

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 29 DAY OF December 20 17 AT 11:56 AM PM

SUBJECT: Toby Wayne Taylor CASE NUMBER: 17-001706

AGENCY: P.B.D. ARRESTING OFFICER: J.P. Rothenburg 9269

PERSONAL CONTACT

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

Driving on flat tire

OBSERVATION OF DRIVER:

Slurred speech, forgetful, inability to maintain balance while standing and walking

DRIVER'S STATEMENTS:

Stated "it's not alcohol" / Stated he had not been drinking / Stated he had taken Valium and Percoset, oxycodone at approximately 9 p.m.

ODORS:

GENERAL OBSERVATIONS

SPEECH: slurred

ATTITUDE: quiet, forgetful, cooperative

CLOTHING: jeans, tennis shoes, collared shirt

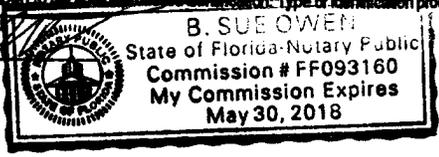
MEDICAL/OTHER:

STATE OF FLORIDA
COUNTY OF BALM BEACH

[Signature]
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 30th day of December 20 17 by J.P. Rothenburg

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



SCA
DEC

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

LT EYE-LACK OF SMOOTH PURSUIT

RT EYE-LACK OF SMOOTH PURSUIT

LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX DEVIATION

RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX DEVIATION

LT EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

RT EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

Other Observations:

Inability to maintain balance.

WALK & TURN:

- Can't keep balance while listening to instructions.
- Starts too soon
- Stops walking to steady self
- Uses arms for balance
- Improper turn / Incorrect number of steps

ONE LEG STAND:

Taylor did not complete the task for his safety, and his inability to maintain his balance.

FINGER TO NOSE:

- Does not keep eyes closed
- Fails to return arms to the side
- Uses wrong hand for task

ROMBERG/ALPHABET:

- Swaying
- Incorrectly recited alphabet TVU / OR / VOU

BREATH TEST RESULTS:

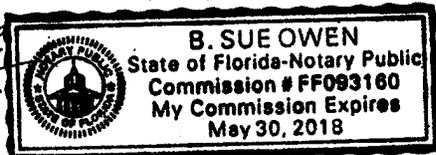
STATE OF FLORIDA
COUNTY OF PALM BEACH

(Signature of Arresting/Investigative Officer)

The foregoing instrument was notarized or sworn before me this 3rd day of December, 2017, by off. Rothenburg

who is personally known to me and/or produced identification. Type of identification produced _____

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





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

PBSO CASE # 17-169409 PBSO ZONE 3-13

AGENCY CASE # 17-001706 CRASH CASE # _____

TIME OF STOP/CRASH 2356 DATE 12/29/17 DAY Sat
12/30/17

SUBJECT'S NAME Toby Wayne Taylor RACE W SEX M

HGT 5'7" WGT 160 DOB 01 127 172

LOCATION 1100 S. Ocean Blvd.

ARRESTING OFFICER'S NAME & ID Rotherburg, Jonathan AGENCY PBPD
9259

DIVISION: Patrol

NOTIFIED BY COMMO yes

ARRIVAL AT FACILITY 0051

ARREST TIME 0029

BREATH RESULTS:

1. **REFUSED**
2. _____
3. _____
4. _____

TESTING OFFICER'S ID 3184 PBSO VIDEOTAPE # N/A

NOT A CERTIFIED COPY

STATE OF FLORIDA
DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES
AFFIDAVIT OF REFUSAL TO SUBMIT TO
BREATH AND/OR URINE TEST

I, Jonathan Rothenburg, a duly certified Law Enforcement Officer or Correctional Officer,
(Name of Officer reading Implied Consent Warning)

am a member of Palm Beach Police Department, and I do swear
(Name of law enforcement agency)

or affirm that on or about the 30 day of December, 20 17, at 0115 P.M. A.M.

DRIVER Toby Wayne Taylor,
(Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# T466 819 72 0270, state of Florida, was placed under lawful arrest for
the offense of DUI by Jonathan Rothenburg and
issued Citation # 3815-XDU
(Name of Arresting Officer)

That on or about the 30th day of December, 20 17, at 0115 P.M. A.M.
in Palm Beach County,

I requested that the driver submit to a breath and/or urine test to determine his or her blood alcohol level and/or the presence of chemical or controlled substances. I informed the driver that the refusal to submit to such test(s) would result in the suspension of his or her driving privilege for a period of one (1) 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 he or she commits a misdemeanor by refusing to submit to a lawful test as requested above if his or her driving privilege has been previously suspended for refusal to submit to a lawful test of his or her breath, urine, or blood. Additionally, I informed the driver that if he or she holds a CDL, or was operating a CMV, refusal will 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 has previously been disqualified as a result of a refusal to submit to any such lawful test. Nonetheless, the driver refused to submit to the test(s) requested.

[Signature]
Signature of Law Enforcement Officer or
Correctional Officer

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

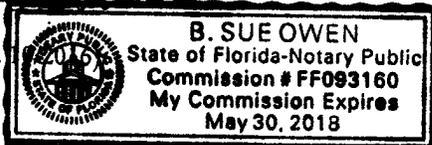
The foregoing instrument was sworn and subscribed before me:

(AFFIX SEAL)

The foregoing instrument was sworn and subscribed before
me this 30th day of December 20 17,
by Ofc Rothenburg,
who is personally known to me or who has produced

_____ as identification
Notary Public [Signature]

HSMV-BAR1001 (REV. _____)



Signature of Attesting Officer _____

Title _____

Date _____

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.

VED
2017

TESTING FACILITY TASK REPORT

AGENCY: _____
SUBJECT: 11/10/11, 7401 CASE NUMBER: 11-117401

DATE: _____ VIDEO TAPE NUMBER: _____

BEGINNING TIME: _____ ENDING TIME: _____

BREATH TESTS RESULTS: **REFUSED** TIME _____ A.M./P.M. 2) _____ TIME _____ A.M./P.M.
3) _____ TIME _____ A.M./P.M. 4) _____ TIME _____ A.M./P.M.

BREATH OPERATOR: _____

MAINTENANCE TECHNICIAN: _____

TESTING OFFICER'S OBSERVATIONS

SPEECH: _____

ATTITUDE: _____

CLOTHING: _____

MEDICAL CONDITIONS: _____ 13

MEDICATIONS: _____

OTHER: _____

COMMENTS: _____

SCANNED
DEC 31

NOT A CERTIFIED COPY

WITNESS LIST

CASE NUMBER: 17-10176

ARRESTING OFFICER [Handwritten Name] PBA

ADDRESS [Handwritten Address]

PHONE NUMBERS (HOME) _____ (WORK) [Handwritten Number]

CAN TESTIFY TO: [Handwritten Answer]

NAME: [Handwritten Name]

ADDRESS [Handwritten Address]

PHONE NUMBERS (HOME) _____ (WORK) [Handwritten Number]

CAN TESTIFY TO: [Handwritten Answer]

NAME: [Handwritten Name]

ADDRESS [Handwritten Address]

PHONE NUMBERS (HOME) _____ (WORK) [Handwritten Number]

CAN TESTIFY TO: [Handwritten Answer]

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

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NAME: _____

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CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

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SUBJECT: _____ CASE NUMBER: _____

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 _____ 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'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) _____

SUBJECT: _____ CASE NUMBER: _____

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? Y

WHERE WERE YOU GOING? Walmart

WHAT STREET OR HIGHWAY WERE YOU ON? E. Main St

DIRECTION OF TRAVEL? N WHERE DID YOU START? Walmart

WHAT TIME DID YOU START? 11:00 WHAT TIME IS IT NOW? 11:30

WHAT IS TODAY'S DATE? 11/17/17 WHAT DAY OF THE WEEK IS IT? Wed

WHAT COUNTY AND CITY ARE YOU IN NOW? Washoe County, NV

WHEN DID YOU LAST EAT? 11:00 WHAT DID YOU EAT? Walmart

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? Walmart

HOW MUCH DO YOU WEIGH? 160 HAVE YOU BEEN DRINKING? Y WHAT? Walmart

HOW MUCH? Walmart WHERE? Walmart WITH WHOM? Walmart

WHEN DID YOU HAVE YOUR FIRST DRINK? Walmart AND YOUR LAST DRINK? Walmart

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? Walmart

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? Walmart ARE YOU UNDER THE INFLUENCE? Walmart

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? Y HOW MUCH? Walmart

WHAT? Walmart WHERE? Walmart WHEN? Walmart

WHAT LINE OF WORK ARE YOU IN? Walmart WHEN DID YOU LAST WORK? Today

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? Walmart WHAT? Walmart

ARE YOU SICK OR INJURED? Walmart WHAT'S WRONG? Walmart

DO YOU LIMP? Walmart DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? Walmart

WERE YOU IN AN ACCIDENT TODAY? Walmart

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? Walmart WHEN? Walmart

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? Walmart WHO? Walmart WHY? Walmart

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? Walmart WHAT? Walmart WHEN? Walmart

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? Walmart IF SO, WHEN WAS YOUR LAST INJECTION? Walmart

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? Walmart WHERE? Walmart

INTERVIEWER: Walmart

WHITE - STATE ATTY. YELLOW - DHSMV PINK - CENTRAL RECORDS GOLD - JAIL