

CITY OF CORAL GABLES

- MEMORANDUM -

TO: EDWARD J. HUDAK, JR
CHIEF OF POLICE

DATE: AUGUST 23, 2017

FROM: A/MAJOR BRIAN LAWRENCE *BL*
SPECIALIZED ENFORCEMENT DIV.

SUBJECT:
AWARDS SELECTION
COMMITTEE
RECOMMENDATIONS - JULY
2017

Per SOP#066, the Awards Selection Committee (ASC) has been established and designated to review and select nominated Department personnel for certain awards, and make recommendations for Officer of the Month, Detective of the Quarter and Officer of the Year, to the Chief of Police for Approval. The ASC submits for your approval our recommendations for the following awards:

Officer of the Month – July 2017
Cristino Perez
(Nominated by Sergeant Alejandro Escobar)

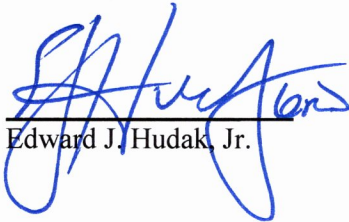
Life Saving Award
Cristino Perez
(Nominated by Lieutenant Hedrick)

Detective of the Quarter
Edwin Pagan
(Nominated by Sergeant Alain Campos)

APPROVAL

DATE

DISAPPROVAL


Edward J. Hudak, Jr.

8/23/17

Edward J. Hudak, Jr.

CITY OF CORAL GABLES

- MEMORANDUM -

TO: BRIAN LAWRENCE, A/ MAJOR
ASC CHAIRMAN

DATE: JULY 25, 2017

FROM: ALEJANDRO ESCOBAR, SERGEANT
CRASH INVESTIGATION UNIT

SUBJECT:
AWARD/HONOR NOMINATION

Please accept this memorandum as my Officer of the Month Nomination for the Month of July 2017. It is my pleasure to nominate Officer Cristino Perez for his exceptional work for the month of July. He is a brief synopsis of his remarkable actions in four different incidents.

Case Number 17-4671

On July 2, 2017, at 0256 hours, Officer Perez was working the burglary taskforce operating the ALPR system. The system revealed an expired tag and subsequently stopped the defendant at the 5600 block of SW Eight Street. A background check of the defendant revealed him to be a signal "150". The defendant was charged with DWLS and Expired Registration (see attached A-form). Even though these charges were minor, due to the defendant's past, Officer Perez potentially stopped a crime from occurring.

Case Number 17-5014

On July 16, 2017 at approximately 1133 hours, Officer Perez was working an off-duty detail at the Watsco Center. Officer Perez encountered an elderly female that was choking on a piece of gum. The victim could not breathe and Officer Perez quickly went into action. Officer Perez referred back to his training and cleared her airway by performing abdominal thrust. Even though the victim never lost consciousness, Officer Perez ensured she was not going to be hurt by his quick response. Coral Gables Fire Rescue responded to the scene and medically cleared the elderly female.

Case Number 17-5040

On July 17, 2017 at approximately 1305 hours, Officer Perez was on routine patrol driving north on Old Cutler Road with a large box truck in front of him. All of a sudden, the truck veered to the right and struck an oak tree on the east side of the roadway. Officer Perez quickly secure the scene for his safety and with assistance from our Director was able to keep the driver and rear passenger stable enough until Fire Rescue arrived. The Director advised me that Officer Perez did an outstanding job from the beginning. I am convinced that without Officer Perez's quick response, their injuries could have resulted in their deaths.

Case Number 17-005167

On July 23, 2017, at approximately 0006 hours, Officer Perez was again working the burglary taskforce. While on patrol, he stopped a vehicle with an expired tag at the 4700 block of SW Eighth Street. A records check revealed the defendant with a suspended driver's license and extensive past. He was a signal "100" and he has been arrested for cocaine trafficking, escape, burglary to residence and multiple driving suspensions. He is also a career offender in 2 different states.

As mentioned above, Officer Perez demonstrated excellent police skills to quickly and safely save lives and apprehend multiple felons in our community. He has also had 2 DUI arrest for the month and assisted in the set up and breakdown of the July 4th Fireworks at the Biltmore Hotel. I respectfully request that you reward his hard work, outstanding efforts by awarding him **Officer of the Month for July 2017 and (if the committee deems appropriate) the Life Saving Award.**

Attachments:

Arrest Affidavit (2)
Incident/Investigation Report
Traffic Crash Report

Reviewed by:

Date

 Brian Lawrence 6820

 07/27/17

B. Lawrence, A/Major
Award Selection Committee Chairman

AE/ae



1100391166

OBTS NUMBER 1301347683	COMPLAINT/ARREST AFFIDAVIT	POLICE CASE NO. 17004671
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SPECIAL OPERATION:	<input checked="" type="checkbox"/> FELONY <input type="checkbox"/> MISD <input checked="" type="checkbox"/> TRAFFIC <input type="checkbox"/> JUV <input type="checkbox"/> DV <input type="checkbox"/> MOVES <input type="checkbox"/> CIV INF	JAIL NO. 170149252	PMHD NO	COURT CASE NO. F17013064
		<input type="checkbox"/> WARRANT <input type="checkbox"/> FUGITIVE WARRANT: <input type="checkbox"/> In State <input type="checkbox"/> Out State		

IDS NO. 0457594	AGENCY CODE 003	MUNICIPAL P.D. DEF. ID NO.	MDPD RECORDS AND ID NO. 0660850	STUDENT ID NO.	GANG RELATED NO	FRAUD RELATED NO
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DEFENDANT'S NAME (LAST, FIRST, MIDDLE) RUIZ, GLENN	ALIAS and / or STREET NAME	SIGNAL: 150
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DOB (MM/DD/YYYY) 08/20/1981	AGE 35	RACE W	SEX M	HISPANIC: YES ETHNICITY: COL	HEIGHT 5'07	WEIGHT 175	HAIR COLOR BRO	HAIR LENGTH SHT	HAIR STYLE STR	EYES BRO	GLASSES NO	FACIAL HAIR CLN	TEETH NOR
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SCARS, TATTOOS, UNIQUE PHYSICAL FEATURES (Location, Type, Description)	PLACE OF BIRTH (City, State/Country) MIAMI FL US
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LOCAL ADDRESS (Street, Apt. Number) 2251 SW 7TH ST	(City) MIAMI	(State) (Country) (Zip) FL US 33135	PHONE (786) 780-4884	CITIZENSHIP US
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PERMANENT ADDRESS (Street, Apt. Number) 2251 SW 7TH ST	(City) MIAMI	(State) (Country) (Zip) FL US 33135	PHONE (786) 780-4884	OCCUPATION UNEMPLOYED
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SCHOOL OR BUSINESS ADDRESS (Street, Apt. Number)	(City)	(State) (Country) (Zip)	PHONE	ADDRESS SOURCE DL
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DRIVER'S LICENSE NUMBER/STATE FL-R200280813000	SOCIAL SECURITY NO. XXX-XX-XXXX	WEAPON SEIZED NO	Defendant/CONCEALED WEAPON PERMIT NONE	INDICATION OF: Alcohol Inference: N Drug Inference: U
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ARREST DATE 07/02/2017	ARREST TIME 03:35	ARREST LOCATION 3900 BLK SW EIGHTH ST CORAL GABLES, FL 33134	GRID
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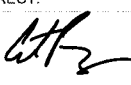
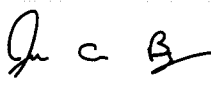
CO-DEFENDANT NAME	DOB	<input type="checkbox"/> IN CUSTODY <input type="checkbox"/> FELONY <input type="checkbox"/> JUVENILE <input type="checkbox"/> AT LARGE <input type="checkbox"/> DV <input type="checkbox"/> MISDEMEANOR
CO-DEFENDANT NAME	DOB	<input type="checkbox"/> IN CUSTODY <input type="checkbox"/> FELONY <input type="checkbox"/> JUVENILE <input type="checkbox"/> AT LARGE <input type="checkbox"/> DV <input type="checkbox"/> MISDEMEANOR
CO-DEFENDANT NAME	DOB	<input type="checkbox"/> IN CUSTODY <input type="checkbox"/> FELONY <input type="checkbox"/> JUVENILE <input type="checkbox"/> AT LARGE <input type="checkbox"/> DV <input type="checkbox"/> MISDEMEANOR

JUV only	Relation	Name	Street	Zip	Phone	Contacted?
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CHARGES	CHARGE AS:	CNTS	FL STATUTE NUMBER	VIOL OF SECT.	CODE OF	UCR	DV	WARRANT TYPE OR TRAFFIC CITATION
1. F/3-DRIVING WHILE LICENSE SUSPENDED/3RD&SUBS OFFENSE	F.S.	1	322.34(2)(C)				N	A6QQAFE
2. T/0-VEHICLE REGISTRATION/EXP OVER 6 MOS/SUBSEQUENT OFF	F.S.	1	320.07(3)(C)			90000092	N	A6QQAHE
3.								
4.								

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:
On the **02** day of **JULY, 2017**, at **02:56** at **5600 BLK SW EIGHTH ST. CORAL GABLES, FL, 33134**

DEFENDANT WAS OBSERVED DRIVING A 2015 HYUNDAI SONATA BEARING FLORIDA TAG #GQQC32, EASTBOUND ON THE 5600 BLOCK OF US41 (SW EIGHTH STREET). AN ALPR TELETYPE HIT REVEALED THE VEHICLE HAD AN EXPIRED TAG AS OF DECEMBER 10, 2017. I CONDUCTED A TRAFFIC STOP AT THE 3900 BLOCK OF US41 (SW EIGHTH STREET). THE DEFENDANT ADVISED HE DID NOT POSSESS A VALID FLORIDA DRIVER'S LICENSE. THE VEHICLE TAG HAD A NUMBER 7 COVERING THE 6 OF THE DECAL, IN ORDER FOR IT TO READ "12/17. THE DEFENDANT DENIED ALTERING THE FLORIDA DECAL. THE DEFENDANT DID NOT HAVE PROOF OF INSURANCE AND THERE WAS A HALF EMPTY CAN OF "BECK'S" BEER ON THE PASSENGER DOOR PANEL, WHICH THE PASSENGER OF THE VEHICLE ADMITTED TO DRINKING AT THE TIME OF THE STOP. FURTHER INVESTIGATION REVEALED THE DEFENDANT THREE... [Continued on Next Page]

HOLD FOR OTHER AGENCY VERIFIED BY	<input type="checkbox"/> HOLD FOR BOND HEARING. DO NOT BOND OUT (Officer Must Appear at Bond Hearing).	<input type="checkbox"/> 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. Furthermore, I agree that notice concerning the time, date and place of all court hearings should be sent to the above address. I agree that it is my responsibility to notify Clerk of the Court (Juvéniles notify Juvenile Division) anytime that my address changes. <input type="checkbox"/> You need not appear in court, but must comply with the instructions on the reverse side hereof.
I SWEAR THAT THE ABOVE STATEMENT IS TRUE AND CORRECT.  PEREZ, C: Court ID: 003-08433	SWORN TO AND SUBSCRIBED BEFORE ME, THE UNDERSIGNED AUTHORITY THIS 02 DAY OF JULY, 2017  BAEZ, J: Court ID: 003-06818	

COMPLAINT/ARREST AFFIDAVIT - COURT COPY



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OBTS NUMBER 1301347683	COMPLAINT/ARREST AFFIDAVIT CONTINUATION	POLICE CASE NO. 17004671
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JAIL NO. 170149252	COURT CASE NO. F17013064
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SPECIAL OPERATION: <input checked="" type="checkbox"/> FELONY <input type="checkbox"/> MISD <input checked="" type="checkbox"/> TRAFFIC <input type="checkbox"/> JUV <input type="checkbox"/> DV <input type="checkbox"/> MOVES <input type="checkbox"/> CIV INF	JAIL NO. 170149252	PMHD NO	COURT CASE NO. F17013064
<input type="checkbox"/> WARRANT	FUGITIVE WARRANT: <input type="checkbox"/> In State <input type="checkbox"/> Out State		

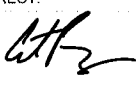
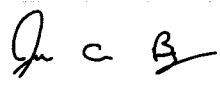
DEFENDANT'S NAME (LAST, FIRST, MIDDLE) RUIZ, GLENN	DOB (MM/DD/YYYY) 08/20/1981
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CO-DEFENDANT NAME	DOB	<input type="checkbox"/> IN CUSTODY <input type="checkbox"/> AT LARGE	<input type="checkbox"/> FELONY <input type="checkbox"/> DV	<input type="checkbox"/> JUVENILE <input type="checkbox"/> MISDEMEANOR
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CO-DEFENDANT NAME	DOB	<input type="checkbox"/> IN CUSTODY <input type="checkbox"/> AT LARGE	<input type="checkbox"/> FELONY <input type="checkbox"/> DV	<input type="checkbox"/> JUVENILE <input type="checkbox"/> MISDEMEANOR
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CHARGES	CHARGE AS:	CNTS	FL STATUTE NUMBER	VIOL OF SECT.	CODE OF	UCR	DV	WARRANT TYPE OR TRAFFIC CITATION
5.								
6.								
7.								
8.								

OR MORE DWLS CONVICTIONS. THE DEFENDANT WAS ARRESTED AND TRANSPORTED TO TGK VIA CGPD PROCESSING.

HOLD FOR OTHER AGENCY VERIFIED BY	<input type="checkbox"/> HOLD FOR BOND HEARING. DO NOT BOND OUT (Officer Must Appear at Bond Hearing).	<input type="checkbox"/> 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. Furthermore, I agree that notice concerning the time, date and place of all court hearings should be sent to the above address. I agree that it is my responsibility to notify Clerk of the Court (Juveniles notify Juvenile Division) anytime that my address changes.
I SWEAR THAT THE ABOVE STATEMENT IS TRUE AND CORRECT.  PEREZ, C: Court ID: 003-08433	SWORN TO AND SUBSCRIBED BEFORE ME, THE UNDERSIGNED AUTHORITY THIS 02 DAY OF JULY, 2017  BAEZ, J: Court ID: 003-06818	<input type="checkbox"/> You need not appear in court, but must comply with the instructions on the reverse side hereof.

COMPLAINT/ARREST AFFIDAVIT CONT.

INCIDENT/INVESTIGATION REPORT

Coral Gables Police Department

Case # 17-005014

Status Codes L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found

	UCR	Status	Quantity	Type Measure	Suspected Type	Up to 3 types of activity
D R U G S						

Assisting Officers
PEREZ, C. (8433), THOMSON, R.H. (7203)

Suspect Hate / Bias Motivated: *None (No Bias)*

NARRATIVE

IO Mendez was attending a Venezuelan event at the WATSCO Center located on the University of Miami Coral Gables campus. While at the event Mendez began choking on a piece of chewing gum that was obstructing her airway. Officer Cristino Perez (U8433), who was working in an off-duty capacity at the event, was in the vicinity of the incident and rendered aid to Mendez by conducting an obstruction dislodging technique clearing her airway.

Coral Gables Fire Rescue #2 (Lt. Santigrassi) cleared Mendez on scene.



FLORIDA TRAFFIC CRASH REPORT

LONG FORM SHORT FORM UPDATE
(Shaded Areas)

TOTAL # OF VEHICLE SECTION(S) 1
 TOTAL # OF PERSON SECTION(S) 1
 TOTAL # OF NARRATIVE SECTION(S) 1

MAIL TO: DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES
 TRAFFIC CRASH RECORDS, NEIL KIRKMAN BUILDING
 TALLAHASSEE, FL 32399-0537

CRASH DATE 07/17/2017	TIME OF CRASH 1:05 PM	DATE OF REPORT 7/17/2017	REPORTING AGENCY CASE NUMBER 17-005040	HSMV CRASH REPORT NUMBER 86774600
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CRASH IDENTIFIERS							
COUNTY CODE 01	CITY CODE 38	COUNTY OF CRASH MIAMI-DADE	PLACE OR CITY OF CRASH CORAL GABLES	CHECK IF WITHIN CITY LIMITS <input checked="" type="checkbox"/>	TIME REPORTED 1:05 PM	TIME DISPATCHED 1:05 PM	
TIME ON SCENE 1:05 PM		TIME CLEARED SCENE 5:00 PM		CHECK IF COMPLETED <input checked="" type="checkbox"/>	REASON (if Investigation NOT Complete)		Notified By: 1 Motorist 2 Law Enforcement <input checked="" type="checkbox"/>

ROADWAY INFORMATION (CHOOSE ONLY 1 OF 4 OPTIONS)				
CRASH OCCURRED ON STREET, ROAD, HIGHWAY OLD CUTLER RD			AT STREET ADDRESS # 1	AT LATITUDE AND LONGITUDE 2
AT FEET 135	MILES	N <input checked="" type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/>	AT / FROM INTERSECTION WITH STREET, ROAD, HIGHWAY 3 SAN BRUNO AV	OR FROM MILEPOST # 4
Road System Identifier 5		Type of Shoulder 2		Type of Intersection 1

CRASH INFORMATION (CHECK IF PICTURES TAKEN) <input type="checkbox"/>				
Light Condition 1	Weather Condition 1	Roadway Surface Condition 1	School Bus Related 1	Manner of Collision/Impact 77

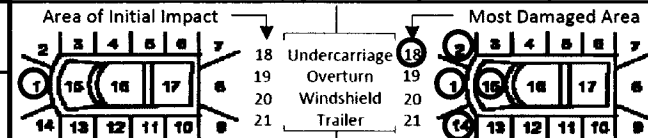
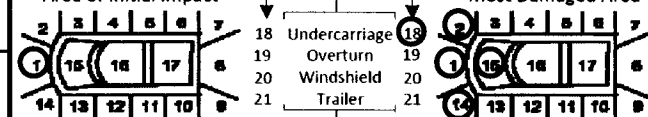
First Harmful Event 32	Non-Collision	Collision Non-Fixed Object	Collision with Fixed Object	First Harmful Event Location 2
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First Harmful Event Relation to Junction 1	Contributing Circumstances: Road 1	Contributing Circumstances: Environment 1
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Work Zone Related 1	Crash in Work Zone	Type of Work Zone	Workers in Work Zone	Law Enforcement in Work Zone
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WITNESSES			
NAME CHRISTOPHER S. LYMAN	ADDRESS 20760 SW 91 CT	CITY & STATE CUTLER BAY, FL	ZIP CODE 33189
NAME CRISTINO PEREZ	ADDRESS 2801 SALZEDO ST	CITY & STATE CORAL GABLES, FL	ZIP CODE 33134

NON VEHICLE PROPERTY DAMAGE							
VEHICLE # 1	PERSON #	PROPERTY DAMAGE - OTHER THAN VEHICLE OAK TREE	EST. AMOUNT \$100	OWNER'S NAME <input checked="" type="checkbox"/> (Check if Business) CITY OF CORAL GABLES	ADDRESS 405 BILTMORE WAY CORAL GABLES, FL 33134	CITY & STATE CORAL GABLES, FL	ZIP CODE 33134

VEHICLE # 1		Check if Commercial <input type="checkbox"/>		REPORTING AGENCY CASE NUMBER 17-005040			HSMV CRASH REPORT NUMBER 86774600					
1 Vehicle in Transport 2 Parked Motor Vehicle 3 Working Vehicle		VEHICLE LICENSE NUMBER 2771UE		STATE FL	REGISTRATION EXPIRES 12/31/2017	Check if Permanent Registration <input type="checkbox"/>	VIN JW6AAE1H5WL000408					
Hit and Run 1 No 2 Yes 88 Unknown		YEAR 1998	MAKE MITS	MODEL FF639F48L	STYLE TRK	COLOR WHI	DAMAGE: 1 Disabling 4 Minor 2 Functional 88 Unknown 3 None		EST. AMOUNT 8,000			
INSURANCE COMPANY UK			INSURANCE POLICY NUMBER UNKNOWN		Towed due to Damage: 1 No 2 Yes	VEHICLE REMOVED BY DOWNTOWN TOWING		1 Rotation 2 Owner Request 3 Driver 77 Other, Explain in Narrative				
NAME OF VEHICLE OWNER (Check if Business) <input checked="" type="checkbox"/> MIAMI STRIPING INC				CURRENT ADDRESS 22225 NW 194 AV			CITY & STATE MIAMI, FL		ZIP CODE 33170			
TRAILER #	LICENSE NUMBER	STATE	REGISTRATION EXPIRES	Check if Permanent Registration <input type="checkbox"/>	VIN	YEAR	MAKE	LENGTH	AXLES			
						0						
						0						
VEHICLE TRAVELING N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W <input type="checkbox"/> Off-Road <input type="checkbox"/> Unknown <input type="checkbox"/>		ON STREET, ROAD, HIGHWAY OLD CUTLER RD					AT EST. SPEED 25	POSTED SPEED 35	TOTAL LANES 2			
HAZ. MAT. RELEASED 1 No 2 Yes 88 Unknown	HAZ. MAT. PLACARD 1 No 2 Yes 88 Unknown	HAZ. MAT. NUMBER	HAZ. MAT. CLASS	Area of Initial Impact 			Most Damaged Area 					
MOTOR CARRIER NAME				US DOT NUMBER		MOTOR CARRIER ADDRESS		CITY & STATE		ZIP CODE	PHONE NUMBER	
Vehicle Body Type 19 <input type="checkbox"/>		Trafficway 1 <input type="checkbox"/>		Commercial Motor Vehicle Configuration 1 <input type="checkbox"/>			Emergency Vehicle Use 1 <input type="checkbox"/>					
1 Passenger Car 2 Passenger Van 3 Pickup 7 Motor Home 8 Bus 11 Motorcycle 12 Moped 13 All Terrain Vehicle (ATV)		15 Low Speed Vehicle 16 (Sport) Utility Vehicle 17 Cargo Van (10,000 lbs (4,536 kg) or less) 18 Motor Coach 19 Other Light Trucks (10,000 lbs (4,536 kg) or less) 20 Medium/Heavy Trucks (more than 10,000 lbs (4,536 kg)) 21 Farm Labor Vehicle 77 Other, Explain in Narrative 88 Unknown		1 Two-Way, Not Divided 2 Two-Way, Not Divided, with a Continuous Left Turn Lane 3 Two-Way, Divided, Unprotected (painted >4 feet) Median 4 Two-Way, Divided, Positive Median Barrier 5 One-Way Trafficway 88 Unknown			1 Vehicle 10,000 lbs or less Placarded for Hazardous Materials 2 Single-Unit Truck (2-axle and GVWR more than 10,000 lbs (4,536 kg)) 3 Single-Unit Truck (3 or more axles) 4 Truck Pulling Trailer(s) 5 Truck Tractor (bobtail) 6 Truck Tractor/Semi-Trailer 7 Truck Tractor/Double Trailer			8 Tractor/Triple 9 Truck more than 10,000 lbs (4,536 kg), Cannot Classify 10 Bus/Large Van (seats for 9-15 occupants, including driver) 11 Bus (seats for more than 15 occupants, including driver) 77 Other, Explain in Narrative 88 Unknown		
Comm/Non-Commercial 1 Interstate Carrier 2 Intrastate Carrier 3 Not in Commerce/Government 4 Not in Commerce/Other Truck		Trailer Type 1 <input type="checkbox"/>		Cargo Body Type 3 <input type="checkbox"/>			Emergency Vehicle Use 1 <input type="checkbox"/>					
1 Single Semi Trailer 2 Tandem Semi Trailer 3 Tank Trailer 4 Saddle Mount/Trailer 5 Boat Trailer 6 Utility Trailer 7 House Trailer		8 Pole Trailer 9 Towed Vehicle 10 Auto Transport 77 Other, Explain in Narrative 88 Unknown			1 No Cargo 2 Bus			13 Intermodal Container Chassis 14 Vehicle Towing Another Vehicle 15 Not Applicable (vehicle 10,000 lbs (4,536 kg) or less not displaying NM placard) 77 Other, Explain in Narrative 88 Unknown				
Most Harmful Event 32 <input type="checkbox"/>		Collision with Non-Fixed Object 10 <input type="checkbox"/>		Collision with a Fixed Object 19 <input type="checkbox"/>			Emergency Vehicle Use 1 <input type="checkbox"/>					
1 Overturn/Rollover 2 Fire/Explosion 3 Immersion 4 Jackknife 5 Cargo/Equipment Loss or Shift 6 Fell/Jumped From Motor Vehicle 7 Thrown or Falling Object 8 Ran into Water/Canal 9 Other Non-Collision		10 Pedestrian 11 Pedalcycle 12 Railway Vehicle (train, engine) 13 Animal 14 Motor Vehicle in Transport 15 Parked Motor Vehicle 16 Work Zone/Maintenance Equipment 17 Struck by Falling, Shifting Cargo or Anything Set in Motion by Motor Vehicle 18 Other Non-Fixed Object			19 Impact Attenuator/Crash Cushion 20 Bridge Overhead Structure 21 Bridge Pier or Support 22 Bridge Rail 23 Culvert 24 Ditch 25 Embankment 27 Guardrail Face 28 Guardrail End			29 Cable Barrier 30 Concrete Traffic Barrier 31 Other Traffic Barrier 32 Tree (standing) 33 Utility Pole/Light Support 34 Traffic Sign Support 35 Traffic Signal Support 36 Other Post, Pole, or Support 37 Fence 38 Mailbox 39 Other Fixed Object (wall, building, tunnel, etc.)				
Sequence of Events 1st 42 <input type="checkbox"/> 2nd 32 <input type="checkbox"/> 3rd <input type="checkbox"/> 4th <input type="checkbox"/>		Vehicle Maneuver Action 1 <input type="checkbox"/>		Traffic Control Device For This Vehicle 1 <input type="checkbox"/>			Vehicle Defects 1 <input type="checkbox"/>					
40 Equipment Failure (blown tire, brake failure, etc.) 41 Separation of Units 42 Ran Off Roadway, Right 43 Ran Off Roadway, Left 44 Cross Median 45 Cross Centerline 46 Downhill Runaway		1 Straight Ahead 3 Turning Left 4 Backing 5 Turning Right 6 Changing Lanes 8 Parked 10 Making U-Turn 11 Overtaking/Passing 13 Stopped in Traffic 14 Slowing 15 Negotiating a Curve 16 Leaving Traffic Lane 17 Entering Traffic Lane 77 Other, Explain in Narrative 88 Unknown			1 No Controls 4 School Zone Sign/Device 5 Traffic Control Signal 6 Stop Sign 7 Yield Sign			8 Flashing Signal 9 Railway Crossing Device 10 Person (including Flagman, Officer, Guard, etc.) 13 Warning Sign 77 Other, Explain in Narrative 88 Unknown				
Roadway Grade 1 <input type="checkbox"/>		Roadway Alignment 1 <input type="checkbox"/>		Special Function of Motor Vehicle 1 <input type="checkbox"/>			Vehicle Defects 1 <input type="checkbox"/>					
1 Level 2 Hillcrest 3 Uphill 4 Downhill 5 Sag (bottom)		1 Straight 2 Curve Right 3 Curve Left		1 No Special Function 2 Farm Vehicle 3 Police 7 Taxi 8 Military 9 Ambulance 10 Fire Truck 11 Farm Labor Transport 12 School Bus 13 Transit/Commuter Bus 14 Intercity Bus 15 Charter/Tour Bus 16 Shuttle Bus 17 Farm Labor Bus 88 Unknown			12 Suspension 13 Wheels 14 Windows/Windshield 15 Mirrors 16 Truck Coupling/Trailer Hitch/Safety Chains 77 Other, Explain in Narrative 88 Unknown					
VIOLATIONS												
PERSON # 1	NAME OF VIOLATOR LIDIER BAUTA FACENDA			FL STATUTE NUMBER 316.1925(1)		CHARGE CARELESS DRIVING		CITATION NUMBER A8KDD4E				
PERSON #	NAME OF VIOLATOR			FL STATUTE NUMBER		CHARGE		CITATION NUMBER				
PERSON #	NAME OF VIOLATOR			FL STATUTE NUMBER		CHARGE		CITATION NUMBER				

Dark Only

PERSON # 1	REPORTING AGENCY CASE NUMBER 17-005040	HSMV CRASH REPORT NUMBER 86774600
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1 Driver 2 Non-Motorist 3 Passenger	1	VEHICLE # 1	NAME LIDIER BAUTA FACENDA	PHONE NUMBER (305) 247-6056	<input type="checkbox"/>	<input type="checkbox"/>
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CURRENT ADDRESS (Number and Street) 22225 SW 194 AV	CITY & STATE MIAMI, FL	ZIP CODE 33170
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DATE OF BIRTH 03/12/1980	SEX: 1 Male 2 Female 88 Unknown	1	DRIVER LICENSE NUMBER B312520800920	STATE FL	EXPIRES 03/12/2025	INJURY SEVERITY (INJ) 1 None 2 Possible 3 Non-incapacitating	4 Incapacitating 5 Fatal (within 30 days) 6 Non-Traffic Fatality	4
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DL Type		Required Endorsements		Drivers Actions at Time of Crash		Condition At Time of Crash	
5		1		2		3	
Driver Distracted By		Other Inside the Vehicle		1st		3rd	
7		2		3		4	
Driver Vision Obstructions		5 Load on Vehicle		9 Smoke			
1		6		10			

DRIVER OR PASSENGER		Helmet Use (HU)		Eye Protection (EP)		Restraint Systems (RS)	
1		1		1		3	
Motor Vehicle Seating Position:		LOCATION: SEAT ROW OTHER		Air Bag Deployed (ABD)		5 Deployed-Other	
1		1		2		6	
Ejection (EJECT)		1st		2nd			
1		1		2			

Non-Motorist Description		Non-Motorist Location At Time of Crash		Action Prior to Crash	
1		1		1	
Safety Equipment		Non-Motorist Actions/Circumstances		7 Entering/Exiting Parked/Standing Vehicle	
1		1		8	

ALCOHOL/DRUG/EMS								
SUSPECTED ALCOHOL USE: 1 No 2 Yes 88 Unknown	ALCOHOL TESTED: 1 Test Not Given 2 Test Refused 3 Test Given 88 Unknown, if Tested	ALCOHOL TEST TYPE: 1 Blood 2 Breath 3 Urine 77 Other, Explain in Narrative	ALCOHOL TEST RESULT: 1 Pending 2 Completed 88 Unknown	BAC	SUSPECTED DRUG USE: 1 No 2 Yes 88 Unknown	DRUG TESTED: 1 Test Not Given 2 Test Refused 3 Test Given 88 Unknown, if Tested	DRUG TEST TYPE: 1 Blood 3 Urine 77 Other, Explain in Narrative	DRUG TEST RESULT: 1 Positive 2 Negative 3 Pending 88 Unknown

SOURCE OF TRANSPORT TO MEDICAL FACILITY 1 Not Transported 2 EMS 3 Law Enforcement 77 Other, Explain in Narrative	2	EMS AGENCY NAME OR ID MIAMI-DADE AIR RESCUE	EMS RUN NUMBER 154807	MEDICAL FACILITY TRANSPORTED TO JACKSON SOUTH HOSPITAL
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PERSON # 2		VEHICLE # 1		NAME LEONEL HERNANDEZ ALEGRE		DATE OF BIRTH 08/16/1995		INJ 4		SEX 1		LOC: S R O 77 77 3		EJECT 1		HU 1		EP 1		ABD 1		RS 2	
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CURRENT ADDRESS (Number and Street) 11433 SW 185 TER	CITY & STATE MIAMI, FL	ZIP CODE 33157
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SOURCE OF TRANSPORT TO MEDICAL FACILITY 1 Not Transported 2 EMS 3 Law Enforcement 77 Other, Explain in Narrative	2	EMS AGENCY NAME OR ID MIAMI-DADE AIR RESCUE	EMS RUN NUMBER 154807	MEDICAL FACILITY TRANSPORTED TO JACKSON SOUTH HOSPITAL
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PERSON #	VEHICLE #	NAME	DATE OF BIRTH	INJ	SEX	LOC: S	R	O	EJECT	HU	EP	ABD	RS
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CURRENT ADDRESS (Number and Street)	CITY & STATE	ZIP CODE
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SOURCE OF TRANSPORT TO MEDICAL FACILITY 1 Not Transported 2 EMS 3 Law Enforcement 77 Other, Explain in Narrative	1	EMS AGENCY NAME OR ID	EMS RUN NUMBER	MEDICAL FACILITY TRANSPORTED TO
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NARRATIVE

REPORTING AGENCY CASE NUMBER

17-005040

HSMV CRASH REPORT NUMBER

86774600

Vehicle 1 was traveling northbound on Old Cutler Road. I was traveling northbound on Old Cutler Road, directly behind Vehicle 1. Vehicle 1 ran off the roadway 44 feet north of the intersection of San Bruno Av. Vehicle 1 continued traveling northbound on the shoulder of the 8300 block of Old Cutler Road. Vehicle 1 collided into a standing oak tree on the east shoulder of the 8300 block of Old Cutler Road, 135 feet north of the intersection of San Bruno Av. The driver was trapped in Vehicle 1, due to the floorboard crumbling and trapping his feet. The passenger was sitting in the cargo section of Vehicle 1. The force of the impact caused the passenger to hit his head and upper torso with the door of the vehicle's cargo area, knocking the passenger unconscious. I immediately noticed the driver was alert and breathing so I shut off Vehicle 1's ignition. I went to the cargo area of Vehicle 1 and secured the passenger's cervical spine until Coral Gables Fire Rescue arrived and relieved me. The driver had to be extricated from the vehicle. The passenger and driver were airlifted by Miami Fire Air Rescue to Jackson South Hospital. The driver of Vehicle 1 suffered an open fracture to the right leg and a laceration to the head. The passenger of Vehicle 1 suffered a hematoma to the rear of the head. The driver of Vehicle 1 spontaneously uttered that he fell asleep while operating Vehicle 1. The driver of Vehicle 1 was cited.

**** END ****

ADDITIONAL PASSENGERS

PERSON #	VEHICLE #	NAME	DATE OF BIRTH	INJ	SEX	LOC: S	R	O	EJECT	HU	EP	ABD	RS

CURRENT ADDRESS (Number and Street)

CITY & STATE

ZIP CODE

SOURCE OF TRANSPORT TO MEDICAL FACILITY 1 Not Transported 2 EMS 3 Law Enforcement 77 Other, Explain in Narrative 88 Unknown	<input type="checkbox"/>	EMS AGENCY NAME OR ID	EMS RUN NUMBER	MEDICAL FACILITY TRANSPORTED TO
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PERSON #	VEHICLE #	NAME	DATE OF BIRTH	INJ	SEX	LOC: S	R	O	EJECT	HU	EP	ABD	RS

CURRENT ADDRESS (Number and Street)

CITY & STATE

ZIP CODE

SOURCE OF TRANSPORT TO MEDICAL FACILITY 1 Not Transported 2 EMS 3 Law Enforcement 77 Other, Explain in Narrative 88 Unknown	<input type="checkbox"/>	EMS AGENCY NAME OR ID	EMS RUN NUMBER	MEDICAL FACILITY TRANSPORTED TO
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ADDITIONAL VIOLATIONS

PERSON #	NAME OF VIOLATOR	FL STATUTE NUMBER	CHARGE	CITATION NUMBER

PERSON #	NAME OF VIOLATOR	FL STATUTE NUMBER	CHARGE	CITATION NUMBER

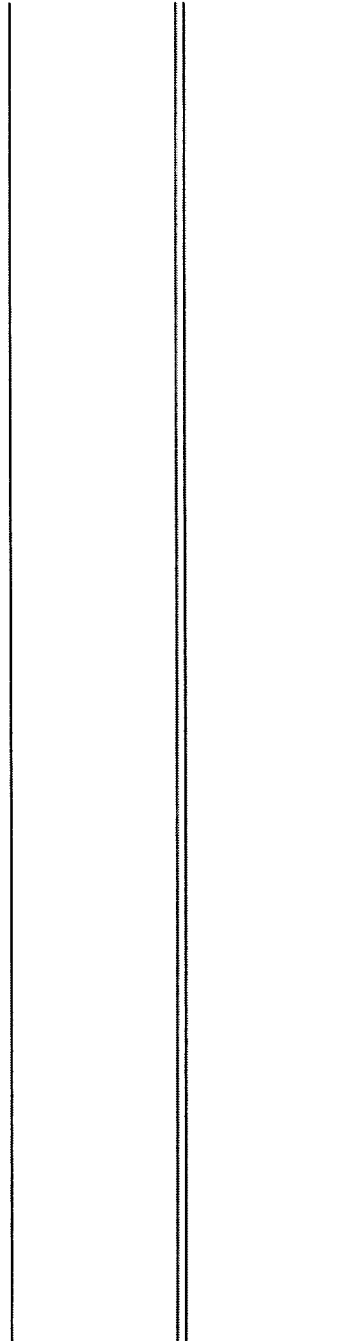
REPORTING OFFICER

ID/BADGE NUMBER	RANK & NAME	DEPARTMENT	FHP	SO	PD	OTHER
8433	PO CRISTINO PEREZ	CORAL GABLES POLICE DEPARTMENT	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

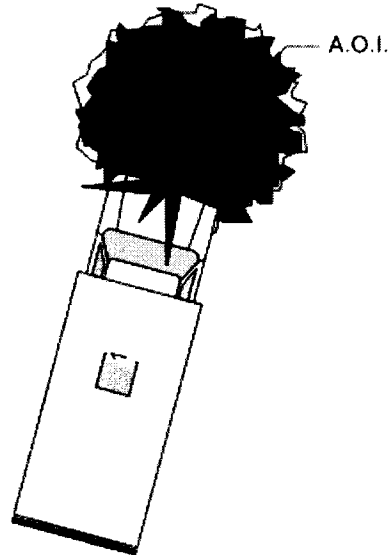
Draft Only



Indicate North



OLD CUTLER RD Block# 8300



Drawing Not To Scale.



1100391263

OBTS NUMBER 1306249530	COMPLAINT/ARREST AFFIDAVIT	POLICE CASE NO. 17005167
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SPECIAL OPERATION: <input type="checkbox"/> FELONY <input type="checkbox"/> MISD <input checked="" type="checkbox"/> TRAFFIC <input type="checkbox"/> JUV <input type="checkbox"/> DV <input type="checkbox"/> MOVES <input type="checkbox"/> CIV INF <input type="checkbox"/> FUGITIVE WARRANT: <input type="checkbox"/> In State <input type="checkbox"/> Out State	JAIL NO. 170152716	PMHD NO	COURT CASE NO.
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IDS NO. 0940660	AGENCY CODE 003	MUNICIPAL P.D. DEF. ID NO.	MDPD RECORDS AND ID NO. 0353415	STUDENT ID NO.	GANG RELATED NO	FRAUD RELATED NO
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DEFENDANT'S NAME (LAST, FIRST, MIDDLE) SANCHEZ, EDUARDO	ALIAS and / or STREET NAME	SIGNAL: 100
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DOB (MM/DD/YYYY) 03/18/1968	AGE 49	RACE W	SEX M	HISPANIC: YES ETHNICITY: CUB	HEIGHT 5'11	WEIGHT 200	HAIR COLOR BLD	HAIR LENGTH BLD	HAIR STYLE OTH	EYES HAZ	GLASSES NO	FACIAL HAIR MUS	TEETH NOR
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SCARS, TATTOOS, UNIQUE PHYSICAL FEATURES (Location, Type, Description)	PLACE OF BIRTH (City, State/Country) CAMAGUEY CC
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LOCAL ADDRESS	PHONE	CITIZENSHIP CC
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PERMANENT ADDRESS (Street, Apt. Number) 15610 SW 80TH ST # J102	(City) MIAMI	(State) FL	(Country) US	(Zip) 33193	PHONE (305) 877-7479	OCCUPATION REALTOR
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BUSINESS ADDRESS (Street, Apt. Number) 15610 SW 80TH ST # J102	(City) MIAMI	(State) FL	(Country) US	(Zip) 33193	PHONE (305) 877-7479	ADDRESS SOURCE DL
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DRIVER'S LICENSE NUMBER/STATE FL-S522200680980	SOCIAL SECURITY NO. XXX-XX-XXXX	WEAPON SEIZED NO	Defendant/CONCEALED WEAPON PERMIT NONE	INDICATION OF: Alcohol Intoxication: N Drug Intoxication: N
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ARREST DATE 07/23/2017	ARREST TIME 00:23	ARREST LOCATION 4100 BLK SW EIGHTH ST MIAMI, FL 33134	GRID
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CO-DEFENDANT NAME	DOB	<input type="checkbox"/> IN CUSTODY <input type="checkbox"/> AT LARGE	<input type="checkbox"/> FELONY <input type="checkbox"/> DV	<input type="checkbox"/> JUVENILE <input type="checkbox"/> MISDEMEANOR
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CO-DEFENDANT NAME	DOB	<input type="checkbox"/> IN CUSTODY <input type="checkbox"/> AT LARGE	<input type="checkbox"/> FELONY <input type="checkbox"/> DV	<input type="checkbox"/> JUVENILE <input type="checkbox"/> MISDEMEANOR
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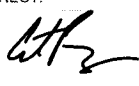

CO-DEFENDANT NAME	DOB	<input type="checkbox"/> IN CUSTODY <input type="checkbox"/> AT LARGE	<input type="checkbox"/> FELONY <input type="checkbox"/> DV	<input type="checkbox"/> JUVENILE <input type="checkbox"/> MISDEMEANOR
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JUV only	Relation	Name	Street	Zip	Phone	Contacted?
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CHARGES	CHARGE AS:	CNTS	FL STATUTE NUMBER	VIOL OF SECT.	CODE OF	UCR	DV	WARRANT TYPE OR TRAFFIC CITATION
1. T/0-DRIVING WHILE LICENSE SUSPENDED/WITH KNOWLEDGE	F.S.	1	322.34(2)			90000092	N	A8KDKDE
2.								
3.								
4.								

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:
On the **23** day of **JULY, 2017**, at **00:06** at **4700 BLK SW EIGHTH ST. CORAL GABLES, FL 33134**

DEFENDANT WAS OBSERVED DRIVING A 2011 CHEVROLET SUV, BEARING FLORIDA TAG # 55SEY, EASTBOUND ON THE 4700 BLOCK OF SW EIGHTH ST. A TELETYPE CHECK REVEALED THE REGISTERED OWNER OF THE VEHICLE HAS AN EXPIRED DRIVER'S LICENSE. I CONDUCTED A TRAFFIC STOP AT THE 4100 BLOCK OF SW EIGHTH ST. THE DEFENDANT IDENTIFIED HIMSELF BY HIS FLORIDA DRIVER'S LICENSE. FURTHER INVESTIGATION REVEALED THE DEFENDANT HAS MULTIPLE SUSPENSIONS. THE DEFENDANT WAS ARRESTED AND TRANSPORTED TO TGK VIA CGPD PROCESSING. THE VEHICLE WAS RELEASED TO THE DEFENDANT'S GIRLFRIEND, WHO POSSESSES A VALID FLORIDA DRIVERS LICENSE.

HOLD FOR OTHER AGENCY VERIFIED BY	<input type="checkbox"/> HOLD FOR BOND HEARING. DO NOT BOND OUT (Officer Must Appear at Bond Hearing).	<input type="checkbox"/> 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. Furthermore, I agree that notice concerning the time, date and place of all court hearings should be sent to the above address. I agree that it is my responsibility to notify Clerk of the Court (Juvéniles notify Juvenile Division) anytime that my address changes. <input type="checkbox"/> You need not appear in court, but must comply with the instructions on the reverse side hereof.
I SWEAR THAT THE ABOVE STATEMENT IS TRUE AND CORRECT.  PEREZ, C: Court ID: 003-08433	SWORN TO AND SUBSCRIBED BEFORE ME. THE UNDERSIGNED AUTHORITY THIS 23 DAY OF JULY, 2017  JENKINS, R: Court ID: 003-08451	

COMPLAINT/ARREST AFFIDAVIT - COURT COPY