

ARREST #

DA #

COURT #

MISC #

JUSTICE COURT: _____ OF _____ STATE OF NEW YORK: COUNTY OF _____ THE PEOPLE OF THE STATE OF NEW YORK Against

Defendant (Last) (First) (Middle)

The above "DEFENDANT" is charged by Simplified Information (Ticket) Number (s): _____ with OPERATING A MECHANICALLY POWERED VESSEL WHILE UNDER THE INFLUENCE OF ALCOHOL OR DRUGS contrary to Section 49a.2 of the Navigation Law. A SUPPORTING DEPOSITION PURSUANT TO SECTIONS 100.25 & 200.95 RESPECTFULLY OF THE CRIMINAL PROCEDURE LAW IS HEREBY PROVIDED AS FOLLOWS: THE UNDERSIGNED COMPLAINANT, UPON DIRECT KNOWLEDGE UNLESS OTHERWISE SPECIFIED, AVERS THAT THE DEFENDANT on or about the _____ of _____, 20____, at or about _____ o'clock AM/PM, operated a (color) _____ 19/20 _____ (make) _____ vessel bearing State of _____ registration number _____ in a _____ erly direction on (body of water) _____ in the City/Town/Village of _____, State of New York while in an intoxicated condition and/or having a _____ % blood alcohol content.

1. GENERAL INFORMATION

Arrest Date: _____ Arrest Time: _____ AM/PM Date of Birth: _____ Sex: M F U License State: _____ Motorist ID No. _____ Defendant's Address: _____ Defendant's Phone #: _____ Vessel: Impounded Towed Left Water Conditions: _____ Traffic: _____ Weather: _____

2. REASON FOR STOP:

Erratic Operation: (explain) _____ Nav. Law Violation Section(s): _____ V&T Law Violation Section (s): _____ Accident: Property Damage Injury (other than Defendant) Serious Physical Injury Fatality Civilian Complaint Boarding Other: _____ Time of Stop: _____ AM/PM

3. VESSEL OPERATION SHOWN BY:

Complainant's Observations Civilian Witness(es) Identification Admissions (see Number 8) Further Observations as follows: Defendant at the Helm Defendant near the Vessel Keys in the Ignition Engine Running Defendant Injured in Crash Other: _____

4. PROBABLE CAUSE FOR ARREST:

A. Observations of the Defendant's: Operation Odor of Alcoholic Beverages Condition of Eyes Impaired Speech Impaired Motor Coordination Other: _____ Performance of Field Test(s) Refused

	Shore	Boat	Fail	Pass
<input type="checkbox"/> Gaze Nystagmus	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Walk and Turn	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> One Leg Stand	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Finger to Nose	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Rhombberg Test	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Finger Count	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Reciting the Alphabet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Other: _____				

 (specify)

Defendant Disabled: _____ (specify)

B. Admissions By the Defendant:

Oral (see Number 8) Conduct: Screening Test Refusal Chemical Test Refusal Resisted Apprehension Other: _____

C. Other Evidence as Follows:

Open Container of an Alcoholic Beverage in or near Vessel Positive Breath Screening Test: Time _____ AM/PM Civilian Witnesses Video Other: _____

5. NO ALCOHOL AFTER STOP SHOWN BY:

Continual Police Observation Admissions (see Number 8) Civilian Witnesses Video Other: _____

6. CHEMICAL TEST INFORMATION

Time of Test: _____ AM/PM Location of Test: _____ Witness to Test: _____

Blood (Results to be delivered later) Breath Test B.A.C. 0. _____ % Breath Test Operator: _____ Other Test: _____ B.A.C. 0. _____ % (specify) Inst. # _____ ; Model # _____ Amp # _____ ; Sim Lot # _____ Blood Test Drawn By: Nurse Physician EMT Lab Tech Court ordered blood test: Judge: _____ Location of lab for analysis: _____

7. PRESENT CHARGES

BWAI 49-a.2(a) BWI 0.08% BAC or Greater 49-a.2(b) BWI Intox 49-a.2(d) Felony BWI 49-a.2(f) Other VTL Violation(s) _____ Other Nav. Offense(s) _____ Current Susp./Revoc.(Sec.45-7&Sec. 49-a.3)

False statements made herein are punishable as a Class "A" misdemeanor pursuant to Section 210.45 of the Penal Law.

Police Agency _____ Arresting Officer (Signature) _____ Arresting Officer (Print Name) _____ Shield # _____ Precinct/Troop/Station _____ Supporting Deposition Served on Defendant

Date _____ Officer's Initials _____ Defendant's Initials _____ COURT COPY DEFENDANT DISTRICT ATTORNEY POLICE COPY (CIRCLE ONE) ADM-170

8. _____ COURT: _____ OF _____ PEOPLE V. _____ Last First Middle ARREST #

PLEASE TAKE NOTICE THAT THE PEOPLE PURSUANT TO SECTION 710.30 OF THE CRIMINAL PROCEDURE LAW, INTEND TO USE ALL STATEMENTS OR ADMISSIONS REFLECTED HEREIN MADE BY THE DEFENDANT TO A LAW ENFORCEMENT OFFICIAL.

A. CONVERSATION AT ARREST SCENE

Time _____ AM/PM _____ Date To Whom: _____ DEFENDANT SAID THAT HE/SHE: Had been drinking: How many _____ Type _____ Where _____ Operated the Vessel Did Not Drink Since Operation of Vessel Ceased Was Proceeding to: _____ Was Proceeding from: _____ Had Prior Alcohol Convictions Is Currently BWI Susp/Revoc Would Not Take a Screening Test Would Not Take a Chemical Test AS IN ATTACHMENT HERETO Other _____

B. CONVERSATION _____ (Specify location)

Time _____ AM/PM _____ Date To Whom: _____ DEFANDANT SAID THAT HE/SHE: Had been drinking: How many _____ Type _____ Where _____ Operated the Vessel Did Not Drink Since Operation of Vessel Ceased Was Proceeding to: _____ Was Proceeding from: _____ Had Prior Alcohol Convictions Is Currently BWI Susp/Revoc Would Not Take a Screening Test Would Not Take A Chemical Test AS IN ATTACHMENT HERETO Other _____

C. IDENTIFICATION OF DEFENDANT

Confirmation at or near scene Confirmation by other person

D. VIDEO

Observation of operation (or upon other occasion) Yes No

E. WARNINGS GIVEN

Refusal Time: _____ AM/PM Given by: _____ Location: _____ Miranda Time: _____ AM/PM Given By: _____ Location: _____

F. 710.30 Notice served on Defendant

Date _____ Officer's Initials _____ Defendant's Initials _____ COURT COPY DEFENDANT DISTRICT ATTORNEY POLICE COPY