

J-0510179

19CT14917

P-3104

ARREST / NOTICE TO APPEAR

ADMI NIST RATI ON	OBTS Number		Agency ORI Number 0501700		Agency Name Jupiter Police Department		Agency Report Number (N T A 's only) 5, 4 19-003725		1 Arrest 2 N T A 3 Request for Warrant 4 Request for Capas 1		JUVENILE			
DEF END ANT	Charge Type Check as many <input type="checkbox"/> 1 Felony <input type="checkbox"/> 2 Traffic Felony <input checked="" type="checkbox"/> 3 Misdemeanor <input checked="" type="checkbox"/> 4 Traffic Misdemeanor <input type="checkbox"/> 5 Ordinance <input type="checkbox"/> 6 Other		If Weapon Seized		Enter Type NONE		Multiple Clearance Indicator 01							
	Location of Arrest (Including Name of Business) S US I/OCEAN WAY, JUPITER 33477						Location of Offense (Business Name, Address) 1699 S US HIGHWAY 1/OCEAN WAY, JUPITER, FL 33477							
CO DE F	Date of Arrest 08/13/2019		Time of Arrest 20:51		Booking Date 08/13/2019		Booking Time 21:01		Jail Date		Jail Time			
	Name (Last, First, Middle) STRZELECKI, WALDEMAR						Alias (Name, DOB, Soc. Sec #, Etc.)							
J U V E N I L E	Race W - White B - Black O - Oriental/Asian W		Sex M		Date of Birth 11/05/1953		Height 5'09		Weight 180		Eye Color GREEN		Hair Color GREEN	
	Complexion LIGHT		Build Medium		Marital Status M		Religion		Indication of Alcohol Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk <input type="checkbox"/>		Indication of Drug Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk <input type="checkbox"/>		Residence Type 1 City 2 County 3 Florida 4 Out of State 2	
C O D E F	Local Address (Street, Apt Number) 132 LAKESHORE DR. 720, NORTH PALM BEACH, FL 33408		(City)		(State)		(Zip)		Phone (781) 588-2579		Address Source DL			
	Permanent Address (Street, Apt Number) 132 LAKESHORE DR. 720, NORTH PALM BEACH, FL 33408		(City)		(State)		(Zip)		Phone (781) 588-2579		Occupation			
C O D E F	Business Address (Name, Street) S362880534050 / FL		(City)		(State)		(Zip)		Phone		Occupation			
	DL Number, State S362880534050 / FL		Soc Sec Number		INS Number		Place of Birth (City, State) POLAND		Citizenship US					
C O D E F	Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		<input type="checkbox"/> 1 Arrested <input type="checkbox"/> 2 At Large <input type="checkbox"/> 3 Felony <input type="checkbox"/> 4 Misdemeanor <input type="checkbox"/> 5 Juvenile					
	Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		<input type="checkbox"/> 1 Arrested <input type="checkbox"/> 2 At Large <input type="checkbox"/> 3 Felony <input type="checkbox"/> 4 Misdemeanor <input type="checkbox"/> 5 Juvenile					
J U V E N I L E	<input type="checkbox"/> Parent <input type="checkbox"/> Other Name (Last, First, Middle)		Address (Street, Apt Number)		(City)		(State)		(Zip)		Residence Phone			
	<input type="checkbox"/> Legal Custodian		Address (Street, Apt Number)		(City)		(State)		(Zip)		Business Phone			
C O D E F	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							
C O D E F	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 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	
C H A R G E	Charge Description DUI-ENHANCED BAC OVER .15		Amount / Unit		Offense #		Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Warrant / Capas Number		Statute Violation Number 316.193(4)	
	Violation of ORD #		Bond OR											
C H A R G E	Charge Description		Amount / Unit		Offense #		Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Warrant / Capas Number		Statute Violation Number	
	Violation of ORD #		Bond											
C H A R G E	Charge Description		Amount / Unit		Offense #		Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Warrant / Capas Number		Statute Violation Number	
	Violation of ORD #		Bond											
J N T A K E	Health / Apparent Physical Condition of Defendant		Any knowledge of the following Explain <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries		PROPERTY - Received By		Released By		Released To					
	Check which applies <input type="checkbox"/> Released O R <input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> T.O.T County Jail <input type="checkbox"/> Posted Bond <input type="checkbox"/> South County Mental Health													
N O T I C E T O A P P E A R	<input checked="" type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court <input type="checkbox"/> 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 09/18/2019 08:30:00		No Photo Available							
	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) [Signature]		Date Signed 8/13/19									
A D M I N	HOLD for Other Agency		Signature of Arresting Officer [Signature]		Name Verification (Printed by Arrestee) BORROWS, ANDREW		ID # 1138							
	<input type="checkbox"/> Dangerous <input type="checkbox"/> Stuccidal <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other		Name of Arresting Officer (Print) BORROWS, ANDREW		ID # 380		Agency JPD		PAGE 1 OF 1					
A D M I N	Jurat: Deputy DS Collins 7622		Poach #		Transporting Officer OFC BORROWS		ID # 380		Agency JPD		Witness here if subject signed with an "X"			

SCANNED AUG 16 4:23:00
AUG 14 2019

PROBABLE CAUSE AFFIDAVIT

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

1 JUVENILE

OBTS Number		
Agency ORI Number	Agency Name	Agency Report Number
FL 0501700	JUPITER POLICE DEPARTMENT	5 4 19-003725

Charge Type: 1 Felony 2 Traffic Felony 3 Misdemeanor 4. Traffic Misdemeanor 5 Ordinance 6 Other

Name (Last, First, Middle): STRZELECKI, WALDEMAR
 Race: W Sex: M Date of Birth: 11/05/1953

Charge Description: DUI ENHANCED .15

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

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

Business Address (Name, Street): (City): (State): (Zip): Phone: 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 13 day of August, 2019 at 20:37 (Specifically include facts constituting cause for arrest.)

On the above date at approximately 2037 hours I was conducting traffic enforcement in the 2700 block of South US Highway 1, in the Town of Jupiter, Palm Beach County, Florida.

I was in a left turn lane and stationary. I was facing south. I observed a vehicle, later identified to me as a 2013 Volvo bearing Florida license plate LKCZ29 traveling north towards me. It was traveling at a speed of approximately 25 miles per hour in a posted 45 miles per hour zone. I confirmed my visual estimation with my in car Stalker Dual SL radar (s/n DD005051). I heard a clear audio Doppler tone and saw the digital reading indicated a speed of 25 miles per hour. I watched in the side view mirror as the vehicle appeared to be straddling the lane markers and driving erratically. I turned around and caught up to the vehicle, which temporarily sped up to a radar confirmed speed of 36 miles per hour.

As I caught up to the vehicle, I could see it was straddling the lane markers, driving between both lanes. The vehicle was swerving as it drove and had slowed to a speed of about 20 miles per hour. The vehicle then moved to the left hand lane and put its left turn signal on. The vehicle drove by a marked left turn lane and slowed to a near stop in the roadway in the left hand through lane. As there was a large amount of traffic coming up behind me, I initiated a traffic stop of the vehicle based on the erratic driving and my strong concern the driver was sick, tired or impaired.

After the vehicle stopped, I made contact with the driver, Waldemar Strzelecki. Strzelecki was chugging a bottle of water when I walked up to the driver's side door. Strzelecki had glassy eyes and I could smell a strong odor of an unknown alcoholic beverage on his breath. Strzelecki denied having any medical conditions and stated he was OK. Strzelecki appeared highly disoriented and trailed off while answering my questions. Strzelecki fidgeted and reached for the center console several times while I

SWORN AND SUBSCRIBED BEFORE ME

[Signature]
 NOTARY PUBLIC / CLERK OF COURT / DEPUTY CLERK OF COURT
 MY COMMISSION # GG 188278
 EXPIRES: May 30, 2022
 Banded Thru Notary Public Underwriters

[Signature]
 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER
 BORROWS, ANDREW (1138)
 NAME OF OFFICER (PLEASE PRINT)
 08/13/2019
 DATE

PAGE 1 OF 2

PROBABLE CAUSE AFFIDAVIT
SUPPLEMENT

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

1

JUVENILE

OBTS Number	Agency ORI Number FL 0501700		Agency Name JUPITER POLICE DEPARTMENT	Agency Report Number 5, 4 19-003725
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Charge Type Check as many as apply	<input type="checkbox"/> 1 Felony	<input type="checkbox"/> 3 Misdemeanor	<input type="checkbox"/> 5 Ordinance	Special Notes
	<input type="checkbox"/> 2 Traffic Felony	<input checked="" type="checkbox"/> 4 Traffic Misdemeanor	<input type="checkbox"/> 6 Other	

Name (Last, First, Middle) STRZELECKI, WALDEMAR	Alias	Race W	Sex M	Date of Birth 11/05/1953
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spoke to him and I directed him several times not to do so. Upon arrival of backup, I asked Strzelecki to exit his vehicle. He agreed to a check for weapons. I adjusted my vehicle with the intention of completing roadsides. I asked Strzelecki to complete roadsides and he agreed. Strzelecki stated he'd had one drink only. Strzelecki was extremely unsteady on his feet.

I first attempted to conduct the HGN task. Strzelecki was patently unable to follow my instructions and I terminated the task.

I next conducted the Walk and Turn task. Strzelecki lost his balance from the starting position multiple times. He started walking, displayed very noticeable gait ataxia and after a few steps declared he was done and had failed. Strzelecki missed heel to toe, was extremely unsteady on his feet and stumbled off the line.

I asked Strzelecki if he was refusing to continue. He indicated he was. I advised Strzelecki of his Taylor Warnings which he indicated he understood. Strzelecki still refused to continue. I placed him under arrest for DUI and advised him. I secured Strzelecki in handcuffs which I checked for spacing and double locked. I transported Strzelecki to the Palm Beach County Breath Alcohol Testing Facility where I completed a 20 minute observation period. I then requested Strzelecki provide a sample of his breath, which he agreed to do. Strzelecki provided samples of .260 and .272. I then secured Strzelecki in a holding cell while I completed my paperwork. I then booked Strzelecki into the Palm Beach County Jail where I charged him with DUI (enhanced of .15) per FSS 316.193(4).

My on scene investigation was captured on my issued body worn camera. My dash camera was later uploaded to evidence.com.

NOT A CERTIFIED COPY

SWORN AND SUBSCRIBED BEFORE ME	SIGNATURE OF ARRESTING / INVESTIGATING OFFICER <i>[Signature]</i>
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S. 117.10)	BORROWS, ANDREW (1138) NAME OF OFFICER (PLEASE PRINT)
08/13/2019 DATE	08/13/2019 DATE
BEVERLY SUE OWEN MY COMMISSION # GG 188278 EXPIRES: May 30, 2022 Bonded thru Notary Public Underwriters	PAGE 2 OF 2

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) _____

SCANNED

TESTING FACILITY TASK REPORT

AGENCY: _____

SUBJECT: _____ CASE NUMBER: _____

DATE: _____ VIDEO TAPE NUMBER: _____

BEGINNING TIME: _____ ENDING TIME: _____

BREATH TESTS RESULTS: 1) _____ 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: _____

MEDICATIONS: _____

OTHER: _____

COMMENTS: _____

SCANNED

AUG 14 2019

WITNESS LIST

CASE NUMBER: 19-003725

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: Officer Christopher Morgan 378

ADDRESS: 210 Military Trail, Jupiter Fl 33458

PHONE NUMBERS (HOME) _____ (WORK) 561 746 6201

CAN TESTIFY TO: Scene

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) 0 _____ (WORK) 0

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: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

NAME: _____

ADDRESS _____

PHONE NUMBERS (HOME) _____ (WORK) _____

CAN TESTIFY TO: _____

SCANNED

AUG 14 2019

**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: 80-006478 Software: 8100.27
Date of Test: 08/13/2019

Date of Last Agency Inspection: 07/19/2019
Observation Period Began: 21:31
Subject's Name: WALDEMAR STRZELECKI

DOB: 11/05/1953 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	21:56
	Air Blank	0.000	21:56
	Control Test	0.080	21:57
	Air Blank	0.000	21:57
	Subject Sample #1	0.260	21:58
	Air Blank	0.000	21:59
	Air Blank	0.000	22:01
	Subject Sample #2	0.272	22:01
	Air Blank	0.000	22:02
	Control Test	0.079	22:02
	Air Blank	0.000	22:03
	Diagnostics Check	OK	22:03

Cylinder Lot: 00919080A3
Exp: 03/05/2021

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, SUE OWEN, 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 11D-8, Florida Administrative Code, and this form is a true and accurate report of that breath test.

Breath Test Operator: Waldemar Strzelecki Date: 08/13/19
Signature

Sworn to (or affirmed) before me this 13th day of August, 2019
G. A. S. ofc A. Borrowes
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.

SCANNED
AUG 14 2019



Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	<input type="checkbox"/>	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	<input type="checkbox"/>	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	<input type="checkbox"/>	119.071(4)(c)	Undercover personnel.	
	<input type="checkbox"/>	119.071(2)(f)	Confidential informants (CIs).	
	<input type="checkbox"/>	119.071(2)(e)	Confession.	
Public Info. Exemptions	<input type="checkbox"/>	985.04(1)	Juvenile offender records.	
	<input type="checkbox"/>	119.071(h)(i)	Assets of a crime victim.	
	<input type="checkbox"/>	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	<input type="checkbox"/>	394.4615(7)	Mental health information.	
	<input type="checkbox"/>	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)	<input checked="" type="checkbox"/>	(iii) 119.0714(1)(i)-(j), 2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	<input type="checkbox"/>	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	<input type="checkbox"/>	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	<input type="checkbox"/>	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
<input type="checkbox"/>				
Other	<input type="checkbox"/>	539.001(b)-(l)FSS, 539.003FSS	Other: Pawn Broker Information.	
	<input type="checkbox"/>	3119.0712 (2)	Other: Personal Information Contained in a Motor Vehicle Record	

REVIEW COMPLETED BY

Booking Number: 2019026504	Date: 8/14/2019
	Specialist Name/ID: M. Tooks #8557

SCANNED
AUG 14 2019