



Clerk: 2/25/2021 2:46 PM

FLORIDA UNIFORM TRAFFIC CITATION

AE3BVWE

COUNTY OF PINELLAS 04		<input type="checkbox"/> (1) FHP <input type="checkbox"/> (2) PD <input checked="" type="checkbox"/> (3) S.O. <input type="checkbox"/> (4) OTHER	
CITY OF (IF APPLICABLE)		AGENCY NAME PINELLAS COUNTY SO	
		AGENCY #	
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 THU	MONTH 2	DAY 18	YEAR 2021
		TIME 03:11	<input checked="" type="checkbox"/> A.M. <input type="checkbox"/> P.M.
NAME (PRINT) FIRST ROBERT		MIDDLE ALLEN	LAST HOLZAEPFEL
STREET 4604 SWORDFISH DR			
IF DIFFERENT THAN ONE ON DRIVER LICENSE "X" HERE			
CITY BRADENTON		STATE FL	ZIP CODE 34208
TELEPHONE NUMBER 941-264-6323	DATE OF BIRTH MO 06 DAY 03 YEAR 87	RACE W	SEX M HGT 510
DRIVER LICENSE NUMBER H 421761872030	STATE FL	CLASS E	CDL LICENSE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
YR. LICENSE EXP. 21	COMMERCIAL VEHICLE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
YR. VEHICLE 02	MAKE FORD	STYLE TK	COLOR WHI
PLACARDED HAZ. MATERIAL <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
VEHICLE LICENSE NO IV76LC	TRAILER TAG NO.	STATE FL	YEAR TAG EXPIRES 2022
UPON A PUBLIC STREET OR HIGHWAY, OR OTHER LOCATION, NAMELY EAST LAKE RD / FORELOCK RD			MOTORCYCLE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
			COMPANION CITATION(S) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
FT _____ MILES _____ <input type="checkbox"/> N <input checked="" type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W OF NODE _____			

DID UNLAWFULLY COMMIT THE FOLLOWING OFFENSE. CHECK ONLY ONE OFFENSE EACH CITATION.

UNLAWFUL SPEED _____ MPH SPEED APPLICABLE _____ MPH

(INTERSTATE SCHOOL ZONE CONSTRUCTION WORKERS PRESENT)

SPEED MEASUREMENT DEVICE:

<input type="checkbox"/> CARELESS DRIVING	<input type="checkbox"/> CHILD RESTRAINT	<input type="checkbox"/> EXPIRED DRIVER LICENSE SIX (6) MONTHS OR LESS
<input type="checkbox"/> VIOLATION OF TRAFFIC CONTROL DEVICE	<input type="checkbox"/> SAFETY BELT VIOLATION	<input type="checkbox"/> EXPIRED DRIVER LICENSE MORE THAN SIX (6) MONTHS
<input type="checkbox"/> FAILURE TO STOP AT A TRAFFIC SIGNAL	<input type="checkbox"/> IMPROPER OR UNSAFE EQUIPMENT	<input type="checkbox"/> NO VALID DRIVER LICENSE
<input type="checkbox"/> IMPROPER LANE CHANGE OR COURSE	<input type="checkbox"/> EXPIRED TAG SIX (6) MONTHS OR LESS	<input type="checkbox"/> DRIVING WHILE LICENSE SUSPENDED OR REVOKED
<input type="checkbox"/> NO PROOF OF INSURANCE	<input type="checkbox"/> EXPIRED TAG MORE THAN SIX (6) MONTHS	<input type="checkbox"/> DRIVING UNDER THE INFLUENCE
<input type="checkbox"/> VIOLATION OF RIGHT-OF-WAY	<input type="checkbox"/> IMPROPER PASSING	<input type="checkbox"/> Passenger Under 18 Yrs

OTHER VIOLATIONS OR COMMENTS PERTAINING TO OFFENSE:

CRASH - LEAVING SCENE ON PUBLIC/PRIVATE PROPERTY W/O RENDERING AID (DEATH/INJURY)

RE-EXAM YES NO

DL SEIZED YES NO

AGGRESSIVE DRIVING

IN VIOLATION OF SECTION **316.027(2)** SUB-SECTION

CRASH	PROPERTY DAMAGE	INJURY TO ANOTHER	SERIOUS BODILY INJURY TO ANOTHER	FATAL
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input checked="" type="checkbox"/> YES \$1000 <input type="checkbox"/> NO	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

CRIMINAL VIOLATION: COURT APPEARANCE REQUIRED, AS INDICATED BELOW

INFRACTION: COURT APPEARANCE REQUIRED, AS INDICATED BELOW

INFRACTION WHICH DOES NOT REQUIRE APPEARANCE IN COURT

AE3BVWE

CIVIL PENALTY IS _____

COURT INFORMATION **AT THE CALL OF THE COURT**

NORTH COUNTY TRAFFIC COURT DATE _____ TIME _____

29582 U.S. 19 NORTH COURT

CLEARWATER, FL 33761 LOCATION

Additional Comments

ARREST DELIVERED TO **PCJ** DATE **2/18/2021**

I AGREE AND PROMISE TO COMPLY AND ANSWER TO 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.

X SIGNATURE OF VIOLATOR (SIGNATURE IS REQUIRED IF INFRACTION REQUIRES APPEARANCE IN COURT)

DETECTIVE J. SYERS **54876**

Rank - Name Of Officer Badge No. ID No Troop/Unit

I CERTIFY THIS CITATION WAS DELIVERED TO THE PERSON CITED ABOVE AND CERTIFY THE CHARGE ABOVE

Additional Officer:

Rank - Name Of Officer Badge No. ID No Troop/Unit

HS/MV 75901 (Rev. 06/19)

CASE # SO21-45061 GRID: 47 SPIN: 02056142