

REPORT OF REFUSAL TO SUBMIT TO CHEMICAL TEST

(If a compulsory chemical test was administered pursuant to Section 1194(3) of the Vehicle and Traffic Law, do not complete this form.)

Arresting Officer: Keep 1 copy. Submit 2 copies to the court at the arraignment. Bring 1 copy to the DMV Hearing.**Court:** After the arraignment, keep 1 copy for court records. Send 1 copy, along with a copy of the AA-137 "Notice of Temporary Suspension and Notice of Hearing", within 48 hours of the arraignment, to the Department of Motor Vehicles, Safety Hearing Bureau, Room 312, 6 Empire State Plaza, Albany, New York 12228.**TO: COMMISSIONER OF MOTOR VEHICLES**

Operator's Name LEONEL A YAS-PENA		Date of Birth [REDACTED]	Sex <input checked="" type="checkbox"/> M <input type="checkbox"/> F	Telephone Number
Address [REDACTED]		City [REDACTED]	State [REDACTED]	Zip Code [REDACTED]
The operator possessed a <input checked="" type="checkbox"/> Driver License <input type="checkbox"/> Learner Permit		Identification Number [REDACTED]		
Vehicle Class <input type="checkbox"/> Commercial Motor Vehicle (CMV) <input type="checkbox"/> HazMat <input checked="" type="checkbox"/> All Others				
Plate Number of Vehicle Operated [REDACTED]	State or Province of License NY	Date of Expiration 07/24/2022	Class of License D CLASS	Did a reportable accident occur? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

New York State County of **MONROE**Town/City of **ROCHESTER, CITY OF - 2801**Arresting Officer **JOSEPH J LAIOSA**deposes and says that: On this date **11/25/2021**at (Specific Location) **31 PRINCE ST**

he/she arrested the above operator on a charge of violating Section 1192 of the Vehicle and Traffic Law for (check the applicable box):

☒ OPERATING WHILE IN AN INTOXICATED CONDITION☐ OPERATING WHILE ABILITY IMPAIRED BY THE CONSUMPTION OF ALCOHOL☐ OPERATING WHILE ABILITY IMPAIRED BY THE USE OF A DRUG☐ OPERATING WHILE ABILITY IMPAIRED BY THE COMBINED INFLUENCE OF DRUGS OR OF ALCOHOL AND ANY DRUG(s)**SECTIONS A AND B MUST BE COMPLETED****SECTION A:** and that he/she had reasonable grounds to make the arrest based on information indicating vehicle operation (such as accident involvement, observed traffic infraction, etc.) give details:**OFFICER GORMAN OBSERVED HIM OPERATING THE MOTOR VEHICLE****SECTION** and impairment or intoxication (such as poor coordination, alcohol beverage odor, etc.) give details:**THE ODOR OF ALCOHOLIC BEVERAGES, THE GLASSY EYES, THE FAILURE OF THE WALK AND TURN TEST, THE INABILITY TO FOLLOW DIRECTIONS ON THE NGN TEST.**

After being arrested, the operator was warned as follows:

Refusal to submit to a chemical test, or any portion thereof, will result in the immediate suspension and subsequent revocation of your license or operating privilege whether or not you are found guilty of the charge for which you are arrested. Your refusal to submit to a chemical test, or any portion thereof, can be introduced into evidence against you at any trial, proceeding or hearing resulting from this arrest.

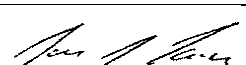
After receiving this warning, the operator was asked to submit to a chemical test to determine the alcoholic and/or drug content of his/her blood.

The operator refused to submit to a ☐ BLOOD ☐ URINE ☐ SALIVA ☒ BREATH test, and indicated his/her refusal by: (conduct or words used by operator)**HE SAID "NO"**in the presence of **A. GORMAN**at **630 N. CLINTON AVE**

(Officer giving warning and witnessing refusal if not arresting officer)

(Location of refusal)

No compulsory chemical test was administered pursuant to Section 1194(3) of the Vehicle and Traffic Law.

Time of Arrest 3:37 AM		Section 1194 of the Vehicle and Traffic Law requires that the refusal must be within two hours of the arrest	
Time of Refusal 4:20 AM			
Name and Rank of Arresting Officer SERGEANT JOSEPH J LAIOSA		Name and Rank of Officer Giving Warning/Witnessing Refusal (if not arresting officer) OFFICER A. GORMAN	
Police Agency ROCHESTER POLICE DEPARTMENT		Police Agency ROCHESTER	
Telephone No. (585) 428-9800 EXT.	Precinct No 5 1 125	Police Agency Address (Include Number, Street and Zip) 185 EXCHANGE BLVD ROCHESTER NY 14614	
Signature 	Date 11/25/2021	Telephone No. MONROE	Precinct No
Signature		Date 11/25/2021	

FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE AS A CLASS "A" MISDEMEANOR PURSUANT TO SECTION 210.45 OF THE PENAL LAW