostril on the first left.

The fourth Standardized Field Sobriety Task was the Rhomberg Alphabet. Robert recited the alphabet correctly, but swayed throughout the task.

Based on the above information, I placed Colangelo under arrest for DUI. I then transported him to Boca Raton Police Department. Officer Deen responded to Boca Raton Police Department as my Breath Test Operator to operate the intoxilyzer 8000. Officer Deen and I conducted the 20-minute observation and then Colangelo was taken into the BAT room. I asked Colangelo to provide a breath sample. Colangelo gave two valid samples of .049 and .046. I then asked Colangelo if he would provide a urine sample, he advised he would (results to be determined). I advised Robert of his Constitutional Warnings and he advised he understood and would like to speak to me. See DUI influence report. Robert Colangelo is being charged for DUI pursuant to F.S.S. 316.193(1). Colangelo was processed at BRPD and then transported to PBCJ for final disposition. His vehicle was towed to Emerald towing.

ADMINISTRATIVE	SWORN AND SUBSCRIBED BEFORE ME	<i>Andrae Kirk</i>	SIGNATURE OF ARRESTING / INVESTIGATING OFFICER
	<b>GRAHAM, KEITH T</b>	<b>KIRK, ANDRAE (808)</b>	NAME OF OFFICER (PLEASE PRINT)
	NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)	<b>11/12/2017</b>	DATE
	<b>11/12/2017</b>	<b>11/12/2017</b>	DATE

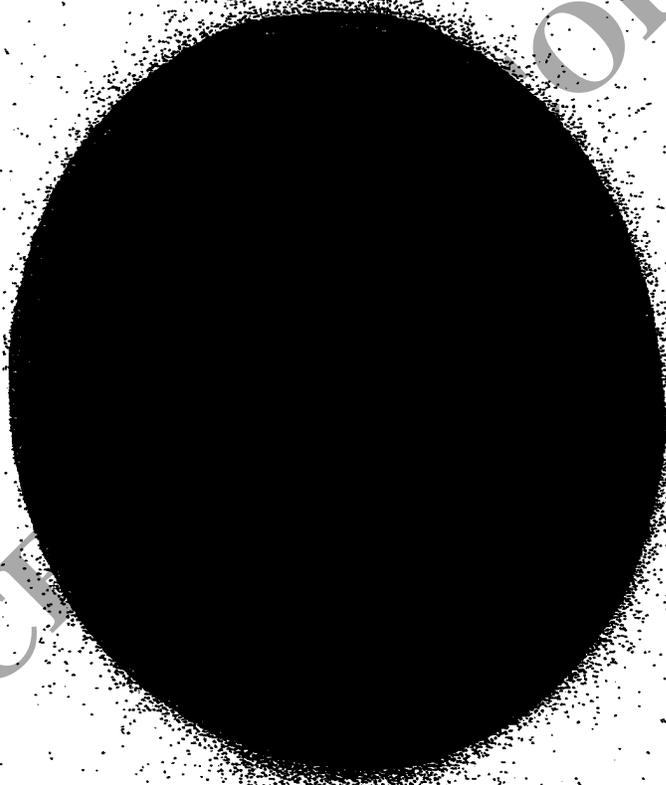
17-015515

Robert A. Colangelo

1015 = 0049

0100 =

# D. U. I. INFLUENCE REPORT



Boca Raton Police Services Department

100 Northwest Second Avenue

Boca Raton, Florida 33432

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NOV 16 2017

ARRESTING OFFICER: Dfc. Kirk # 808

Name: \_\_\_\_\_ Phone # Home \_\_\_\_\_ Work 561 368 6201

Address: 4000 N. Federal Highway / 100 NW 2nd Ave

Can testify to: DUI Investigation

Name: Dfc. Bissoon Phone # Home \_\_\_\_\_ Work 561 368 6201

Address: 100 NW 2nd Ave

Can testify to: DUI Investigation

Name: Dfc. Fong Phone # Home \_\_\_\_\_ Work 561 368 6201

Address: 100 NW 2nd Ave

Can testify to: Accident Report

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: \_\_\_\_\_

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BOCA RATON POLICE DEPARTMENT

Agency Case# 17-015515

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, November, 12, 2017  
(day) (month) (date) (year)

B. The time is now approximately 0130 AM/PM

C. The following is in reference to case number: 17-015515

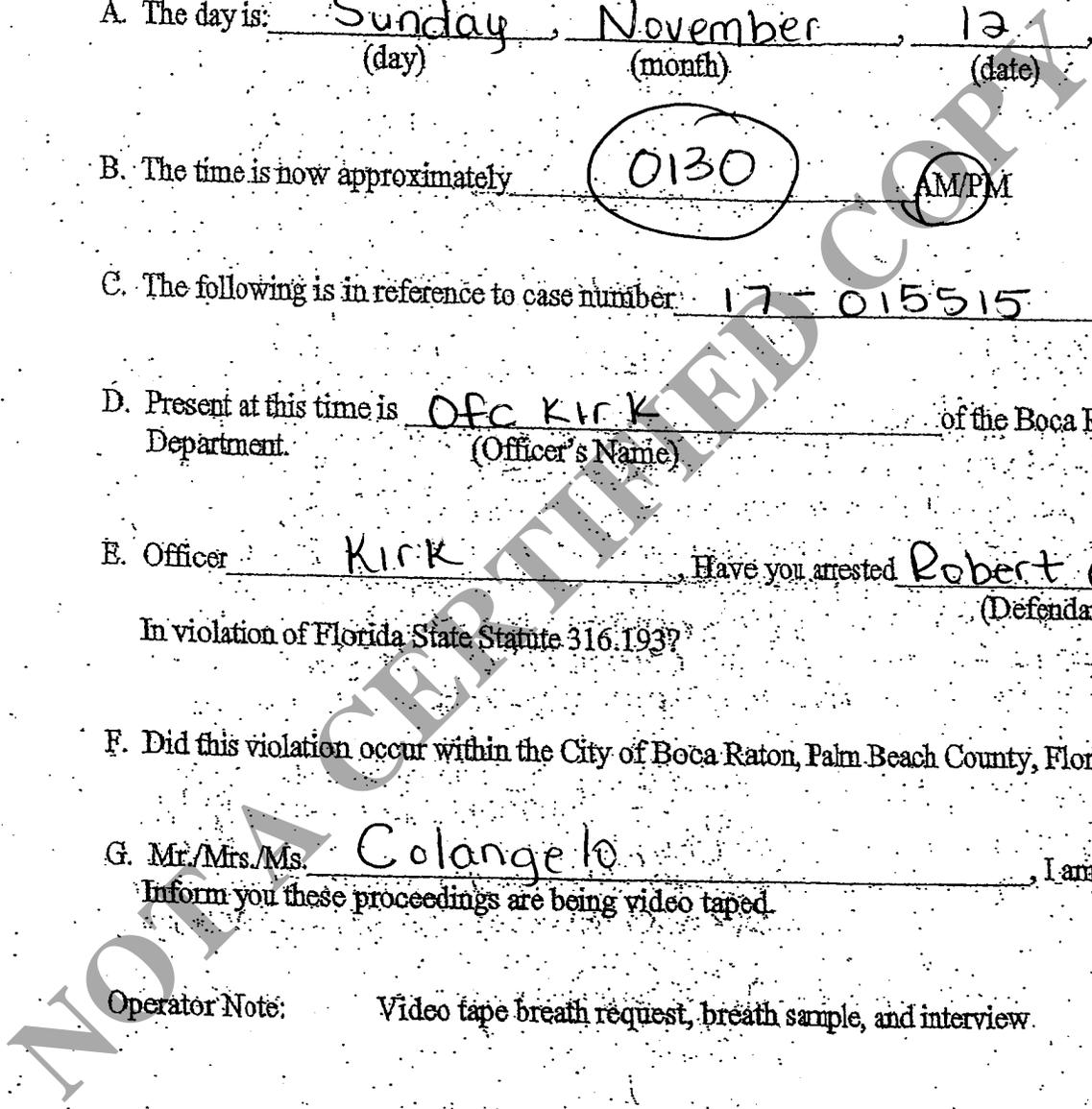
D. Present at this time is Ofc Kirk of the Boca Raton Police Department.  
(Officer's Name)

E. Officer Kirk Have you arrested Robert Colangelo  
(Defendant's name)  
In violation of Florida State Statute 316.193?

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

G. Mr./Mrs./Ms. Colangelo, 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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**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.
- B.

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

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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**Rights of suspects prior to custodial questioning.  
Identify yourself and state:**

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

- (1) You have the right to remain silent and not answer any questions. *Tell me in your own words what you think this means. (You do not have to talk to me or answer any questions about this offense. You can be quiet if you want.)*
- (2) Any statement you make must be freely and voluntarily given. *Tell me in your own words what you think this means. (If you do talk to me it has to be because you want to and not because anyone is forcing you to speak.)*
- (3) You have a right to the presence and representation of a lawyer of your choice before you make any statement and during any questioning. *Tell me in your own words what you think this means. (You can talk to a lawyer before we ask you any questions and you can have him/her with you now, during our questioning.)*
- (4) If you cannot afford a lawyer, you are entitled to the presence and representation of a court appointed lawyer before you make any statement and during any questioning. *Tell me in your own words what you think this means. (If you do not have money for a lawyer and you want one, a lawyer will be given to you for free.)*
- (5) If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent. *Tell me in your own words what you think this means. (If you decide to talk to me then change your mind, you can stop answering my questions at any time.)*
- (6) I can make no threats or promises to induce you to make a statement. This must be of your own free will. *Tell me in your own words what you think this means. (I am not allowed to threaten you or make you any promises to get you to talk to me. If you decide to talk, it must be because you want to.)*
- (7) Any statement can be and will be used against you in a court of law. *Tell me in your own words what you think this means. (Anything you say to me can and will be told to the judge or a jury in court. A judge is a person who decides if you have done something wrong. Sometimes a group of people called a jury decide this, but the Judge is the person who decides what punishment you get.)*
- (8) Do you understand these rights as I have read them to you, and do you wish to speak to me?

Signed: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

Revised 8/2006

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NOV 16 2017

BOCA RATON POLICE DEPARTMENT  
TESTING FACILITY TASK REPORT

SUBJECT: Robert A. Colangelo

CASE #: 17-015515 DATE: 11/12/17

BREATH TESTS RESULTS

1) TIME 0130 AM/PM 2) TIME 0133 AM/PM  
3) TIME \_\_\_\_\_ AM/PM 4) TIME \_\_\_\_\_ AM/PM

BREATH OPERATOR: Deen 768

MAINTENANCE TECHNICIAN: Pare

TESTING OFFICER'S OBSERVATIONS

SPEECH: Slurred, Talkative,

ATTITUDE: Crying, Sad, Talking to him

CLOTHING: Gray Polo, Blue Jeans, Black Shoes

MEDICAL CONDITION: N/A

OTHER: \_\_\_\_\_

COMMENTS: \_\_\_\_\_

\_\_\_\_\_

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**ADULT 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? Home 1700 SE 15<sup>th</sup> St Ft Lauderdale

What street or highway were you on? 2<sup>nd</sup> Avenue

Direction of travel? South

Where did you start driving from? O'Conner's Ocean drive

What City (County) were you stopped in? Delray

What time did you start? 2:30 AM/PM What time is it now 02:00

What is today's date? September 6<sup>th</sup> What day of the week is it? Sunday

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When did you last eat? 1700 What did you eat? Hot dog

What have you been doing the past three hours prior to this stop/accident? 4 beers shooting field

How much do you weigh? 170 Have you been drinking? Yes What were you drinking? Beer

How much? 4 Where? Pub With whom were you drinking? Friends from school

When did you have your first drink? 2100 AM/PM When did you stop drinking? 2200 AM/PM

How did you consume your last two drinks? Quickly

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? \_\_\_\_\_

When did you last work? \_\_\_\_\_

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

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

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

Were you involved in an accident today? Yes

Have you taken any drugs or smoked marijuana today? Yes

What? marijuana When? 22:10

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   
Glass Eye? Yes  No   
False Teeth? Yes  No

Inner ear trouble? Yes  No   
Ear Infection? Yes  No   
Diabetes? Yes  No

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 0155 AM/PM

The date is: Nov (month) 12 (day) 2017 (year)

