

0374039

ARREST / NOTICE TO APPEAR

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

1800 25 3782

OBTS Number	Agency ORI Number <b>0501700</b>		Agency Name <b>Jupiter Police Department</b>		Agency Report Number (N.T.A.'s only) <b>5   4   18-001467</b>	
Charge Type: Check as many as apply	<input checked="" type="checkbox"/> 1. Felony	<input type="checkbox"/> 2. Traffic Felony	<input type="checkbox"/> 3. Misdemeanor	<input checked="" type="checkbox"/> 4. Traffic Misdemeanor	<input type="checkbox"/> 5. Ordinance	<input type="checkbox"/> 6. Other
Location of Arrest (Including Name of Business) <b>SHELL GAS STATION, 6812 W 706, JUPITER L</b>				Location of Offense (Business Name, Address) <b>6812 W INDIANTOWN RD, JUPITER, FL 33458</b>		
Date of Arrest <b>03/15/2018</b>	Time of Arrest <b>21:48</b>	Booking Date <b>03/16/2018</b>	Booking Time <b>00:25</b>	Jail Date	Jail Time	Location of Vehicle <b>EAST COAST TOWING</b>
Name (Last, First, Middle) <b>SZABO, TIBOR ANTHONY</b>			Alias: Alias (Name, DOB, Soc. Sec. #, Etc.)			
Race W - White B - Black	I - American Indian O - Oriental/Asian	Sex <b>M</b>	Date of Birth <b>10/06/1972</b>	Height <b>5'10</b>	Weight <b>155</b>	Eye Color <b>BROWN</b>
Hair Color <b>BROWN</b>		Complexion <b>LIGHT</b>		Build <b>Thin</b>		
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)			Marital Status <b>M</b>	Religion	Indication of: Alcohol Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk <input type="checkbox"/> Drug Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk <input type="checkbox"/>	
Local Address (Street, Apt. Number) <b>414 LISA KAREN CIR, APOPKA, FL 32712</b>		(City)	(State)	(Zip)	Phone	
Permanent Address (Street, Apt. Number) <b>414 LISA KAREN CIR, APOPKA, FL 32712</b>		(City)	(State)	(Zip)	Phone	
Business Address (Name, Street)		(City)	(State)	(Zip)	Phone	
D/L Number, State <b>S100801723660 / FL</b>		INS Number		Place of Birth (City, State) <b>PASCACK VALLEY, NJ</b>		Citizenship
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)			Residence Phone		Business Phone	
Address (Street, Apt. Number)			(City)	(State)	(Zip)	
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 <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.			School Attended		Grade	
Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			Description of Property		Value of Property	
Drug Activity S. Sell B. Buy P. Possess			R. Smuggle D. Deliver E. Use		K. Disperse/ 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. Synthetic	
U. Unknown Z. Other						
Charge Description <b>CHILD NEGLECT</b>			Statute Violation Number <b>827.03(2)(D)</b>		Violation of ORD #	
Drug Activity	Drug Type <b>N</b>	Amount / Unit	Offense #	Counts <b>1</b>	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant / Capias Number
Charge Description <b>DUI - DRIVING WHILE UNDER INFLUENCE</b>			Statute Violation Number <b>316.193(1)</b>		Violation of ORD #	
Drug Activity	Drug Type <b>N</b>	Amount / Unit	Offense #	Counts <b>1</b>	Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Warrant / Capias Number
Charge Description			Statute Violation Number		Violation of ORD #	
Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N	Warrant / Capias 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			
Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> T.O.T. County Jail			PROPERTY - Received By		Released By	
<input type="checkbox"/> Posted Bond <input type="checkbox"/> South County Mental Health			Released To			
Transported By			Date Transported	Time Transported	Other	
<input checked="" type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court			Location (Court, Room)			
<input type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court			Court Date and Time			
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			Date Signed			
HOLD for Other Agency			Signature of Arresting Officer		Name Verification (Printed by Arrestee)	
<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest			Name of Arresting Officer (Print) <b>BORROWS, ANDREW</b>		(PRINT) <b>1138</b>	
<input type="checkbox"/> Suicidal <input type="checkbox"/> Other			Transporting Officer <b>OFC A BORROWS</b>		I.D. # <b>380</b>	
Pouch #			Agency <b>JPD</b>		Witness here if subject signed with an "X".	

14500  
1500  
2018 MAR 16 AM 5:53  
No Photo Available

# D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 15th DAY OF March 20 18, AT 2115 AM  PM

SUBJECT: Szabo Tibor Anthony CASE NUMBER: 18-001467

AGENCY: JUPITER POLICE DEPARTMENT ARRESTING OFFICER: Ofc. A Borrows 380 / 1138

## PERSONAL CONTACT

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

Sergeant Bujnowski was flagged down by Steffen VanGough and Ciera Miller at the gas station located at 6812 West Indiantown Road in reference to a very erratic driver that Miller and VanGough had observed. The driver had pulled off from I-95 in the same gas station. The vehicle was a 2011 Ford SUV bearing Florida License Plate BYSV56. Sergeant Bujnowski made contact with the driver, Tiboer Szabo. Szabo was accompanied by [REDACTED] in the vehicle. Szabo was very restless and rambling. Sergeant Bujnowski then asked me to respond to the scene to conduct a DUI investigation. Officer Hobby responded to the scene and took video recorded statements from Miller and VanGough. Upon my arrival, Szabo was sitting outside his vehicle.

## OBSERVATION OF DRIVER:

Szabo was restless. He fidgeted constantly and was very talkative. Szabo was unable to stand still for or cease movements.

## DRIVER'S STATEMENTS:

Szabo tended to ramble when he spoke. Szabo denied taking any drugs at all, prescription or otherwise. Szabo had difficulty concentrating and having a cogent conversation.

## ODORS:

None noted

## GENERAL OBSERVATIONS

SPEECH: Rapid, rambling, occasionally slurred

ATTITUDE: Cooperative, hyper, friendly

CLOTHING: Flannel jacket, blue gym shorts, black flip flops

MEDICAL/OTHER: Heart problem, high blood pressure, not currently on medication

STATE OF FLORIDA  
COUNTY OF PALM BEACH

Ofc. A Borrows 380 / 1138

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 15th day of March 20 18 by Ofc. A Borrows 380 / 1138

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

Samantha Palmer  
Commission # FF172377  
Expires: OCT 28, 2018  
BONDED THRU  
1ST FLORIDA NOTARY, LLC

Notary Public, Clerk of Court, Officer, F.S.S. 117.001

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: 80-006477 Software: 8100.27  
Date of Test: 03/15/2018

Date of Last Agency Inspection: 03/09/2018  
Observation Period Began: 22:30  
Subject's Name: TIBOR A SZABO

DOB: 10/06/1972 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	22:58
	Air Blank	0.000	22:58
	Control Test	0.080	22:59
	Air Blank	0.000	22:59
	Subject Sample #1	0.000	23:00
	Air Blank	0.000	23:00
	Air Blank	0.000	23:02
	Subject Sample #2	0.000	23:03
	Air Blank	0.000	23:03
	Control Test	0.079	23:04
	Air Blank	0.000	23:04
	Diagnostics Check	OK	23:04

Cylinder Lot: 22817080A5  
Exp: 10/05/2019

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 SAMANTHA M PALMER, 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 11B-8, Florida Administrative Code, and this form is a true and accurate report of that breath test.

Breath Test Operator: [Signature] Date: 3/15/18  
Signature

Sworn to (or affirmed) before me this 15<sup>th</sup> day of MARCH, 2018  
[Signature] OFC. BORROWS #380  
Signature of Notary Public-State of Florida 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.

SUBJECT Szabo

Tibor

CASE NUMBER 18-001467

**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:**

**Difficulty following stimulus**

**WALK & TURN:**

Szabo lost his balance from the starting position several times. Szabo crouched down and made exaggerated stretching motions several times. Szabo asked several times how to turn properly. Szabo started the task early. Szabo used his arms for balance on the 2nd and 3rd steps. Szabo stopped for balance on the third step. Szabo then stopped after the 9th step. He then took a 10th step and asked what to do next. Szabo then pivoted around on both feet. Szabo used his arms for balance throughout the return phase. Szabo took 11 steps, stopping only when he reached the end of the line.

**ONE LEG STAND:**

Szabo had body tremors evident. Szabo was swaying during the task. Szabo placed his foot down on 1000-11. Szabo then placed his foot down again at 1000-21.

**FINGER TO NOSE**

L1: Szabo touched to the right of the tip of his nose and asked if he should bring his finger back down. R2: Szabo touched the tip of his nose with the tip of his finger but again forgot to put his finger back down to his side. L3: Szabo touched the tip of his nose with the pad of his finger. Szabo was swaying visibly during this time and almost lost his balance. R4: Szabo touched the tip of his nose with the pad of his finger. R5: Szabo touched the tip of his nose with the pad of his finger. L6: Szabo touched the tip of his nose with the pad of his finger.

**ROMBERG ALPHABET:**

Szabo stated the alphabet correctly. He again had evident body tremors.

**BREATH TEST RESULTS:**      .000                      .000                      Urine

STATE OF FLORIDA  
COUNTY OF PALM BEACH

**Ofc. A Borrows 380 / 1138**

(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to, affirmed and subscribed before me this 15th day of March 2018 by Ofc. A Borrows 380 / 1138

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

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



Samantha Palmer  
Commission # FF172377  
Expires: OCT 28, 2018  
BONDED THRU  
1ST FLORIDA NOTARY, LLC

# TESTING FACILITY TASK REPORT

AGENCY: JPD/BORROWS

SUBJECT: SZABO, TIBOR

CASE NUMBER: 18-050636

DATE: Mar 15, 2018

VIDEO DVD NUMBER: N/A

BEGINNING TIME: 2255

ENDING TIME: 2316

BREATH TESTS RESULTS: 1) .000 TIME 2300 A.M.  P.M.  2) .000 TIME 2303 A.M.  P.M.   
3) XX TIME XX A.M.  P.M.  4) XX TIME XX A.M.  P.M.

BREATH OPERATOR: S. PALMER #24520

MAINTENANCE TECHNICIAN: J Karlecke #6467

## TESTING OFFICER'S OBSERVATIONS

SPEECH: SLOW

ATTITUDE: TALKATIVE, RAMBLING, FIDGETTY, COOPERATIVE

CLOTHING: GREEN PLAID JACKET, NO SHIRT, NAVY BLUE GYM SHORTS, BLACK FLIP FLOPS

MEDICAL CONDITIONS: HIGH BLOOD PRESSURE

MEDICATIONS: "I HAVE SOME, BUT I DONT TAKE THEM"

## OTHER:

EYES GLASSY, SMALL PUPILS

## COMMENTS:

ARRESTING OFFICER CONDUCTED THE 20 MINUTE OBSERVATION BEGINNING AT 2230  
SUBJECT AGREED TO TAKE BREATH TEST  
TECH EXPLAINED TEST INSTRUCTIONS, SUBJECT STATED HE UNDERSTOOD  
AND PROVIDED TWO ADEQUATE BREATH SAMPLES SUCCESSFULLY  
TECH READ TEST RESULTS, SUBJECT STATED HE UNDERSTOOD  
A/O REQUESTED URINE SAMPLE, SUBJECT AGREED TO PROVIDE URINE @ 2305  
A/O READ I/C, SUBJECT STATED HE UNDERSTOOD I/C  
A/O READ RIGHTS, SUBJECT STATED HE UNDERSTOOD HIS RIGHTS  
A/O CONDUCTED Q&A, SUBJECT ANSWERED QUESTIONS

URINE SAMPLE WAS PROVIDED @ 2320  
DRE EVAL WAS CONDUCTED BY ROBERT ROBINSON

# WITNESS LIST

CASE NUMBER: 18-001467

ARRESTING OFFICER: Ofc. A Borrows 380 / 1138

ADDRESS: 210 Military Trail, Jupiter Fl 33458

PHONE NUMBERS (HOME): \_\_\_\_\_ (WORK) 561 746 6201

CAN TESTIFY TO: PC

NAME: Sergeant Marc Bujnowski

ADDRESS: 210 Military Trail, Jupiter Fl 33458

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) 561 746 6201

CAN TESTIFY TO: Initial Stop

NAME: Officer Robert Robinson #1203 IACP 29030, Tequesta Police Department

ADDRESS 357 Tequesta Drive, Tequesta Fl 33469

PHONE NUMBERS (HOME) \_\_\_\_\_ (WORK) \_\_\_\_\_

CAN TESTIFY TO: DRE Eval

NAME: Officer Matthew Hobby 384

ADDRESS 210 Military Trail, Jupiter Fl 33458

PHONE NUMBERS (HOME) () (WORK) ()

CAN TESTIFY TO: Scene

NAME: Steffen R VanGough

ADDRESS 726 Ranch Hill Dr, Clarksville, TN 37042

PHONE NUMBERS (HOME) 772 237 9601 (WORK) \_\_\_\_\_

CAN TESTIFY TO: Statement of driving pattern

NAME: Ciera Miller

ADDRESS 2158 Bateman Branch Road, Erin, TN 37061

PHONE NUMBERS (HOME) 931 622 0734 (WORK) \_\_\_\_\_

CAN TESTIFY TO: Statement re driving pattern

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: \_\_\_\_\_

NOT A CERTIFIED COPY

SUBJECT: Suzbe Tumor CASE NUMBER: 18-001467

### 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? 9th St

WHAT STREET OR HIGHWAY WERE YOU ON? 9th St

DIRECTION OF TRAVEL? \_\_\_\_\_ WHERE DID YOU START? \_\_\_\_\_

WHAT TIME DID YOU START? \_\_\_\_\_ WHAT TIME IS IT NOW? \_\_\_\_\_

WHAT IS TODAY'S DATE? 11/21 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? (1)

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? NO 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: Otc Borrows 11220

SUBJECT: Sazba, Tibor CASE NUMBER: 18-001467

**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 Off. Borrows of the FD

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) \_\_\_\_\_

**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.

SUSPECT'S SIGNATURE: (X) Keas on Camera