



AGE 21 AND OLDER OFFICER'S STATEMENT

SECTIONS 13353, 13353.1, 13353.2 & 13389 CALIFORNIA VEHICLE CODE (CVC)

APS

FORWARD THIS FORM WITHIN 5 BUSINESS DAYS TO YOUR LOCAL DRIVER SAFETY OFFICE, LISTED ON THE BACK OF PAGE 2

COMPLETE IN BLACK INK

LAW ENFORCEMENT AGENCY CASE NO.	DETENTION/ARREST DATE 5-11-13	FOR DMV USE ONLY	
DRIVER'S NAME (LAST, FIRST, M.I.)	DRIVER LICENSE NO.	COMMERCIAL? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	STATE CA
MAILING ADDRESS	STATE CA	ZIP CODE 95401	THUMB PRINT (Right thumb or specify) Good CA I.D.
DOB: 8-15-	Sex: F	Hair: BRN	Eyes: BRN
		Ht.: 5-01	Wt.: 105
Driver License: <input type="checkbox"/> Suspended/Revoked	<input checked="" type="checkbox"/> Surrendered (Attached)	<input type="checkbox"/> Not in Possession	<input type="checkbox"/> Unlicensed
<input type="checkbox"/> 0.01% or more BAC DUI Probation	<input type="checkbox"/> PAS or other Chemical Test Refusal - (DUI Probation) (Complete reverse)		
<input type="checkbox"/> 0.04% or more BAC/COMM VEH	<input type="checkbox"/> Chemical Test Refusal (Complete reverse)		
<input checked="" type="checkbox"/> 0.08% or more BAC Chemical Tests Results	<input type="checkbox"/> Forced Blood Test (Complete reverse)		

Vehicle Lic. No. or VIN _____

COMMERCIAL VEHICLE: Vehicle operation requires a commercial driver license (Section 15210 CVC).

HAZARDOUS MATERIALS: (transporting materials requiring placards/markings per Section 27903 CVC).

On 5-11-13 at 2:05 AM/PM in (City and County) NAPA / NAPA CA, the above named driver was:

Driving: observed by this officer or the observer shown in the shaded area on the second page, admitted to driving.

Contacted per Section 40300.5 CVC. (Describe details in probable cause section on second page.)

Involved in a collision. Attach collision report. In the probable cause section on the second page, describe how time of collision was established.

I had reasonable cause to believe the driver was driving a motor vehicle with alcohol and/or drugs present in the blood or while under the influence. The driver was lawfully arrested, or lawfully detained while on DUI probation, by this officer, or by the person shown in the shaded area on the second page on 5-11-13 (Month/Day/Year) at 2:32 AM/PM for violation of Section 23152 or 23153, 23154 CVC, or Section 191.5 of the Penal Code.

PROBABLE CAUSE. Describe in detail the facts and circumstances that led to the stop or contact. If driving was observed by someone other than the arresting officer, what did the observer say? State details on second page of this form hereby incorporated by reference.

OBJECTIVE SYMPTOMS OF INTOXICATION: Bloodshot/watery eyes Odor of alcoholic beverage Unsteady gait Slurred speech

Other: PAS RESULTS: .091% / .093% BAC Observed by: SIEMENS at 2:30 AM/PM

PRELIMINARY ALCOHOL SCREENING TEST 0.01% OR MORE BLOOD ALCOHOL CONCENTRATION (BAC) DUI PROBATION

Driver submitted to and completed a Preliminary Alcohol Screening (PAS) test with the results of:

TEST 1 .091% BAC on 5-11-13 at 2:27 AM/PM TEST 2 (Optional) .093% BAC on 5-11-13 at 2:30 AM/PM

OFFICER'S CERTIFICATION: I certify under penalty of perjury under the laws of the State of California that (1) I obtained the above PAS test results in the regular course of my duties, (2) I used PAS Model (Name/Number) ALCO-SENSOR IV, Serial# 048110, Manufactured by INTOXIMETERS INC., (3) I administered this PAS test properly in accordance with the manufacturer's guidelines and instructions, (4) I have received training on the proper operation of this device and administration of the PAS test and am competent and qualified to operate the device, and (5) the device was functioning properly at the time of the test. PAS Test Unavailable

Date 5-11-13 Signature X Siemens BADGE/ID NO. 19972 Agcy./Div. CHP

CHEMICAL TEST

Breath Test Results (Attach copy of the results, if available)

TEST 1 .08% BAC on 5-11-13 2:40 AM/PM TEST 2 .07% BAC on 5-11-13 2:44 AM/PM TEST 3 % BAC on AM/PM

BREATH TEST MACHINE OPERATOR'S CERTIFICATION: I certify under penalty of perjury under the laws of the State of California, that the above breath test sample results were obtained in the regular course of my duties. I further certify that I am qualified to operate this equipment and that the test was administered pursuant to the requirements of Title 17 of the California Code of Regulations.

Date 5-11-13 Signature X M Y CA Badge/ID No. 19864 Agcy./Div. CHP

Blood Test Results Blood Test on DATE TIME AM/PM Breath Test Unavailable

Urine Test Results Both Breath and Blood tests unavailable. Drug use suspected.

Urine Test First Void on DATE TIME AM/PM Test on DATE TIME AM/PM

I certify under penalty of perjury, under the laws of the State of California, that the information contained on all pages of this Officer's Statement is true and correct.

EXECUTED ON: Date 5-11-13 AT: City NAPA County NAPA State CA

OFFICER'S PRINTED NAME SIEMENS	BADGE/ID NO. 19972	TELEPHONE NO. (707) 253-4906
AGENCY CHP	AREA 9325	COURT CODE (IF UNKNOWN, COURT NAME) NAPA SUPERIOR

I did not personally serve a copy of the Order of Suspension/Revocation to the driver.

ISSUE DATE OF ORDER 5-11-13 SIGNATURE OF ARRESTING OFFICER X SIEMENS

IF ORDER SERVED BY ANOTHER OFFICER: I personally served a copy of the order to the driver on the date shown below:

ISSUE DATE	OFFICER'S PRINTED NAME	BADGE/ID NO.	SIGNATURE OF OFFICER
			X

PRELIMINARY ALCOHOL SCREENING TEST REFUSAL (DUI PROBATION), 13353.1 CVC

CHEMICAL TEST REFUSAL, 13353 CVC

CHEMICAL TEST ADMONITION (23154, 23612 CVC)

I admonished the driver on _____ at _____ AM/PM in _____ CA.
DATE TIME LOCATION

1. You are required by state law to submit to a PAS (DUI Probation) or other chemical test to determine the alcohol and/or drug content of your blood.
2. a. Because I believe you are under the influence of **alcohol**, you have a choice of taking a breath or blood test.
 b. Because I believe you are under the influence of **alcohol and drugs**, you have a choice of taking a breath, blood or urine test.
 c. **WHEN APPLICABLE:** Since the breath and blood tests are unavailable, you are deemed to have given your consent to chemical testing of your urine.
 d. **WHEN APPLICABLE:** Since you need medical treatment, your choice is limited to _____ test(s), the only test(s) available at _____.
3. If you refuse to submit to, or fail to complete a test, your driving privilege will be suspended for one year or revoked for two or three years. A second offense within ten years of a separate violation of driving under the influence, including such a charge reduced to reckless driving, or vehicular manslaughter, or a violation of Section 23140 CVC, which resulted in a conviction, or separate administrative determination that you were driving with a BAC of 0.01% or more while under age 21, or a separate administrative determination that you were driving with a BAC of 0.01% or more while on DUI probation, or a BAC of 0.04% while operating a commercial motor vehicle, or a BAC of 0.08% or more at any age, or you refused a test, will result in a two-year revocation. Three or more offenses within ten years of any combination of the above violations, convictions or separate administrative determinations will result in a three-year revocation.
4. Refusal or failure to complete a test may be used against you in court. Refusal or failure to complete a test will also result in a fine and imprisonment if this arrest results in a conviction of driving under the influence.
5. You do not have the right to talk to an attorney or have an attorney present before stating whether you will submit to a test, before deciding which test to take, or during the test.
6. If you cannot, or state you cannot, complete the test you choose, you must submit to and complete a remaining test.

RESPONSE TO: Will you take a Preliminary Alcohol Screening (DUI Probation) test? _____

Breath test? _____ **Blood Test?** _____

Both Breath and Blood tests are unavailable. **EXPLAIN:** _____

PAS test unavailable. **EXPLAIN:** _____

Drug use suspected. **RESPONSE TO: Will you take a urine test?** _____

The driver refused to submit to or failed to complete any test. The refusal or failure was indicated by the following statements or actions: _____

If not given in English, admonition was given in Spanish Other language (specify) _____

If the above Chemical Test Admonition was read to arrestee by another officer, indicate that officer's:

Name _____ Badge/ID No. _____ Agency _____ Phone No. () _____

DRUG ADMONITION SUPPLEMENT

I believe the driver was driving under the influence of drugs or a combination of drugs and alcohol. In addition to the breath test results and information listed on the front, my belief is based on the following facts: _____

DRUG ADMONITION: Blood and Urine Only

1. The breath test you have just taken is designed to detect only the alcohol content of your blood.
2. Because I believe you are under the influence of drugs or a combination of drugs and alcohol, you are required by state law to submit to a blood or urine test to determine the drug content of your blood.
3. If you refuse to submit to, or fail to complete a test, your driving privilege will be suspended for one year or revoked for two or three years. A second offense within ten years of a separate violation of driving under the influence, including such a charge reduced to reckless driving, or vehicular manslaughter, or a violation of Section 23140 CVC, which resulted in a conviction, or separate administrative determination that you were driving with a BAC of 0.01% while under age 21, or a separate administrative determination that you were driving with a BAC of 0.01% or more while on DUI probation, or a BAC of 0.04% while operating a commercial motor vehicle, or a BAC of 0.08% or more at any age, or you refused a test, will result in a two-year revocation. Three or more offenses within ten years of any combination of the above violations, convictions or separate administrative determinations will result in a three-year revocation.
4. Refusal or failure to complete a test may be used against you in court. Refusal or failure to complete a test will also result in a fine and imprisonment if this arrest results in a conviction of driving under the influence.
5. You do not have the right to talk to an attorney or have an attorney present before stating whether you will submit to a test, before deciding which test to take, or during the test.
6. If you cannot, or state you cannot, complete the test you choose, you must submit to and complete the remaining test.

If the above Drug Admonition was read to the arrestee by another officer, indicate that officer's:

Name _____ Badge/ID No. _____ Agency _____ Phone No. () _____

If not given in English, admonition was given in Spanish Other language (specify) _____

Response to: Will you take a Blood test? _____ **Urine test?** _____

The driver refused to submit to or failed to complete any such test. The refusal or failure was indicated by the following statements or actions: _____

OFFICER'S STATEMENT - PAGE 2
SECTIONS 13353, 13353.1, 13353.2 AND 13389 CVC

COMPLETE IN BLACK INK

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Driver License: <input type="checkbox"/> Suspended/Revoked <input checked="" type="checkbox"/> Surrendered (Attached) <input type="checkbox"/> Not in Possession <input type="checkbox"/> Unlicensed		THUMB PRINT (Right thumb or specify) Good CA I.D.		
<input type="checkbox"/> 0.01% or more BAC DUI Probation				<input type="checkbox"/> PAS or other Chemical Test Refusal - (DUI Probation)
<input type="checkbox"/> 0.04% or more BAC/COMM VEH				<input type="checkbox"/> Chemical Test Refusal
<input type="checkbox"/> 0.08% or more BAC Chemical Tests Results				<input type="checkbox"/> Forced Blood Test

Complete shaded area only if driving/collision observed by someone other than arresting officer or arrest done by another officer.

<input type="checkbox"/> Driving observed	<input type="checkbox"/> Driver arrested	<input type="checkbox"/> Collision witnessed	By <input type="checkbox"/> Another Officer <input type="checkbox"/> Citizen	<input type="checkbox"/> Driving observed	<input type="checkbox"/> Driver arrested	<input type="checkbox"/> Collision witnessed	By <input type="checkbox"/> Another Officer <input type="checkbox"/> Citizen
NAME (PLEASE PRINT)				NAME (PLEASE PRINT)			
ADDRESS				ADDRESS			
TELEPHONE NO.	OFFICER'S BADGE/ID NO.	OFFICER'S AGENCY		TELEPHONE NO.	OFFICER'S BADGE/ID NO.	OFFICER'S AGENCY	

PROBABLE CAUSE (DESCRIBE IN DETAIL THE FACTS AND CIRCUMSTANCES THAT LED TO THE STOP OR CONTACT.)
THE NARRATIVE MUST BE AN ORIGINAL. PRINT OR WRITE DIRECTLY ON THIS PAGE. (A SYNOPSIS OF THE SUPPLEMENTAL REPORT MAY BE CUT AND PASTED BELOW AND MUST BE DATED AND CONTAIN AN ORIGINAL SIGNATURE.) (FOR DUI PROBATION VIOLATIONS) CLEARLY INDICATE BELOW HOW YOU DETERMINED THE DRIVER WAS ON DUI PROBATION.

On 05-11-2013, at approximately 0205 hours, I was on patrol with my partner, Officer Renspurger (#19864) in full CHP tan uniform and in a marked black and white CHP patrol vehicle, within the city and county of Napa, for the main purpose of traffic enforcement. I was seated in the right front passenger seat and my partner was driving. We were stopped on the right shoulder of SR-29 northbound, south of SR-121. The posted speed limit at this location is 60 miles per hour. We observed the subject vehicle approaching our location from the rear at a high rate of speed. My partner visually estimated the subject vehicle's speed at approximately 80 miles per hour, and confirmed its speed of 80 utilizing the rear facing radar equipped within our patrol vehicle. There were no other vehicles approaching our location from the rear at that moment. As the vehicle passed our location, my partner accelerated our patrol vehicle and took up a position behind the subject's vehicle. The subject vehicle made a left turn onto SR-121 and we initiated an enforcement stop using our patrol vehicle's forward facing red lights. The subject yielded and stopped along the right shoulder of SR-121, west of SR-29.

5-11-13 Siemens 19972

