0299849

19CT023193NB1653

ARREST / NOTICE TO APPEAR

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

1 JUVENILE

ADMINISTRATION

OBTS Number

Agency ORI Number: 0501700

Agency Name: Jupiter Police Department

Agency Report Number (N.T.A.'s only): 5 4 19-005629

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

If Weapon Seized — Easer Type: NONE

Multiple Clearance Indicator

Location of Arrest (Including Name of Business): JUPITER MEDICAL CENTER, JUPITER FL

Location of Offense (Business Name, Address): 100 BARBADOS DR/PARKSIDE DR, JUPITER, FL 33458

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
12/15/2019	19:32					

DEFENDANT

Name (Last, First, Middle): NEWCOMBE, SARA MATTHEWS

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

Race (W - White, B - Black, I - American Indian, O - Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	F	02/15/1969	5'09	150	BLUE	BLONDE /	FAIR	Thin

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

Marital Status: S — Religion: OTHER

Indication of: Alcohol Influence ☒ Yes ☐ No ☐ Unk. ☐ Drug Influence

Local Address (Street, Apt. Number) (City) (State) (Zip): 1321 13TH WAY, WEST PALM BCH, FL 33407 — Phone: (954) 650-6694 — Residence Type: 1. City 3. Florida 2. County 4. Out of State: 2

Permanent Address (Street, Apt. Number) (City) (State) (Zip): 1321 13TH WAY, WEST PALM BCH, FL 33407 — Phone: (954) 650-6694 — Address Source: FL DL

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

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
N251793695550 / FL	[redacted]		CATSKILL, NY, United	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 ☐ Other: ☐ Legal Custodian — Name (Last, First, Middle) — Residence Phone

Address (Street, Apt. Number) (City) (State) (Zip) — Business Phone

Notified by: (Name) — Date — Time — JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT JAC 3. Incarcerated

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

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.
☐ Yes, by: ☐ No:

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, O. Opium/Deriv., M. Marijuana, S. Synthetic, P. Paraphernalia/Equipment, U. Unknown, Z. Other

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #	Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
DUI - DAMAGE TO PERSON/PROPERTY	316.193(3)(C)(1)			N	/		1	☐ Y ☒ N		OR
DUI - REFUSAL TO SUBMIT WITH A PRIOR REFUSAL	316.1939(1)			N	/		1	☐ Y ☒ N		OR
CRASH - HIT & RUN W/ PROPERTY DAMAGE	316.061(1)			N	/		1	☐ Y ☒ N		OR

INTAKE

Health / Apparent Physical Condition of Defendant — Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries — Explain:

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

PROPERTY - Received By — Released By — Released To

Transported By — Date Transported — Time Transported — Other

NOTICE TO APPEAR

☒ INSTRUCTION NO. 1 - Mandatory appearance in court
☐ INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.

Location (Court, Room): North County PALM BEACH GARD

Court Date and Time: 01/15/2020 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 COMTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.

Signature of Defendant (or Juvenile and Parent/Custodian) — Date Signed

No Photo Available

ADMIN

HOLD for Other Agency — ☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other

Signature of Arresting Officer: [signature] 12/15/19

Name of Arresting Officer (Print): ROCHA, LUIS — I.D. #: 1177

Name Verification (Printed by Arrestee) (PRINT):

Intake Officer: D/S. C. GILYARD — I.D. # — Pouch #: #7392

Transporting Officer: L. Rocha — I.D. #: 1177 — Agency: JPD

Witness here if subject signed with an "X".

PAGE 1 OF 1

☒ COURT ☒ STATE ATTORNEY ☐ AGENCY ☒ CENTRAL RECORDS ☐ JAIL ☒ CRIME ANALYSIS ☐ P.T.O. ☐ DEFENDANT

PROBABLE CAUSE AFFIDAVIT

OBTS Number:

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

ADMIN

Agency ORI Number	Agency Name	Agency Report Number
FL 0501700	JUPITER POLICE DEPARTMENT	5 | 4 | 19-005629

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)	Alias	Race	Sex	Date of Birth
NEWCOMBE, SARA MATTHEWS		W	F	02/15/1969

CHARGES

Charge Description	Charge Description
316.193(3)(C)(1) DUI - DAMAGE TO PERSON/PROPERTY	316.1939(1) DUI - REFUSAL TO SUBMIT WITH A PRIOR R
316.061(1) CRASH - HIT & RUN W/ PROPERTY DAMAGE	

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
State Of Florida			

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

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

PROBABLE CAUSE STATEMENT

The undersigned certifies and swears that he/she has just and resonable 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 committ the below acts.

☒ was found to have committed the below acts, resulting from my (described) investigation.

On the 15 day of December, 2019 at 17:06 (Specifically include facts constituting cause for arrest.)

On 12/15/2019 at approximately 1706 hours I was dispatched to the intersection of Barbados Dr and Parkside Dr in reference to a traffic crash. Northcom advised that a second caller stated that the white vehicle tried to leave and then hit a tree.

Upon arrival I made contact with the driver of a white Hyundai bearing FL tag LCFV35, who was identified via her Florida Driver License as Sara M Newcombe (W/F 02/15/1969). Newcombe was sitting in the driver seat and I observed her to have blood shot, glassy eyes. As Newcombe spoke she would slur her words.Due to the airbag deployment in her vehicle, Newcombe was transported to the Jupiter Medical Center by PBC Fire Rescue to be medically cleared. While at the Jupiter Medical Center I explained to Newcombe that the crash investigation portion was complete and I was now starting a DUI investigation. I read Newcombe Miranda Rights from a prepared text, and she stated that she understood her rights. Newcombe told me that before the crash she was at Arrons Table/Kitchen for brunch. Newcombe told me that she had "2 champagne" while she was there. Newcombe stated that she was on her way. Newcombe's current address is in West Palm Beach. The traffic crash occurred on a neighborhood street away from the direction of interstate 95. As Newcombe spoke I detected a strong odor of an unknown alcoholic substance coming from her person. The odor intensified the longer I spoke with and was with Newcombe.

It should be noted that this crash occurred at 1706 hours. While waiting on medical staff to evaluate Newcombe, more than two hours had elapsed since the time of the crash. In my experience as a Police Officer, even when medical clearance is obtained, it takes approximately 10 minutes to load the prisoner into the vehicle and approximately 25 minutes to drive from JMC to the jail. This time delay made obtaining a breath sample impossible and impractical due to her length of stay in the medical facility.

Because the possibility of obtaining a breath sample was impossible and impractical, I requested Newcombe provide a lawful sample of her blood for the purpose of detecting the

ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

K.A. 3/3/1200
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

12/15/2019
DATE

12/15/2019
SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

ROCHA, LUIS (1177)
NAME OF OFFICER (PLEASE PRINT)

12/15/2019
DATE

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O.

ADMIN

OBTS Number	PROBABLE CAUSE AFFIDAVIT SUPPLEMENT	1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias	1	JUVENILE

Agency ORI Number	Agency Name	Agency Report Number
FL 0501700	JUPITER POLICE DEPARTMENT	5 | 4 | 19-005629

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)	Alias	Race	Sex	Date of Birth
NEWCOMBE, SARA MATTHEWS		W	F	02/15/1969

PROBABLE CAUSE STATEMENT

alcohol content and/or the presence of chemical or controlled substances. Newcombe submitted, but as I was preparing for the blood draw she recanted. I read Newcombe implied consent from a prepared text, and she refused again. At this time Newcombe was advised that she was under arrest for DUI. During the inventory of Newcombe`s vehicle there was a handheld breathalyzer found in the center console.

The passenger of V2 in the crash, Michael P Adelman (W/M 11/11/1956) stated that after Newcombe crashed into his vehicle she stopped. Adelman said that he got out and told Newcombe to stop. Adelman stated that Newcombe traveled forward and struck there car a second time. Adelman told me that he watched Newcombe drive away west on Barbados Dr. Adelman said he watched the car hit the curb and then a tree. Adelman said he went over and observed Newcombe in the driver seat with the airbags deployed.

My investigation determined that there is probable cause that Sara Newcombe did drive or be in actual physical control of a vehicle while under the influence of alcoholic beverages, or chemical substances as set forth in Florida Statute 877.111, or any substance controlled under Chapter 893 or any combination thereof, to the extent that his/her normal faculties were impaired, and, during the course of operating a vehicle, and by reason of such operation, did cause or contribute to causing damage to the person or property of Marcia Adelman (W/F 02/10/1961), contrary to Florida Statute 316.193(3)(a),(b) and (c)(1).

Newcombe also, did drive a vehicle involved in a crash resulting only in damage to a vehicle or other property which was driven or attended by any person, and did fail to immediately stop such vehicle at the scene of such crash or as close thereto as possible and forthwith return to the scene and remain at the scene of the crash until he or she fulfilled the requirements of Florida Statute 316.062, contrary to Florida Statute 316.061(1).

A check of Newcombe`s driving history revealed that her Florida Driver License was previously suspended for a refusal to submit to a lawful test of her breath, urine, or blood. I find probable cause that Newcombe did refuse to submit to a chemical or physical test of her blood, as described in s. 316.1932, and whose driving privilege had been previously suspended for a prior refusal to submit to a lawful test of his or her breath, urine, or blood, and Sara Newcombe had been placed under lawful arrest by a law enforcement officer with probable cause to believe Sara Newcombe was driving or in actual physical control of a vehicle while under the influence of alcoholic beverages, chemical substances, or controlled substances and Sara Newcombe was informed of all the consequences for refusing to submit contained within s. 316.1939, contrary to Florida Statute 316.1939(1).

My body worn camera was utilized.

ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

L.A. 3/3/2020
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)

12/15/2019
DATE

3271177
SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

ROCHA, LUIS (1177)
NAME OF OFFICER (PLEASE PRINT)

12/15/2019
DATE

COURT | STATE ATTORNEY | CENTRAL RECORDS | JAIL | CRIME ANALYSIS | P. I. O.

S

1

19-005194

STATE OF FLORIDA
DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES
AFFIDAVIT OF REFUSAL TO SUBMIT TO
BLOOD TEST

I, Luis Rocha 327/1177, a duly certified Law Enforcement Officer or Correctional Officer,
(Name of Officer reading Implied Consent Warning)

am a member of **Jupiter PD**, and I do swear
(Name of law enforcement agency)

or affirm that on or about the **15** day of **December**, 20 **19**, at **1932** ☑ P.M. ☐ A.M.

DRIVER **Sara** **M** **Newcombe**,
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# **N251793695550**, state of **Florida**, appeared for treatment at a hospital,

clinic, or other medical facility pursuant to s. 316.1932(I)(c), Florida Statutes, and a breath or urine test was impossible or impractical.

That on or about the **15th** day of **December**, 20 **19**, at **1932** ☑P.M. ☐A.M.

in **PALM BEACH** County,

I requested that the driver submit to a **blood test** to determine his or her blood alcohol level and/or the presence of chemical or controlled substances in his or her blood. I informed the driver that refusal to submit to a blood test would result in the suspension of his or her driving privilege for a period of one (l) year for a first refusal, or for a period of eighteen (18) months if his or her driving privilege had been previously suspended for refusing to submit to a breath, urine or blood test. I also informed the driver that if he or she holds a CDL, or was operating a CMV, refusal would result in the disqualification of the Commercial Driver's License/driving privilege for a period of one (1) year in the case of a first refusal or permanently if he or she had been previously disqualified as a result of a refusal to submit to a breath, urine or blood test. The driver nonetheless refused to submit to a blood test.

327/1177
Signature of Law Enforcement Officer or Correctional Officer

THE AFFIDAVIT MUST BE NOTARIZED OR ATTESTED TO (F.S. 117.10)

(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before me this _____ day of _____, 20 _____,

by _____,

who is personally known to me or who has produced _____ as identification

Notary Public _____

The foregoing instrument was sworn and subscribed before me:

313/1260
Signature of Attesting Officer

Title Officer

Date 12/15/19

Note: Mail or hand deliver to the designated Bureau of Administrative Reviews office, Department of Highway Safety and Motor Vehicles, with the driver's license, the appropriate copy of the UTC, and the probable cause affidavit.

HSMV-BAR1002 (REV. 10/16)

WITNESS LIST

CASE NUMBER: 19-005194

ARRESTING OFFICER: Luis Rocha ID327
ADDRESS: 210 MILITARY TRL, JUPITER FL 33458
PHONE NUMBERS (HOME): 561-746-6201 (WORK)
CAN TESTIFY TO: Statements made on scene and driver observations.

NAME:
ADDRESS: 210 Military Trl, Jupiter FL 33458
PHONE NUMBERS (HOME) 561-746-6201 (WORK)
CAN TESTIFY TO:

NAME:
ADDRESS 210 Military Trl, Jupiter FL 33458
PHONE NUMBERS (HOME) 561-746-6201 (WORK)
CAN TESTIFY TO:

NAME: James Quick
ADDRESS 128 Barbados Dr, Jupiter FL 33458
PHONE NUMBERS (HOME) 561-351-8666 (WORK)
CAN TESTIFY TO: Statements made by defendent prior to Officer arrival.

NAME: Michael Adelman
ADDRESS 376 San Remo Dr, Jupiter FL 33458
PHONE NUMBERS (HOME) 908-635-4952 (WORK)
CAN TESTIFY TO: Actions and statements of the defendent prior to Officers arrival.

NAME:
ADDRESS
PHONE NUMBERS (HOME) (WORK)
CAN TESTIFY TO:

NAME:
ADDRESS
PHONE NUMBERS (HOME) (WORK)
CAN TESTIFY TO:

NAME:
ADDRESS
PHONE NUMBERS (HOME) (WORK)
CAN TESTIFY TO:

NAME:
ADDRESS
PHONE NUMBERS (HOME) (WORK)
CAN TESTIFY TO:

NAME:
ADDRESS
PHONE NUMBERS (HOME) (WORK)
CAN TESTIFY TO:

NAME:
ADDRESS
PHONE NUMBERS (HOME) (WORK)
CAN TESTIFY TO:

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:	

REVIEW COMPLETED BY

Booking Number: 2019040033	**Date:** 12/16/2019
	Specialist Name/ID: AM/31562