

6463229

1434

OBTS Number		ARREST / NOTICE TO APPEAR						1. Arrest		3. Request for Warrant		4. Request for Capias		1		Juvenile																			
ADMINISTRATIVE	Agency ORI Number		Juvenile Referral Report						2. N.T.A.		3. Request for Warrant		4. Request for Capias		1		Juvenile																		
	FLO - 500000		PALM BEACH COUNTY SHERIFF'S OFFICE						Agency Report Number (N.T.A.'s only)		06-		16122452		1		Juvenile																		
ChargeType: Check as many as apply.		<input type="checkbox"/> 1. Felony		<input type="checkbox"/> 3. Misdemeanor		<input type="checkbox"/> 5. Ordinance		Weapon Seized / Type		1 Yes		Multiple Clearance Indicator		01																					
		<input type="checkbox"/> 2. Traffic Felony		<input type="checkbox"/> 4. Traffic Misdemeanor		<input type="checkbox"/> 6. Other		2 1 Yes		2. No																									
Location of Arrest (Including Name of Business)		5300 Block Lake Worth Rd.						Location of Offense (Business Name, Address)						5300 Block Lake Worth Rd.																					
Date of Arrest		09/03/2016		Time of Arrest		0715		Booking Date		Booking Time		Jail Date		Jail Time		Location of Vehicle																			
																Gardens Towing																			
Name (Last, First, Middle)		Stephen Phillip Tyler						Alias (Name, DOB, Soc. Sec. #, Etc.)																											
Race		W - White I - American Indian		Sex		M		Date of Birth		05/28/1991		Height		6'		Weight		150		Eye Color		Green		Hair Color		Blonde		Complexion		Medium		Build		Thin	
Scars, Marks, Tatoos, Unique Physcal Features (Location, Type, Description)		None						Marital Status		Single		Religion		NONE		Indication of:		Y		N		Unk.													
Local Address (Street, Apt. Number)		3260 Seaward Dr., Pompano Beach, FL 33062						(City)		(State)		(Zip)		Phone		954) 601-6894		Residence Type:		1. City		3. Florida		2. County		4. Out of State		3							
Permanent Address (Street, Apt. Number)		3260 Seaward Dr., Pompano Beach, FL 33062						(City)		(State)		(Zip)		Phone		(854) 601-6894		Address Source		FL DI															
Business Address (Name, Street)		None						(City)		(State)		(Zip)		Phone		None		Occupation		None															
D/L Number, State		T460-795-91-188-0		Soc. Sec. Number		[REDACTED]		INS Number		Place of Birth (City, State)						Citizenship																			
Co-Defendant Name (Last, First, Middle)								Race		Sex		Date of Birth				West Palm Beach, FL		US																	
Co-Defendant Name (Last, First, Middle)								Race		Sex		Date of Birth																							
<input type="checkbox"/> Parent <input type="checkbox"/> Legal Custodian <input type="checkbox"/> Other		Name (Last) (First) (Middle)														Residence Phone																			
Address (Street, Apt. Number)								(City)		(State)		(Zip)						Business Phone																	
Notified by: (Name)								Date		Time																									
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.										School Attended						Grade																			
<input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property														Value of Property																			
Drug Activity		S. Sell		R. Smuggle		K. Dispense/ Distribute		M. Manufacture/ Produce/ Cultivate		Z. Other		Drug Type		B. Barbiturate		H. Hallucinogen		P. Paraphernalia/ Equipment		U. Unknown															
N. N/A		B. Buy		D. Deliver		E. Use						N. N/A		C. Cocaine		M. Marijuana		O. Opium/Deriv.		S. Synthetics		Z. Other													
P. Possess		T. Traffic										A. Amphetamine		E. Heroin																					
Charge Description		DUI						Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N				Statute Violation Number		316.193(1a)		Violation of ORD #																	
Drug Activity		Drug Type		Amount / Unit		Offense #		16122452						Warrant / Capias Number				Bond OK																	
N		N		NA																															
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																	
Drug Activity		Drug Type		Amount / Unit		Offense #								Statute Violation Number				Violation of ORD #																	
Drug Activity		Drug Type		Amount / Unit		Offense #								Warrant / Capias Number				Bond																	
Drug Activity		Drug Type		Amount / Unit		Offense #								Statute Violation Number				Violation of ORD #																	
Drug Activity		Drug Type		Amount / Unit		Offense #								Warrant / Capias Number				Bond																	
Location (Court, Room Number, Address)		3228 Gun Club Rd. West Palm Beach, FL 33406																																	
Court Date and Time		Month September		Day 29		Year 2016		Time 8:30		AM		PM		11																					
NOTICE TO APPEAR		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															
HOLD for other Agency		Name:		Signature of Arresting Officer																				Name Verification (Printed by Arrestee)											
		X		D/S																				SEP 3 AM 10:09											
<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal		<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other:		Name of Arresting Officer (Print)		I.D. #																				(PRINT)									
				D/S R. McVay		24993																													
Intake Deputy		I.D. #		Pouch #		Transporting Officer		ID #		Agency																				PAGE					
		1434		D/S R. McVay 24993		PBSO																								1					
DISTRIBUTION: WHITE - COURT COPY		GREEN - STATE ATTORNEY		YELLOW - AGENCY		PINK - AGENCY																				OF 1									
PBSO #148 REV. 8/97																										SCANNED									
																										SEP 07 2016									
																										GOLD - DEFENDANT N.T.A.'S ONLY									

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 3rd DAY OF September 20 16, AT 0653

AM PM

SUBJECT: Stephen Phillip Tyler

CASE NUMBER: 16122452

AGENCY: PALM BEACH COUNTY SHERIFF'S OFFICE ARRESTING OFFICER: R. McVay

PERSONAL CONTACT

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

I saw a 2007 black Ford truck bearing Florida tag 987HGT eastbound on Lake Worth Rd from Via Poinciana. The Ford truck was making a high pitched squealing sound from the front passenger side tire area which appeared to be from crash damage.

I followed behind the truck in my marked patrol vehicle in the center lane and watched as the truck continually swerved from the left median lane over the center lane divider and back over to the median lane divider of Lake Worth Rd. The truck breeched the lane dividers by more than a foot in both directions. Around the truck were several vehicles which were also eastbound on Lake Worth Rd. These vehicles were affected by the trucks driving pattern and they had to slow and move over to avoid being hit. I activated my overhead emergency lights and the W/M driver pulled into the median left turn lane in the 5300 block of Lake Worth Rd. It was noted after the initial traffic stop that this was the same vehicle that had been in a traffic crash in the area of SR 7 and Yamato Rd. at an unknown exact location, and called in by a citizen.

OBSERVATION OF DRIVER:

Upon approaching the W/M driver(later identified as Stephen Phillip Tyler 05/28/1991) I could smell a strong odor of an unknown alcoholic beverage coming from his breath and person. His eyes were half closed and glassy. He was leaned back in his seat and while speaking his speech was slurred and he was very polite. While speaking with him outside of his vehicle he was leaning up against the side of his truck.

DRIVER'S STATEMENTS:

I explained to Tyler that I had pulled him over due to his swerving and his truck making a loud squealing sound from his tire area. Tyler advised that he had been drinking at Scores strip club in Lake Worth but he was under the limit. He advised that his tire was messed up so he put a spare on. I asked him where he was headed and he advised he was westbound on Lake Worth Rd. and almost at SR7 heading to Yamato Rd.

ODORS:

I could smell a strong odor of an unknown alcoholic beverage coming from his breath and person.

GENERAL OBSERVATIONS

SPEECH: Slurred

ATTITUDE: Pleasant and polite

CLOTHING: White Tshirt and brown jeans

MEDICAL/OTHER: None

STATE OF FLORIDA
COUNTY OF PALM BEACH

R. McVay

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 3rd day of September 20 16 by D/S R. McVay

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

JAMES G. BIGGS

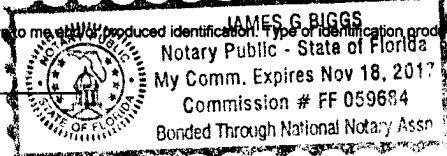
Notary Public - State of Florida

My Comm. Expires Nov 18, 2017

Commission # FF 059684

Bonded Through National Notary Assn

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



SCANNED

SEP 07 2016

SUBJECT: Stephen Phillip Tyler

CASE NUMBER: 16122452

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

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

Other Observations:

WALK & TURN:

Refused. I explained to Stephen Tyler that if he refused that I would have to make a decision based on his driving pattern and my observations of him. Tyler advised that he wanted to make the process go faster and he did not want to do the tasks.

ONE LEG STAND:

Refused. I explained to Stephen Tyler that if he refused that I would have to make a decision based on his driving pattern and my observations of him. Tyler advised that he wanted to make the process go faster and he did not want to do the tasks.

FINGER TO NOSE:

Refused. I explained to Stephen Tyler that if he refused that I would have to make a decision based on his driving pattern and my observations of him. Tyler advised that he wanted to make the process go faster and he did not want to do the tasks.

ROMBERG ALPHABET:

Refused. I explained to Stephen Tyler that if he refused that I would have to make a decision based on his driving pattern and my observations of him. Tyler advised that he wanted to make the process go faster and he did not want to do the tasks.

BREATH TEST RESULTS: 1) .90 2) .101 3) 4)

STATE OF FLORIDA
COUNTY OF PALM BEACH

R. McVay

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 3rd day of September 2016 by D/S R. McVay

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

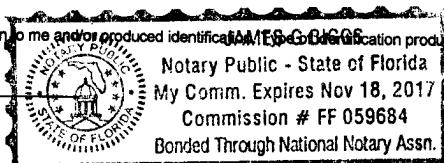
Notary Public - State of Florida

My Comm. Expires Nov 18, 2017

Commission # FF 059684

Bonded Through National Notary Assn.

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



SCANNED
SEP 07 2016

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 DIS McVay of the PBSO.

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) Read on Camera

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.

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SEP 07 2016

SUSPECT'S SIGNATURE: (X) Read on Camera

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? _____ WHERE DID YOU START? _____

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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SEP 07 2016

WITNESS LIST

16122452

CASE NUMBER:

ARRESTING OFFICER: **R. McVay**

ADDRESS: 2995 S. Jog Rd. Greenacres, Fl 33467

PHONE NUMBERS (HOME): _____ (WORK) 561-688-5210

CAN TESTIFY TO: Driving Pattern traffic stop

NAME: _____

ADDRESS: _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

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NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

SCANNED
SEP 07 2016