

1065370

20190102053 ANB

PL#1889

ADMINISTRATIVE	OBTS Number		ARREST / NOTICE TO APPEAR Juvenile Referral Report		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1		Juvenile N													
	Agency ORI Number FLO 502600		Agency Name PALM BEACH GARDENS POLICE DEPARTMENT				Agency Report Number (N.T.A.'s only) 78- 19006965																	
	Charge Type: Check as many as apply.		1. Felony ☐		3. Misdemeanor ☐		5. Ordinance ☐		6. Other ☐		Weapon Seized / Type 2 1. Yes 2. No		Multiple Clearance Indicator											
	Location of Arrest (Including Name of Business) NORTHLAKE BLVD/MEMORIAL PARK RD, PBG, FL						Location of Offense (Business Name, Address) NORTHLAKE BLVD/SR 7																	
DEFENDANT	Date of Arrest 11/27/2019		Time of Arrest 19:04		Booking Date		Booking Time		Jail Date		Jail Time		Location of Vehicle KAUFF'S TOWING & RECOVERY 4301 East Avenue, West Palm Beach, FL 33405											
	Name (Last, First, Middle) RAUENZAHN, WILLIAM, GIRARD												Alias (Name, DOB, Soc. Sec. #, Etc.)											
	Race W - White I - American Indian B - Black O - Oriental/Asian		Sex W M		Date of Birth 03/28/1962		Height 6'0		Weight 240		Eye Color BRO		Hair Color GRAY		Complexion LIGHT		Build LARGE							
	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) N/A												Marital Status SINGLE		Religion NONE		Indication of Alcohol Influence Drug Influence		Y N Unk. ☐ ☐ ☐					
CO-DEF	Local Address (Street, Apt. Number) 12316 69TH ST N				(City) WEST PALM BEACH, FL 33412				(Zip) 33412				Phone (561) 795-6630				Residence Type 1. City 2. County 3. Florida 4. Out of State 2							
	Permanent Address (Street, Apt. Number) 12316 69TH ST N				(City) WEST PALM BEACH, FL 33412				(Zip) 33412				Phone ()				Address Source LICENSE							
	Business Address (Name, Street) ()				(City) ()				(State) ()				(Zip) ()				Phone ()							
	D/I. Number, State R525927621080 FL				Soc. Sec. Number ()				INS Number ()				Place of Birth (City, State) REDDING, PA				Citizenship US							
JUVENILE	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							
	Name (Last) ()				(First) ()				(Middle) ()				Residence Phone ()				Business Phone ()							
	Address (Street, Apt. Number) ()				(City) ()				(State) ()				(Zip) ()				Business Phone ()							
CHARGE	Notified by: (Name) ()				Date				Time				Juvenile Disposition 1. Handled/ processed within Dept. and Released. 2. TOT HRS / DYS 3. Incarcerated				Grade							
	Released To: (Name) ()				Relationship ()				Date				Time				Grade							
	The above address provided by ☐ defendant and / or ☐ defendant's parents. The child and / or parent was told to keep the Juvenile Court Clerk (Phone 355-2528) informed of any change of address. ☐ Yes, by: (Name) ☐ No: (Reason)				School Attended ()				Grade ()				Value of Property ()				Property Crime? ☐ Yes ☐ No							
	Description of Property ()				Value of Property ()				Property Crime? ☐ Yes ☐ No				Description of Property ()				Value of Property ()							
CHARGE	Drug Activity N. N/A S. Sell B. Buy P. Possess				S. Sell B. Buy T. Traffic				R. Smuggle D. Deliver E. Use				K. Dispense/ Distribute				M. Manufacture/ Produce/ Cultivate				Z. Other			
	Charge Description DRIVING UNDER THE INFLUENCE				Counts 1				Domestic Violence ☐ Y ☐ N				Statute Violation Number 316.193(1)				Violation of ORD #							
	Drug Activity N				Drug Type N				Amount / Unit				Offense #				Warrant / Capias Number				Bond			
	Charge Description				Counts				Domestic Violence ☐ Y ☐ N				Statute Violation Number				Violation of ORD #							
CHARGE	Drug Activity N				Drug Type N				Amount / Unit				Offense #				Warrant / Capias Number				Bond			
	Charge Description				Counts				Domestic Violence ☐ Y ☐ N				Statute Violation Number				Violation of ORD #							
	Drug Activity N				Drug Type N				Amount / Unit				Offense #				Warrant / Capias Number				Bond			
	Charge Description				Counts				Domestic Violence ☐ Y ☐ N				Statute Violation Number				Violation of ORD #							
CHARGE	Drug Activity N				Drug Type N				Amount / Unit				Offense #				Warrant / Capias Number				Bond			
	Charge Description				Counts				Domestic Violence ☐ Y ☐ N				Statute Violation Number				Violation of ORD #							
	Drug Activity N				Drug Type N				Amount / Unit				Offense #				Warrant / Capias Number				Bond			
	Charge Description				Counts				Domestic Violence ☐ Y ☐ N				Statute Violation Number				Violation of ORD #							
NOTICE TO APPEAR	Location (Court Room Number, Address) NORTH COUNTY COURTHOUSE, 3188 PGA BOULEVARD, PALM BEACH GARDENS, FL 33410 - PH: (561) 662-6700																							
	Court Date and Time Month DECEMBER Day 18 Year 2019 Time 10:00 AM X PM																							
	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) New Complaint 11/27/2019																							
HOLD for other Agency	Name ()				Signature of Arresting Officer ()				Name Verification (Printed by Arrestee) ()				PAGE											
	Name of Arresting Officer (Print) OF. ANDREW FLINK				ID # 514				Name of Arresting Officer (Print) OF. ANDREW FLINK				ID # 514											
	Transporting Officer ANDREW FLINK				ID # 514				Agency PBGPD				Witness here if subject signed with an "X"											
	Intake Deputy ()				ID # ()				Agency ()				Witness here if subject signed with an "X"											

DISTRIBUTION: WHITE - COURT COPY

GREEN - STATE ATTORNEY

YELLOW - AGENCY

PINK - AGENCY

GOLD - DEFENDANT (N.T.A.'s ONLY)

SUBJECT: RAUENZAHN, WILLIAM, GIRARD CASE NUMBER 19006965

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:

Non-compliant during exercise, became argumentative. All observations were made when the exercise was conducted the proper way.

WALK & TURN:

During the exercise, Rauenzahn took 26 steps rather than nine as instructed. During the return set, Rauenzahn stepped off the line and missed heel-to-toe on the third step, while also raising his arms more than six inches. Rauenzahn then stopped to steady himself. Rauenzahn also took 12 steps rather than nine as instructed.

FINGER TO NOSE:

During the exercise, Rauenzahn missed finger to nose on the first left command. Rauenzahn then stopped during the exercise to argue with this Officer about the proper way to conduct the exercise. On a "right" command, Rauenzahn used his left hand. For the entirety of the exercise, Rauenzahn had to be told to lower his arm after each attempt, even after I explained the instructions multiple times.

ROMBERG ALPHABET:

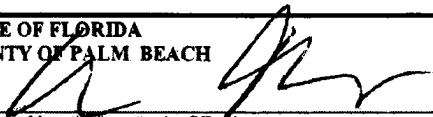
Not performed

ONE LEG STAND:

Not performed

BREATH TEST RESULTS: (1) (2) (3) (4)

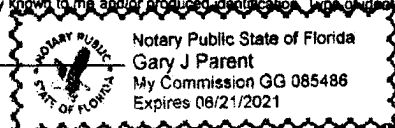
STATE OF FLORIDA
COUNTY OF PALM BEACH


Signature of Arresting/Investigative Officer

The foregoing instrument was sworn to or affirmed and subscribed before me this 27th day of November, 2019 by Ofc. ANDREW FLINK

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)



D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 27TH DAY OF NOVEMBER 20 19, AT 1813 AM ☒ PM

SUBJECT: RAUENZAHN, WILLIAM, GIRARD CASE NUMBER: 19006965

AGENCY: PALM BEACH GARDENS POLICE DEPT. ARRESTING OFFICER: Ofc. ANDREW FLINK 514

PERSONAL CONTACT

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

Ofc Sanchez 473, said he observed the vehicle, a white Dodge RAM (Y43UJI/FL) traveling at 71 MPH in a posted 55 MPH zone. Ofc Sanchez said the vehicle then pulled across the swale then drove on the sidewalk, before coming to final rest fully on the sidewalk. When I arrived, I made contact with the driver, identified via Florida Driver License, William Rauenzahn (SU).

OBSERVATION OF DRIVER:

Rauenzahn had bloodshot watery eyes, slurred speech and the odor of an unknown alcoholic beverage emanating from his breath at conversational distance. Rauenzahn was also immediately exhibiting rapid mood swings.

DRIVER'S STATEMENTS:

Rauenzahn was belligerent from the start of the investigation. Rauenzahn said he had not consumed any alcoholic beverages and stopped short of mentioning the full array of narcotics that he was taking. Rauenzahn did later mention he takes Xanax twice per day.

ODORS:

Unknown alcoholic beverage

GENERAL OBSERVATIONS

SPEECH: Slurred

ATTITUDE: Non-compliant, mood swings

CLOTHING: Dark blue shirt, black pants, black shoes.

MEDICAL/OTHER: High blood pressure

STATE OF FLORIDA
COUNTY OF PALM BEACH

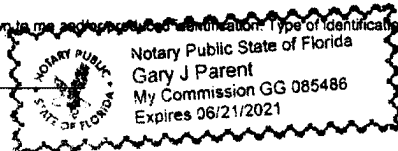
Signature of Arresting/Investigative Officer

The foregoing instrument was sworn to or affirmed and subscribed before me this 27th day of November, 20 19 by Ofc. ANDREW FLINK

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

Personally Known

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





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

PBSO CASE # 19-142234 PBSO ZONE 3-13

AGENCY CASE # 19006965 CRASH CASE # _____

TIME OF STOP/CRASH 1813 DATE 11/27/2019 DAY Wednesday

SUBJECT'S NAME Ravenzahn, William RACE W SEX M

HGT 6'0 WGT 240 DOB 3/28/1962

LOCATION Northlake Blvd/Memorial Park Rd, PBG, FL

ARRESTING OFFICER'S NAME & ID Andrew Flink 514 AGENCY PBG PD

DIVISION: Patrol

NOTIFIED BY COMMO YES

ARRIVAL AT FACILITY 1935

Arrest Time 1904

BREATH RESULTS:

1. **REFUSED**

2. _____

3. _____

4. _____

TESTING OFFICER'S ID 7909 PBSO VIDEOTAPE # N/A

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

I, Ofc. ANDREW FLINK, a duly certified Law Enforcement Officer or Correctional Officer,
 (Name of Officer reading Implied Consent Warning)

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

or affirm that on or about the 27th day of November, 20 19, at 19:04 ☒ P.M. ☐ A.M.

DRIVER WILLIAM GIRARD RAUENZAHN
 (Type or Print) FIRST NAME MIDDLE OR MAIDEN NAME LAST NAME

DL# R525927621080, state of FL, was placed under lawful arrest for

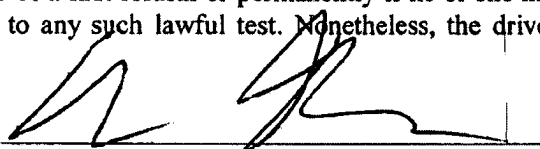
the offense of DRIVING UNDER THE INFLUENCE by Ofc. ANDREW FLINK and
 (Name of Arresting Officer)

issued Citation # A56H5BE

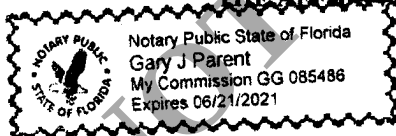
That on or about the 27th day of November, 20 19, at 2000 ☒ P.M. ☐ A.M.

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 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 27th day of November, 20 19,

by Ofc. ANDREW FLINK,

who is personally known to me or who has produced

Personally Known as identification

Notary Public 

HSMV-BAR1001 (REV. 10/2016)

The foregoing instrument was sworn and subscribed before me:

Signature of Attesting Officer

Title _____

Date 11/27/19

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.

SUBJECT: Raymond Williams 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) Raymond Williams

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) Raymond Williams

SUBJECT: Robert Lee Brown 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? _____

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: _____

WHITE - STATE ATTY.

YELLOW - DHSMV

PINK - CENTRAL RECORDS

GOLD - JAIL

TESTING FACILITY TASK REPORT

AGENCY:

SUBJECT: Harold G. Wilson

CASE NUMBER:

DATE:

VIDEO TAPE NUMBER:

BEGINNING TIME:

ENDING TIME:

BREATH TESTS RESULTS:

1)

TIME 2000

A.M. (P.M.)

21

TIME

A.M./P.M.

3)

TIME

A.M./P.M.

41

TIME

A M / P M

BREATH OPERATOR:

MAINTENANCE TECHNICIAN:

TESTING OFFICER'S OBSERVATIONS

SPEECH:

ATTITUDE:

CLOTHING:

MEDICAL CONDITIONS:

MEDICATIONS:

OTHER:

REFUSED

COMMENTS:

REFUSED



**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: 2019038190	Date: 11/27/2019
	Specialist Name/ID: J. Beck/9007

FLINK
(514)

19006965



COMPLAINT

FLORIDA DUI UNIFORM TRAFFIC CITATION

A56H5BE

COUNTY OF PALM BEACH 06		☐ (1) F.H.P. ☒ (2) P.D. ☐ (3) S.O. ☐ (4) OTHER	
CITY (IF APPLICABLE) PALM BEACH GARDENS		AGENCY NAME PALM BEACH GARDENS	
		AGENCY # 78	
IN THE COURT DESIGNATED BELOW THE UNDERSIGNED CERTIFIES THAT HE/SHE HAS JUST AND REASONABLE GROUNDS TO BELIEVE AND DOES BELIEVE THAT ON			
COMPLAINT (RETAINED BY COURT)			
DAY OF WEEK WEDNESDAY	MONTH 11	DAY 27	YEAR 2019
NAME (PRINT) FIRST WILLIAM		LAST RAUENZAHN	
MIDDLE GIRARD			
STREET 12316 69TH ST N			
CITY WEST PALM BEACH		STATE FL	ZIP CODE 33412
TELEPHONE NUMBER	DATE OF BIRTH MO 03 DAY 28 YR 1962	RACE W	SEX M
		AGE 600	
DRIVER LICENSE NUMBER R 5 2 5 9 2 7 6 2 1 0 8 0	STATE FL	CLAS E	CDL LICENSE ☐ Y ☒ N
VEHICLE 2006	MAKE DODG	STYLE PK	COLOR WHI
VEHICLE LICENSE NO. Y43UJI	TRAILER TAG NO.	STATE FL	YEAR TAG EXPIRES 2020
UPON A PUBLIC STREET OR HIGHWAY, OR OTHER LOCATION, NAMELY NORTHLAKE BLVD/MEMORIAL PARK RD,			
PALM BEACH GARDENS			
FL ☐ IL ☐ IN ☐ OH ☐ OR ☐ PA ☐ RI ☐ TN ☐ VA ☐ WY ☐ OF MODE			

DO UNLAWFULLY COMMIT THE OFFENSE OF DRIVING UNDER THE INFLUENCE OF ALCOHOLIC BEVERAGES, CHEMICAL OR CONTROLLED SUBSTANCES; DID DRIVE, OR WAS IN ACTUAL PHYSICAL CONTROL OF A VEHICLE, WHILE UNDER THE INFLUENCE OF AN ALCOHOLIC BEVERAGE/CHEMICAL SUBSTANCE/CONTROLLED SUBSTANCE TO THE EXTENT NORMAL FACULTIES WERE IMPAIRED, OR WITH A BLOOD OR BREATH ALCOHOL LEVEL OF .08 OR ABOVE OF

COMMENTS PERTAINING TO OFFENSE (ONLY IF OTHER THAN ABOVE)		REF
DUI - DRIVING UNDER INFLUENCE Driving Under		RE-EXAM ☐ YES ☒ NO
☐ AGGRESSIVE DRIVER	PASSENGER ☐ YES ☒ NO	STATE STATUTE
SECTION 316.193		SUB-SECTION (1)*
CRASH ☐ YES ☒ NO	DAMAGE TO OTHER PROPERTY ☐ YES ☒ NO	INJURY TO ANOTHER ☐ YES ☒ NO
SERIOUS BODILY INJURY TO ANOTHER ☐ YES ☒ NO		FATAL ☐ YES ☒ NO

THIS IS A CRIMINAL VIOLATION. COURT APPEARANCE REQUIRED, AS INDICATED BELOW.
12/18/2019 10:00 AM
COURT DATE
A56H5BE
NORTH COUNTY GOVERNMENT CENTER
3188 PGA Boulevard PBG, FL 33410

ARREST DELIVERED TO **PBSO MAIN JAIL** DATE **11/27/2019**
I AGREE AND PROMISE TO COMPLY AND OBEY THE CHARGES AND INSTRUCTIONS SPECIFIED IN THIS CITATION. WILLFUL REFUSAL TO ACCEPT AND SIGN THE CITATION MAY RESULT IN ARREST. I UNDERSTAND MY SIGNATURE IS NOT AN ADMISSION OF GUILT OR WAIVER OF RIGHTS. IF YOU NEED REASONABLE FACILITY ACCOMMODATIONS TO COMPLY WITH THIS CITATION, CONTACT THE CLERK OF THE COURT.

SIGNATURE OF VIOLATOR
EFFECTIVE IMMEDIATELY, YOUR DRIVING PRIVILEGE IS SUSPENDED/DISQUALIFIED FOR:
☐ DRIVING WITH AN UNLAWFUL BLOOD OR BREATH ALCOHOL LEVEL. THIS SUSPENSION IS FOR A PERIOD OF SIX MONTHS IF THIS IS THE FIRST VIOLATION OR ONE YEAR IF PREVIOUSLY SUSPENDED FOR DRIVING WITH AN UNLAWFUL BLOOD OR BREATH ALCOHOL LEVEL. IF YOU HOLD A CDL OR YOU ARE OPERATING A CMV, YOUR COMMERCIAL DRIVER LICENSE/PRIVILEGE WILL ALSO BE DISQUALIFIED FOR ONE YEAR FOR THE FIRST OFFENSE OR PERMANENTLY DISQUALIFIED FOR A SUBSEQUENT OFFENSE.

☒ REFUSAL TO SUBMIT TO LAWFUL BREATH, BLOOD OR URINE TEST SECTION 322.2615, F.S. THIS SUSPENSION IS FOR A PERIOD OF ONE YEAR IF THIS IS A FIRST REFUSAL OR 18 MONTHS IF PREVIOUSLY SUSPENDED FOR THIS OFFENSE. IF YOU HOLD A CDL OR YOU ARE OPERATING A CMV, YOUR COMMERCIAL DRIVER LICENSE/PRIVILEGE WILL ALSO BE DISQUALIFIED FOR A PERIOD OF ONE YEAR FOR A FIRST REFUSAL OR PERMANENTLY DISQUALIFIED FOR A SUBSEQUENT REFUSAL.

LICENSE SURRENDERED? ☒ YES ☐ NO REASON **REFUSAL**
ELIGIBLE FOR PERMIT? ☒ YES ☐ NO REASON **VALID DL**

UNLESS INELIGIBLE, THIS CITATION SHALL SERVE AS A TEMPORARY DRIVER LICENSE AND WILL EXPIRE AT MIDNIGHT ON THE 10TH DAY FOLLOWING THE DATE OF SUSPENSION.

AT THE **LAUDERDALE LAKES** BUREAU OF ADMINISTRATIVE REVIEWS OFFICE, YOU MAY REQUEST, WITHIN 10 DAYS AFTER THE DATE OF SUSPENSION, A REVIEW OF SUSPENSION BY THE DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES OR A REVIEW TO DETERMINE ELIGIBILITY FOR A RESTRICTED LICENSE IF THIS IS YOUR FIRST DUI RELATED OFFENSE. SEE REVERSE SIDE.

SIGNATURE OF OFFICER **514** BADGE NO. 10 NO. TROOP UNIT

CASE NO. DOCKET NO. PAGE NO.

DATE	COURT ACTION AND OTHER ORDERS
	BAIL FIXED AT \$ OR CASH DEPOSIT OF \$
	SIGNATURE OF PERSON GIVING BAIL
	SIGNATURE OF PERSON TAKING BAIL
	FINE IN THE AMOUNT OF \$ RECEIVED AS REQUIRED BY COURT SCHEDULE
	SIGNATURE OF CLERK
	CONTINUANCE TO REASON
	CONTINUANCE TO REASON
	BOND ESTREATED
	WARRANT ISSUED
	VIOLATOR FAILED TO APPEAR-DRIVER LICENSE SUSPENDED
	VIOLATOR ARRAIGNED ON (DATE)
	PLEA:
	FINDING:
	ADJUDICATION:
	SENTENCE: FINE COST
	JAILED DAYS
	DRIVER IMPROVEMENT SCHOOL
	OTHER
	DRIVER LICENSE SUSPENDED OR REVOKED FOR DAYS
	RECOMMEND DRIVER LICENSE SUSPENSION FOR DAYS
	RECOMMEND RE-TEST
	SIGNATURE OF JUDGE
	TESTIMONY - JUDGE'S NOTES (OR OTHER COURT ORDERS):
	APPEAL BOND OF \$
	VIOLATOR'S FINGERPRINT WHEN APPLICABLE