


SPECIAL CONDITIONS		NUMBER INJURED 0	HIT & RUN FELONY <input type="checkbox"/>	CITY Richmond	JUDICIAL DISTRICT Bay Superior		LOCAL REPORT NUMBER 2020-00004596				
CITY PROPERTY DAMAGE		NUMBER KILLED 0	HIT & RUN MISD. <input checked="" type="checkbox"/>	COUNTY Contra Costa	REPORTING DISTRICT SOUTHERN	BEAT 2	DAY OF WEEK Saturday	TOW AWAY <input checked="" type="checkbox"/>			
LOCATION	COLLISION OCCURRED ON FLORIDA AV				MO. DAY YEAR 05/16/2020	TIME (2400) 1630	NCIC # 0710	OFFICER I.D. 1764			
	MILEPOST INFORMATION FEET OF				GPS COORDINATES LATITUDE 37.929272 LONGITUDE -122.350413		PHOTOGRAPHS BY <input type="checkbox"/> NONE				
	<input type="checkbox"/> AT INTERSECTION WITH				STATE HWY REL <input type="checkbox"/>		MCDONELL 1764				
	<input checked="" type="checkbox"/> OR 25 FEET EAST OF 20TH ST										
PARTY 1	DRIVER'S LICENSE NUMBER		STATE CA	CLASS C	AIR BAG M	SAFETY EQUIP. B	VEH. YEAR 2005	MAKE / MODEL / COLOR NISSAN ALTIMA Gold	LICENSE NUMBER	STATE CA	
DRIVER	NAME (FIRST, MIDDLE, LAST) <input checked="" type="checkbox"/> KRISTLE LASHAWNDA HASKET						OWNER'S NAME <input checked="" type="checkbox"/> SAME AS DRIVER				
PEDESTRIAN	STREET ADDRESS						OWNER'S ADDRESS <input checked="" type="checkbox"/> SAME AS DRIVER				
PARKED VEHICLE	CITY / STATE / ZIP						DISPOSITION OF VEHICLE ON ORDERS OF: <input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DRIVER <input type="checkbox"/> OTHER				
BICYCLIST	SEX F	HAIR Black	EYES Brown	HEIGHT 504	WEIGHT 280	BIRTH DATE 12/18/1985	RACE Black	Checker's Tow - 510-235-7000			
OTHER	HOME PHONE		BUSINESS PHONE		PRIOR MECHANICAL DEFECTS: <input checked="" type="checkbox"/> NONE APPARENT <input type="checkbox"/> REFER TO NARRATIVE						
	INSURANCE CARRIER		POLICY NUMBER		VEHICLE IDENTIFICATION NUMBER:						
	NO INSURANCE				VEHICLE TYPE 01						
	DIR OF TRAVEL SOUTH	ON STREET OR HIGHWAY 20TH ST		SPEED LIMIT 25		DESCRIBE VEHICLE DAMAGE <input type="checkbox"/> UNK. <input type="checkbox"/> NONE <input type="checkbox"/> MINOR <input checked="" type="checkbox"/> MOD. <input type="checkbox"/> MAJOR <input type="checkbox"/> ROLL-OVER					
					DOT		SHADE IN DAMAGE AREA				
PARTY 2	DRIVER'S LICENSE NUMBER		STATE	CLASS	AIR BAG	SAFETY EQUIP.	VEH. YEAR	MAKE / MODEL / COLOR	LICENSE NUMBER	STATE	
DRIVER	NAME (FIRST, MIDDLE, LAST)						OWNER'S NAME <input type="checkbox"/> SAME AS DRIVER				
PEDESTRIAN	STREET ADDRESS						OWNER'S ADDRESS <input type="checkbox"/> SAME AS DRIVER				
PARKED VEHICLE	CITY / STATE / ZIP						DISPOSITION OF VEHICLE ON ORDERS OF: <input type="checkbox"/> OFFICER <input type="checkbox"/> DRIVER <input type="checkbox"/> OTHER				
BICYCLIST	SEX	HAIR	EYES	HEIGHT	WEIGHT	BIRTH DATE	RACE	PRIOR MECHANICAL DEFECTS: <input type="checkbox"/> NONE APPARENT <input type="checkbox"/> REFER TO NARRATIVE			
OTHER	HOME PHONE		BUSINESS PHONE		VEHICLE IDENTIFICATION NUMBER:						
	INSURANCE CARRIER		POLICY NUMBER		VEHICLE TYPE						
	DIR OF TRAVEL	ON STREET OR HIGHWAY		SPEED LIMIT		DESCRIBE VEHICLE DAMAGE <input type="checkbox"/> UNK. <input type="checkbox"/> NONE <input type="checkbox"/> MINOR <input type="checkbox"/> MOD. <input type="checkbox"/> MAJOR <input type="checkbox"/> ROLL-OVER					
					DOT		SHADE IN DAMAGE AREA				
PARTY 3	DRIVER'S LICENSE NUMBER		STATE	CLASS	AIR BAG	SAFETY EQUIP.	VEH. YEAR	MAKE / MODEL / COLOR	LICENSE NUMBER	STATE	
DRIVER	NAME (FIRST, MIDDLE, LAST)						OWNER'S NAME <input type="checkbox"/> SAME AS DRIVER				
PEDESTRIAN	STREET ADDRESS						OWNER'S ADDRESS <input type="checkbox"/> SAME AS DRIVER				
PARKED VEHICLE	CITY / STATE / ZIP						DISPOSITION OF VEHICLE ON ORDERS OF: <input type="checkbox"/> OFFICER <input type="checkbox"/> DRIVER <input type="checkbox"/> OTHER				
BICYCLIST	SEX	HAIR	EYES	HEIGHT	WEIGHT	BIRTH DATE	RACE	PRIOR MECHANICAL DEFECTS: <input type="checkbox"/> NONE APPARENT <input type="checkbox"/> REFER TO NARRATIVE			
OTHER	HOME PHONE		BUSINESS PHONE		VEHICLE IDENTIFICATION NUMBER:						
	INSURANCE CARRIER		POLICY NUMBER		VEHICLE TYPE						
	DIR OF TRAVEL	ON STREET OR HIGHWAY		SPEED LIMIT		DESCRIBE VEHICLE DAMAGE <input type="checkbox"/> UNK. <input type="checkbox"/> NONE <input type="checkbox"/> MINOR <input type="checkbox"/> MOD. <input type="checkbox"/> MAJOR <input type="checkbox"/> ROLL-OVER					
					DOT		SHADE IN DAMAGE AREA				
PREPARER'S NAME MCDONELL, CHRISTOPHER 1764				DISPATCH NOTIFIED <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			REVIEWER'S NAME REINA, DANIEL 1439			DATE REVIEWED 05/22/2020	

DATE OF COLLISION (MO. DAY. YEAR)		TIME (2400)	NCIC #	OFFICER I.D.	NUMBER		
05/16/2020		1630	0710	1764	2020-00004596		
OWNER'S NAME		OWNER'S ADDRESS			NOTIFIED		
CITY OF RICHMOND		6 13TH STREET			<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
PROPERTY DAMAGE							
DESCRIPTION OF DAMAGE							
SOUTH CURB IN 2000 BLOCK OF FLORIDA AVE							
SEATING POSITION		SAFETY EQUIPMENT		AIR BAG	INATTENTION CODES		
		OCCUPANTS A - NONE IN VEHICLE B - UNKNOWN C - LAP BELT USED D - LAP BELT NOT USED E - SHOULDER HARNESS USED F - SHOULDER HARNESS NOT USED G - LAP/SHOULDER HARNESS USED H - LAP/SHOULDER HARNESS NOT USED J - PASSIVE RESTRAINT USED K - PASSIVE RESTRAINT NOY USE P - NOT REQUIRED		CHILD RESTRAINT Q - IN VEHICLE USED R - IN VEHICLE NOT USED S - IN VEHICLE USE UNKNOWN T - IN VEHICLE IMPROPER US U - NONE IN VEHICLE M/C BICYCLE HELMET DRIVER PASSENGER V - NO X - NO W - YES Y - YES	B - UNKNOWN L - AIR BAG DEPLOYED M - AIR BAG NOT DEPLOYED N - OTHER P - NOT REQUIRED EJECTED FROM VEHICL 0 - NOT EJECTED 1 - FULLY EJECTED 2 - PARTIALLY EJECTED 3 - UNKNOWN	A - CELLPHONE HANDHELD B - CELLPHONE HANDSFREE C - ELECTRONIC EQUIPMENT D - RADIO / CD E - SMOKING F - EATING G - CHILDREN H - ANIMALS I - PERSONAL HYGIENE J - READING K - OTHER	
ITEMS MARKED BELOW FOLLOWED BY AN ASTERISK (*) SHOULD BE EXPLAINED IN THE NARRATIVE							
PRIMARY COLLISION FACTOR LIST NUMBER (#) OF PARTY AT FAULT		TRAFFIC CONTROL DEVICES		1 2 3	SPECIAL INFORMATION	1 2 3	MOVEMENT PRECEDING COLLISION
VC SECTION VIOLATED 1 A 23152A Cited YES		A CONTROLS FUNCTIONING B CONTROLS NOT FUNCTIONING*			A HAZARDOUS MATERIAL B CELL PHONE HANDHELD IN USE		A STOPPED B PROCEEDING STRAIGHT
B OTHER IMPROPER DRIVING*		C CONTROLS OBSCURED D NO CONTROLS PRESENT/FACTOR*			C CELL PHONE HANDSFREE IN USE D CELL PHONE NOT IN USE		C RAN OFF ROAD D MAKING RIGHT TURN
C OTHER THAN DRIVER*		TYPE OF COLLISION			E SCHOOL BUS RELATED	X	E MAKING LEFT TURN
D UNKNOWN*		A HEAD - ON B SIDESWIPE C REAR END D BROADSIDE			F 75 FT MOTORTRUCK COMBO G 32 FT TRAILER COMBO		F MAKING U TURN G BACKING
WEATHER (MARK 1 TO 2 ITEMS)		E HIT OBJECT F OVERTURNED G VEHICLE PEDESTRIAN H OTHER*:					H SLOWING / STOPPING I PASSING OTHER VEHICLE
A CLEAR B CLOUDY C RAINING D SNOWING E FOG / VISIBILITY .FT F OTHER*: G WIND		MOTOR VEHICLE INVOLVED WITH A NON - COLLISION B PEDESTRIAN C OTHER MOTOR VEHICLE D MOTOR VEHICLE ON OTHER ROADWAY E PARKED MOTOR VEHICLE F TRAIN G BICYCLE H ANIMAL:					J CHANGING LANES K PARKING MANEUVER L ENTERING TRAFFIC M OTHER UNSAFE TURNING N XING INTO OPPOSING LANE O PARKED P MERGING Q TRAVELING WRONG WAY R OTHER*:
LIGHTING		I FIXED OBJECT : CURB J OTHER OBJECT:					
X A DAYLIGHT B DUSK - DAWN C DARK - STREET LIGHTS D DARK - NO STREET LIGHTS E DARK - STREET LIGHTS NOT FUNCTIONING*		PEDESTRIAN'S ACTIONS A NO PEDESTRIANS INVOLVED B CROSSING IN CROSSWALK AT INTERSECTION C CROSSING IN CROSSWALK - NOT AT INTERSECTION D CROSSING - NOT IN CROSSWALK E IN ROAD - INCLUDES SHOULDER F NOT IN ROAD G APPROACHING / LEAVING SCHOOL BUS		1 2 3	OTHER ASSOCIATED FACTOR(S) (MARK 1 TO 2 ITEMS) A VC SECTION VIOLATION 22350 CITED <input type="checkbox"/> B VC SECTION VIOLATION CITED <input type="checkbox"/> C VC SECTION VIOLATION CITED <input type="checkbox"/> E VISION OBSCUREMENT F INATTENTION* G STOP & GO TRAFFIC H ENTERING / LEAVING RAMP I PREVIOUS COLLISION J UNFAMILIAR WITH ROAD K DEFECTIVE VEH. EQUIP. CITED <input type="checkbox"/> L UNINVOLVED VEHICLE M OTHER* N NONE APPARENT O RUNAWAY VEHICLE		SOBRIETY - DRUG PHYSICAL A HAD NOT BEEN DRINKING B HBD - UNDER THE INFLUENCE C HBD - NOT UNDER INFLUENCE* D HBD -IMPAIRMENT UNKNOWN* E UNDER DRUG INFLUENCE* F IMPAIRMENT - PHYSICAL* G IMPAIRMENT NOT KNOWN H NOT APPLICABLE I SLEEPY / FATIGUED*
ROADWAY SURFACE X A DRY B WET C SNOWY - ICY D SLIPPERY (MUDDY, OILY, ETC.)		ROADWAY CONDITIONS (MARK 1 TO 2 ITEMS) A HOLES, DEEP RUTS B LOOSE MATERIAL ON ROADWAY* C OBSTRUCTION ON ROADWAY* D CONSTRUCTION-REPAIR ZONE E REDUCED ROADWAY WIDTH F FLOODED* G OTHER* X H NO UNUSUAL CONDITIONS					
Miscellaneous							
<input checked="" type="checkbox"/> "See Attached Sketch"							
<input type="checkbox"/> "See Attached factual diagram"							

SKETCH

CHP 555 Page 4 (Rev. 4-11) OPI 060

DATE OF COLLISION (MO. DAY YEAR)	TIME (2400)	NCIC #	OFFICER I.D.	NUMBER
05/16/2020	1630	0710	1764	2020-00004596

ALL MEASUREMENTS ARE APPROXIMATE AND NOT TO SCALE UNLESS STATED



PREPARED BY	ID NUMBER	MO DAY YEAR	REVIEWERS NAME	MO DAY YEAR
MCDONELL, CHRISTOPHER 1764	1764	05/16/2020	REINA, DANIEL 1439	05/22/2020

DATE OF COLLISION (MO. DAY YEAR)	TIME (2400)	NCIC #	OFFICER I.D.	NUMBER
05/16/2020	1630	0710	1764	2020-00004596

FACTS:

NOTIFICATION: I was dispatched to a call of a hit and run, and possibly female with a firearm. at 1628 hours. I responded from Central Richmond and arrived on scene at 1635 hours. All times, speeds and measurements in this investigation are approximate. Measurements were taken by estimation, except where otherwise indicated.

SCENE: The scene of the collision occurred on the south curb of Florida Ave, just east of S. 20th Street, in the City of Richmond. There are no stop signs or signal controlling this street, and there is a cement divider that separates Florida Ave diagonally from the southeast curb line to the northwest curb line (see sketch for further). Florida Ave is a city street that travels through the south portion of Richmond. The street is a well-lit, even surface that consists primarily of asphalt. S. 20th Street is a north/south running street that travels through the southern portion of Richmond. The area where this collision occurred is a residential neighborhood, designating a 25 MPH speed limit.

PARTIES:

PARTY # 1 (P-1, Krystle Hasket): At the time of police arrival on scene, P-1 was not located near the scene of the collision. P-1 was physically detained by officers approximately one city block from the collision.

Vehicle #1 (V-1, Gold Nissan Altima): V-1 was discovered on the south curb of Florida Ave, blocking the sidewalk. V-1 was unoccupied and unaccompanied by P-1. V-1 was on all four wheels with moderate damage to the front right wheel and right bumper.

PHYSICAL EVIDENCE: I documented photographs of the collision scene with my department-issued cell phone, then uploaded them to the Axon Capture cloud for evidence.

HIT AND RUN: Upon police arrival, V-1 was unoccupied. P-1 had fled the scene and failed to exchange insurance information, in violation of 20002(a) CVC.

OTHER FACTUAL INFORMATION: Following the collision, V-1 collided the south curb in the 2000 block of Florida Ave causing minor cosmetic damage (AOI#1). Additionally, V-1 collided with a PG&E

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electrical post along the south curb of Florida (2000 block), which is approximately 30-feet east of its intersection with S. 20th Street. It appeared an electrical wire cover running down the side of the post was split from the vehicles impact. No further property damage was recorded.

STATEMENTS:

PARTY # 1 (Hasket): Refer to Crime/Incident report for further details on P-1's statement.

OPINIONS AND CONCLUSIONS:

SUMMARY: P-1 was traveling southbound on S. 20th Street towards Florida Ave. P-1 attempted to negotiate an eastbound turn onto Florida Ave, however she lost control of V-1 and mounted the south curb. V-1's right front wheel was damaged (bent) from colliding with the curb, causing V-1 to come to rest several feet following the collision.

AREA OF IMPACT:

AOI #1: The area of impact where V-1 collided with the south curb was approximately 32 feet south of the north curb line of Florida Ave and 40 feet east of the east curb line of S. 20th Street.

AOI #2: The area of impact where V-1 collided with the PG&E electrical post was approximately 32 feet south of the north curb line and 52 feet east of the east curb line of S. 20th Street.

INTOXICATION NARRATIVE: Refer to Crime/Incident for further details.

CAUSE: P-1 caused the collision to occur by being in violation of 23152(a)/(b) CVC.

RECOMMENDATIONS: Route to Richmond Traffic Unit for review.

PREPARED BY	ID NUMBER	MO DAY YEAR	REVIEWERS NAME	MO DAY YEAR
MCDONELL, CHRISTOPHER 1764	1764	05/16/2020	REINA, DANIEL 1439	05/22/2020



Contra Costa County, Office of the Sheriff
Forensic Services Division
Drug, Alcohol, and Toxicology Section

Breath Alcohol Analysis Report

Subject Name:

KRISTLE L HASKET

License #:

Subject Gender: FEMALE

Subject D.O.B.: 12/18/1985

Case/Arrest/Citation #: 20-4596

Intox-DMT Serial Number: 500503

Location: Richmond PD

Test Record ID: 500503-550

Software Version: 43408-J

External Standard Nominal Value: 0.100 g/210L

External Standard Lot #: AG924701005

External Standard Exp. Date: 09/04/2021

Date: 05/16/2020

Time: 18:19:24

Precautionary Checklist

The subject was under continuous observation for at least 15 minutes prior to the collection of the breath sample. During this time the subject must not have ingested alcoholic beverages or other fluids, regurgitated, vomited, eaten, or smoked.

- ✓Enter the Observation start time: 18:02
- ✓Enter the Observation end time: 18:17
- ✓Enter the Subject Information
- ✓Enter Operator Information
- ✓Enter Arrest Information
- ✓Enter Remarks (optional)
- ✓Insert new mouthpiece into the breath hose
- ✓Instruct the subject to deliver a breath sample when the instrument displays "Please Blow"
- ✓Remove and discard mouthpiece
- ✓Sign the Breath Alcohol Report

Breath Alcohol Analysis

Test Sequence	Results (g/210L)	Time
DIAGNOSTIC CHECK	PASSED	18:20
BLANK TEST	0.000	18:20
SUBJECT SAMPLE IR	0.085	18:21
SUBJECT SAMPLE FC	0.083	18:21
BLANK TEST	0.000	18:23
EXTERNAL STANDARD IR	0.098	18:23
EXTERNAL STANDARD FC	0.097	18:23
BLANK TEST	0.000	18:25
SUBJECT SAMPLE IR	0.100	18:25
SUBJECT SAMPLE FC	0.097	18:25
BLANK TEST	0.000	18:27
EXTERNAL STANDARD IR	0.098	18:27
EXTERNAL STANDARD FC	0.097	18:27
BLANK TEST	0.000	18:29

Reported Subject Result: 0.091 g/210L

Remarks:

J. Guzman #1717

Operator Signature:

Trained Operator: JAIME GUZMAN

Badge #: 1717

Agency: RICHMOND PD



AGE 21 AND OLDER OFFICER'S STATEMENT

California Vehicle Code (CVC) §§13353, 13353.1, 13353.2 & 13389



Page 1

LAW ENFORCEMENT AGENCY CASE NUMBER 20-4596	DETENTION/ARREST DATE 5/16/20 / 1640	FOR DMV USE ONLY	
DRIVER NAME (LAST, FIRST, MI.) HASKET, KRYSTLE, L.		DRIVER LICENSE NUMBER [REDACTED]	COMMERCIAL? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No STATE CA
DATE OF BIRTH 12/18/85		SEX F	HAIR BRO
EYES BRO		HEIGHT 5'4"	WEIGHT 270
LICENSE: <input type="checkbox"/> Suspended/Revoked <input type="checkbox"/> Surrendered (Attached) <input type="checkbox"/> Not in Possession <input checked="" type="checkbox"/> Unlicensed		Arrest Type For statistical purposes only. Check all that apply. <input checked="" type="checkbox"/> Alcohol Use <input type="checkbox"/> Cannabis Use <input type="checkbox"/> Other Drug Use	
VIOLATION: <input checked="" type="checkbox"/> 0.08% or more BAC Chemical Test Results <input type="checkbox"/> 0.01% or more BAC (DUI Probation) <input type="checkbox"/> 0.04% or more BAC (Commercial Vehicle)		<input type="checkbox"/> Chemical Test Refusal (Complete Reverse) <input type="checkbox"/> PAS or other Chemical Test Refusal (DUI Probation) (Complete Reverse)	

VEHICLE: License Number or VIN: [REDACTED]
☐ Commercial Vehicle: Vehicle requires a commercial driver license (CVC §15210). ☐ Hazardous Materials: Transporting materials requiring placards/markings (CVC §27903).

NARRATIVE: Describe in detail the facts, observations, and circumstances that led to the stop or contact with the driver in Narrative section on Page 2 of this form.

Contact: On date: **5 / 16 / 20** at **1630** ☐ AM ☒ PM in City/County **RICHMOND** CA, the above driver was contacted.

DRIVING: ☐ Driving observed by this officer or ☒ Driving observed by another observer (complete Observation/Arrest section on Page 2)

Admission of Driving: ☒ Driver admitted to driving the vehicle Collision: ☒ Driver involved in a collision

(If driving not observed by an officer.)

TIME: What time did you stop driving or how long after driving/collision did you wait for law enforcement to arrive? Driver Response: **1625** ☐ AM ☒ PM

ARREST OR DETENTION STATEMENT: 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 Observation/Arrest section on Page 2, on date **5 / 16 / 20** at **1640** ☐ AM ☒ PM for violation of CVC §§23152, 23153, or 23154.

OBJECTIVE SYMPTOMS OF INTOXICATION: ☐ Bloodshot/watery eyes ☒ Odor of alcoholic beverage ☐ Unsteady gait ☐ Slurred speech ☐ PAS results (complete below)
☐ Other: Observed by: ☒ This officer ☐ Another observer:

PRELIMINARY ALCOHOL SCREENING TEST (PAS)

Driver submitted to and completed a PAS test with the results of:

DUI Probation: Required.
Non-DUI Probation: Optional.
Always complete section if PAS results available.

Test 1 **.095** % BAC on **5 / 16 / 20** at **1821** ☐ AM ☒ PM Test 2 _____ % BAC on _____ / _____ / _____ at _____ TIME ☐ AM ☐ PM

OFFICER 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) _____, Serial# _____, Manufactured by _____, (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.

Date **5 / 16 / 20** Signature **X** Badge/ID Number _____ Agcy./Div _____

Breath Test Results:

CHEMICAL TEST

Attach copy of the results, if available.

Test 1 **.085** % BAC on **5 / 16 / 20** at **1821** ☐ AM ☒ PM Test 2 **.097** % BAC on **5 / 16 / 20** at **1825** ☐ AM ☒ PM Test 3 _____ % BAC on _____ / _____ / _____ at _____ TIME ☐ AM ☐ PM (WHEN APPLICABLE)

BREATH TEST MACHINE OPERATOR 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 / 16 / 20** Signature **X** Badge/ID Number **#1717** Agcy./Div **RICHMOND PD**

BLOOD TEST RESULTS: Blood test on date: _____ / _____ / _____ at _____ TIME ☐ AM ☐ PM

URINE TEST RESULTS: First void on date: _____ / _____ / _____ at _____ TIME ☐ AM ☐ PM Test on date: _____ / _____ / _____ at _____ 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 / 16 / 20** in City **RICHMOND** County **CONTRA COSTA COUNTY**

OFFICER'S PRINTED NAME J. GUZMAN	BADGE/ID NUMBER #1717	TELEPHONE NUMBER (90) 210 2273
AGENCY RICHMOND PD	AREA BAY MUN	COURT CODE (IF UNKNOWN, COURT NAME)

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

Date **5 / 16 / 20** Signature of Arresting Officer **X**

ORDER SERVED BY ANOTHER OFFICER: If order was served on driver by another Officer have that officer complete this section.

I personally served a copy of the order to the driver on the date shown below:

Date _____ Serving Officer's Printed Name _____ Badge/ID Number _____ Signature Of Serving Officer **X**

CHEMICAL TEST ADMONITION

(CVC §§23154, 23612)

I admonished the driver on date: 5 / 16 / 20 at 1802 ☐ AM ☒ PM

1. You are required by state law to submit to and complete a chemical test to determine the alcohol and/or drug content of your blood.
2. Because I believe you are under the influence of alcohol or a combination of alcohol and drugs, you have a choice of taking a breath or blood test. If you are on DUI Probation you are required to submit to a Preliminary Alcohol Screening Test.
3. Availability of Tests. (Read only when applicable.)
☐ When Applicable: Since the breath and blood tests are unavailable; you are incapable of completing a breath or blood test; or you are afflicted with hemophilia or are using an anticoagulant medication, you are deemed to have given your consent to chemical testing of your urine.
☐ When Applicable: Since you need medical treatment, your choice is limited to the (check all available) ☐ blood, ☐ breath, and/or ☐ urine test(s), the only test(s) available at _____.
4. If you refuse to submit to, or fail to complete a chemical test, your driving privilege will be administratively suspended for one year or administratively revoked for two or three years by the Department of Motor Vehicles. 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 CVC §23140, 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% or more 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 administrative revocation. Three or more offenses within ten years of the above violations, convictions or separate administrative determinations will result in a three-year administrative revocation.
5. Refusal or failure to complete a chemical test may be used against you in court.
6. Refusal or failure to complete breath or urine testing will result in a fine and mandatory imprisonment if you are convicted of a violation of CVC §§23152 or 23153.
7. 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.
8. If you cannot, or state you cannot, complete the test you choose, you must submit to and complete a remaining test.

DRIVER RESPONSE: Include statements or actions by the driver that indicate a refusal or failure of each test.

☐ Will you take a Preliminary Alcohol Screening Test? (DUI Probation) _____

☒ Will you take a Breath Test? HAS REFUSED THE BREATH TEST

☐ Will you take a Blood Test? _____

TEST UNAVAILABLE: One or more tests were unavailable. ☐ PAS test unavailable ☐ Breath test unavailable ☐ Blood test unavailable

Explain: _____

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

Admonition Read by a Different Officer: If the above Chemical Test Admonition was read to arrestee by another officer, indicate that officer's information:

OFFICER NAME	BADGE/ID NUMBER	AGENCY/DIVISION	TELEPHONE NUMBER
			()

DRUG ADMONITION

1. 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, breath, or urine test. A urine test is available only if you are afflicted with hemophilia or are using an anticoagulant medication.
☐ When Applicable: Because you have already submitted to or refused or failed to complete a breath test or a breath test is unavailable, your choice is limited to a blood test or a urine test, when applicable.
2. If you refuse to submit to, or fail to complete a chemical test, your driving privilege will be administratively suspended for one year or administratively revoked for two or three years, by the Department of Motor Vehicles. 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 CVC §23140, 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% or more 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 administrative revocation. Three or more offenses within ten years of the above violations, convictions or separate administrative determinations will result in a three-year administrative revocation.
3. Refusal or failure to complete a chemical test may be used against you in court.
4. Refusal or failure to complete breath or urine testing will result in a fine and mandatory imprisonment if you are convicted of a violation of CVC §§23152 or 23153.
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.

DRIVER RESPONSE: Include statements or actions by the driver that indicate a refusal or failure of each test.

☐ Will you take a Blood Test? _____

☐ Will you take a Urine Test? _____

TEST UNAVAILABLE: One or more tests were unavailable. ☐ Blood test unavailable ☐ Urine test unavailable

Explain: _____

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

Admonition Read by a Different Officer: If the above Drug Admonition was read to arrestee by another officer, indicate that officer's information:

OFFICER NAME	BADGE/ID NUMBER	AGENCY/DIVISION	TELEPHONE NUMBER
			()



AGE 21 AND OLDER OFFICER'S STATEMENT

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LAW ENFORCEMENT AGENCY CASE NUMBER 20-4596		DETENTION/ARREST DATE 5/16/20 1640		FOR DMV USE ONLY	
DRIVER NAME (LAST, FIRST, M.I.) HASKET, KRYSTLE, L.		DRIVER LICENSE NUMBER [REDACTED]		COMMERCIAL? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	STATE CA
MAILING ADDRESS [REDACTED]					
DATE OF BIRTH 12/18/85	SEX F	HAIR BRO	EYES BRO	HEIGHT 5'4"	WEIGHT 270
LICENSE: <input type="checkbox"/> Suspended/Revoked <input type="checkbox"/> Surrendered (Attached) <input type="checkbox"/> Not in Possession <input checked="" type="checkbox"/> Uncensored					
VIOLATION: <input checked="" type="checkbox"/> 0.08% or more BAC Chemical Test Results <input type="checkbox"/> 0.01% or more BAC (DUI Probation) <input type="checkbox"/> 0.04% or more BAC (Commercial Vehicle) <input type="checkbox"/> Chemical Test Refusal (Complete Reverse) <input type="checkbox"/> PAS or other Chemical Test Refusal (DUI Probation) (Complete Reverse)					
OBSERVATION/ARREST: If driving or collision was observed by someone other than the arresting officer, or if arrest was completed by another officer or person, input that person's information.					
<input type="checkbox"/> Driving or Collision observed by:		<input checked="" type="checkbox"/> Arrest made by: 5 16		<input type="checkbox"/> Observation or Arrest made by: <input type="checkbox"/> Officer <input type="checkbox"/> Citizen	
NAME (PLEASE PRINT) J. Guzman #1717		NAME (PLEASE PRINT) BRANDON LUTHER EVANS		NAME (PLEASE PRINT) [REDACTED]	
ADDRESS 1701 REGATTA BLVD		ADDRESS 335 S. 22ND ST		ADDRESS [REDACTED]	
TELEPHONE NUMBER (510) 20 2273	BADGE/ID NUMBER #1717	AGENCY/DIVISION RICHMOND	TELEPHONE NUMBER (510) 488 4059	BADGE/ID NUMBER [REDACTED]	AGENCY/DIVISION [REDACTED]

NARRATIVE

Describe in detail the facts, observations, and circumstances that led to the stop or contact. Print or write directly on this page.

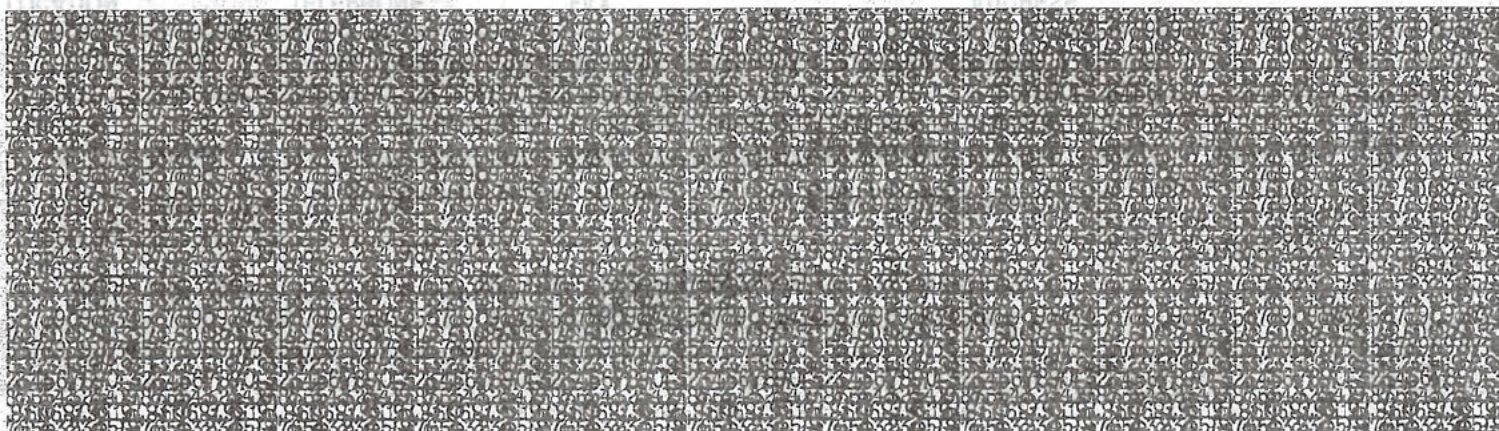
A portion of another report may be cut and pasted below but should be dated and contain an original signature.

Attach arrest, collision, and/or supplemental report(s) if available.

If arrest was made per CVC §40300.5 state the facts and circumstances that support the arrest.

DUI Probation Violations: Indicate below how you determined the driver was on DUI probation.

HASKET WAS DRIVING SOUTHBOUND ON S. 20TH ST. APPROXIMATELY FLORIDA AVE. HASKET ATTEMPTED TO MAKE AN EASTBOUND TURN ON FLORIDA, BUT FAILED TO MAINTAIN CONTROL OF THE VEHICLE DURING THE TURN. AS A RESULT, HASKET COLLIDED WITH A TELEPHONE POLE ON THE SOUTH CURB LINE OF FLORIDA AVE.



**AGE 21 AND OLDER ADMINISTRATIVE PER SE
 SUSPENSION/REVOCATION ORDER AND TEMPORARY DRIVER LICENSE**

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Driver must be given a copy of this order. DMV telephone number (916) 657-0214.

LAW ENFORCEMENT AGENCY CASE NUMBER 20-4596		DETENTION/ARREST DATE 5/16/20 / 1640		FOR DMV USE ONLY	
DRIVER NAME (LAST, FIRST, M.I.) HASKET, KRYSTLE, L.		DRIVER LICENSE NUMBER [REDACTED]		COMMERCIAL? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	STATE CA
MAILING ADDRESS [REDACTED]		STATE [REDACTED]		ZIP CODE [REDACTED]	
DATE OF BIRTH 12/18/85	SEX F	HAIR BRO	EYES BRO	HEIGHT 5'4"	WEIGHT 270
LICENSE: <input type="checkbox"/> Suspended/Revoked <input type="checkbox"/> Surrendered (Attached) <input type="checkbox"/> Not in Possession <input checked="" type="checkbox"/> Unlicensed					
VIOLATION: <input checked="" type="checkbox"/> 0.08% or more BAC Chemical Test Results <input type="checkbox"/> 0.01% or more BAC (DUI Probation) <input type="checkbox"/> 0.04% or more BAC (Commercial Vehicle) <input type="checkbox"/> Chemical Test Refusal (Complete Reverse) <input type="checkbox"/> PAS or other Chemical Test Refusal (DUI Probation) (Complete Reverse)					

Arrest Type
 For statistical purposes only.
 Check all that apply.
☒ Alcohol Use
☐ Cannabis Use
☐ Other Drug Use

You are hereby notified that your privilege to operate a motor vehicle will be suspended or revoked effective 30 days from the issue date of this order as shown below, and until you pay a \$125 reissue fee and file proof of financial responsibility as shown on the reverse.

For additional information call (916) 657-0214.

TEMPORARY DRIVER LICENSE

This document must be carried with you and shall serve as your temporary California driver license. It is subject to the same class(es) and all restrictions as your permanent driver license. **This temporary driver license does not provide you with any driving privileges if you do not have a California driver license or your license is expired, suspended, revoked, canceled, or denied.** It expires at midnight 30 days from the issue date of this order shown below.

This action is taken under authority of California Vehicle Code (CVC) §§13353, 13353.1, 13353.2 and 13389 because you were arrested or detained for driving under the influence of alcohol and/or drugs and:

BAC 0.01% PAS, Breath, Blood or Urine Test DUI Probation	You completed a PAS, breath, blood, or urine test and the officer believes the results will show 0.01% BAC or more. If the laboratory results show your BAC was less than 0.01%, this suspension will be set aside. Your driver license will be reissued to you if you do not have another suspension or revocation in effect.
BAC 0.08% Breath, Blood, or Urine Test	You completed a breath test with 0.08% BAC or more, or you completed a blood or urine test and the officer believes the results will show 0.08% BAC or more. If the laboratory results show that your BAC is less than 0.08%, this suspension or revocation will be set aside. Your driver license will be reissued to you if you do not have another suspension or revocation in effect.
BAC 0.04 % Breath, Blood or Urine Test while driving a Commercial Vehicle	You completed a breath test with 0.04% BAC or more, or you completed a blood or urine test and the officer believes the results will show 0.04% BAC or more. If the laboratory results show that your BAC is less than 0.04%, this suspension or revocation will be set aside. Your driver license will be reissued to you if you do not have another suspension or revocation in effect.
Chemical Test Refusal	You refused to submit to, or failed to complete, a chemical test of the alcohol and/or drug content of your blood.

COMMERCIAL DISQUALIFICATION

A commercial disqualification action will be taken due to any of the following: if you refused a chemical test, if you had a 0.04% BAC or more while operating a commercial motor vehicle as defined in CVC §15210 or while transporting hazardous materials, or held a commercial driver license and were driving any vehicle when you had a 0.08% BAC or more.

HEARING INFORMATION

YOU HAVE **10 DAYS** FROM RECEIPT OF THIS NOTICE TO REQUEST A HEARING TO SHOW THAT THE SUSPENSION OR REVOCATION IS NOT JUSTIFIED. *The suspension or revocation will not be stayed (delayed) unless you request a hearing within 10 DAYS from the issue date of this order and DMV cannot provide a hearing before the effective date of the suspension or revocation and make a determination.* Hearings are conducted only to determine questions of fact as described on the reverse. Your need for a license cannot be considered at a hearing. **If you want a hearing or have questions regarding this matter, contact the DMV at (916) 657-0214.** A telephone hearing will be conducted unless you request an in-person hearing. Before the hearing you may see or obtain copies of the department's evidence. **You must request copies of the department's evidence at least 10 DAYS prior to the date set for commencement of the hearing in order to receive them prior to the hearing date.** If you want the information released to someone else, give them signed permission. **You have the right to have a sign or language interpreter present at your hearing. If you require the service of an interpreter, immediately notify DMV of the need for such service.** During the hearing you may present oral testimony and/or other evidence. Testimony is taken under oath or affirmation, and the hearing is recorded. You may be represented by legal counsel, or you may represent yourself. The arresting officer(s) may be subpoenaed in this matter, if it is determined that his or her testimony is needed. If you wish to question the arresting officer(s), you have the right to have subpoenas issued on your behalf. You may subpoena any other witness(es) you feel may help your case, and you have the right to cross-examine any opposing witness(es). Blank subpoenas may be obtained on the internet at the following address <http://www.dmv.ca.gov/portal/dmv/detail/forms/formssds> or provided to you by the hearing officer upon request prior to the hearing. You are responsible for service of your subpoena(s) and any witness fee required by law. **After the hearing,** the hearing officer shall make findings and render a decision.

OFFICER'S PRINTED NAME J. GUSMAN	BADGE/ID NUMBER #1717	TELEPHONE NUMBER (90) 710 2273
AGENCY RICHMOND PD	AREA BAY MUNI	COURT CODE (IF UNKNOWN, COURT NAME)

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

Date **5/16/20** Signature of Arresting Officer **X**

ORDER SERVED BY ANOTHER OFFICER: If order was served on driver by another Officer have that officer complete this section.

I personally served a copy of the order to the driver on the date shown below:

Date _____ Serving Officer's Printed Name _____ Badge/ID Number _____ Signature Of Serving Officer _____

X

• Did the peace officer have reasonable cause to believe you were driving a motor vehicle in violation of CVC §§23152, 23153, or 23154?
• Were you lawfully detained while on DUI probation or lawfully arrested?
• Were you driving a motor vehicle when you had: **0.01% BAC** or more by weight of alcohol while on DUI probation; **0.04% BAC** or more by weight of alcohol while driving a commercial vehicle; or **0.08% BAC** or more by weight of alcohol?

Refusal to submit to or failure to complete a chemical test.
• Did the peace officer have reasonable cause to believe you were driving a motor vehicle in violation of CVC §§23152, 23153, or 23154?
• Were you lawfully detained while on DUI probation, or lawfully arrested?
• Were you told that your driving privilege would be suspended, or revoked for one, two, or three years if you refused to submit to, or failed to complete a chemical test?
• Did you refuse or fail to complete a chemical test, or PAS test (DUI Probation), after being requested to do so by a peace officer?

APPEAL RIGHTS
The suspension or revocation will not be stayed (delayed) unless you request a department review in writing within 15 days from the date on the bottom of the notice telling you the results of your hearing. The fee for the department review is \$120. You may also appeal a DMV decision by filing a writ of mandamus at the superior court in your county of residence within 30 days from the date on the bottom of the notice telling you the results of your hearing.
PENALTIES
Chemical test results of 0.01% or more BAC while on DUI probation; 0.04% or more BAC in a commercial motor vehicle; or 0.08% or more BAC. (CVC §§13353.2 and 13353.3)

- **First Offense** of driving with a BAC of 0.08% or more or 0.04% or more BAC in a commercial motor vehicle will result in a **4-month suspension**, or a **1-year suspension** if 0.01% or more BAC while on DUI probation.
- **Second or Subsequent Offense**, within 10 years of a separate violation of driving under the influence, including such a charge reduced to reckless driving, or vehicular manslaughter, or violation of CVC §23140, which resulted in a conviction, or a BAC of 0.08% or more or 0.04% or more in a commercial motor vehicle at any age, or you refused a test, will result in a **1-year suspension**.
- **First Offense** will result in a **1-year suspension**, or a **2-year revocation** if on DUI probation.
- **Second Offense**, within 10 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 CVC §23140, which resulted in a conviction, or separate administrative determination that you were driving with a BAC of 0.01% or more while on DUI probation, or a BAC of 0.08% or more or a BAC of 0.04% or more in a commercial vehicle at any age, or you refused a test, will result in a **2-year revocation**, or a **3-year revocation while on DUI probation**.
- **Three or More Offenses** within 10 years of any combination of the above violations, convictions or separate administrative determinations will result in a **3-year revocation**.

ADDITIONAL INFORMATION
An administrative review will automatically be conducted. You will be notified in writing only if the suspension or revocation is set aside. Before the suspension or revocation can be ended and a driver license issued or returned to you, a \$125 reissue fee must be paid to DMV (CVC §14905), and you must file proof of financial responsibility by a California Insurance Proof Certificate (SR 22/1P), \$35,000 cash deposit, or surety bond, or self insurer certificate (CVC §16430). You must maintain proof of financial responsibility for three years. If you drive while your driving privilege is suspended or revoked, you may be arrested and, if convicted, jailed and/or fined and your vehicle can be impounded or sold.
THE ADMINISTRATIVE PER SE SUSPENSION/REVOCATION ACTION IS INDEPENDENT OF ANY COURT SANCTIONS.