20M1308 AL

UNIFORM SUMMONS & COMPLAINT OR PENALTY ASSESSMENT No. 6108062 (D)

STATE OF COLORADO — COLORADO STATE PATROL

DATE OF VIOLATION	TIME OF VIOLATION	APPROXIMATE LOCATION OF VIOLATION, STATE OF COLORADO	F / S	COUNTY	NO.
6-12-20	1801	C470 MP 25 EB	F	DOUGLAS	47

ROAD CODE	MILEPOINT	PCC				CASE REPORT NO.
C470	25	ACC	☐ INJURY / FATAL CRASH ☒ PROPERTY DAMAGE CRASH	☐ CONSTRUCTION ZONE ☐ WILDLIFE CROSSING ZONE	☐ SCHOOL ZONE	IC2021594

THE PEOPLE OF THE STATE OF COLORADO VS.

DEFENDANT LAST NAME	FIRST NAME	M.I.	AGE
SMITH	DAVID	M	[redacted]

[redacted]	CITY/STATE/ZIP	ALTERNATE PHONE #
	FAIRPLAY, CO 80440	June 17, 2020

DRIVER'S LICENSE NO.	☐ CDL DRIVER	CLASS	ENDORSEMENTS	STATE	RACE	SEX	HEIGHT	WEIGHT	HAIR	EYES
[redacted]		D		CO	W	M	6'0"	180	BRO	BRO

VEHICLE LICENSE NO.	VEHICLE LICENSE TYPE	VEHICLE LICENSE STATE	VIN	VEHICLE COLOR (TOP/BOTTOM)
[redacted]	PC	CO	[redacted]	GRAY

VEHICLE YEAR	VEHICLE MAKE	VEHICLE MODEL	CMV REQUIRING CDL	REGISTERED OWNER NAME/ADDRESS	☐ SAME AS DEFENDANT
2017	TOYOTA	TUNDRA	Y / N		

☒	CC	CRS	OFFENSE	CLASS	FINE + SC	PTS
X	800	42-4-1301(1)(a)	Drove a vehicle while under the influence of alcohol or drugs or both	M	Summons	12
	812	42-4-1301(2)(a)	Drove a vehicle with excessive alcohol content		Summons	12
	801	42-4-1301(1)(b)	Drove a vehicle while ability impaired by alcohol or drugs or both		Summons	8
		42-4-1101( )( )	Speeding mph in a mph zone			
		42-4-237(2)	Operated a vehicle when safety belt not fastened ( ) Driver ( ) Front Seat Passenger	TIB		0
	574	42-4-236( )( )( )	Failed to provide/ properly use (rear facing/ forward facing) child restraint system or booster seat / safety belt system / safety belt	TIB		0
	580	42-2-105.5(3)	Driver under 18 (not wearing seatbelt / allowed occupants w/o seat belts or child restraint systems)	TIA	Summons	2
	954	42-4-1409(1)	Owner operated or permitted to be operated an uninsured motor vehicle on public highway	MT1	Summons	4
	956	42-4-1409(2)	Operated an uninsured motor vehicle on a public highway	MT1	Summons	4
	957	42-4-1409(3)	Failed to present immediate evidence of insurance upon request	MT1	Summons	4
		42-2-138( )( )( )	Drove motor/off highway vehicle when license under restraint:			
		42-2-101(1)	Drove a motor vehicle without a valid driver's or minor driver's license or instruction permit	MT2		3
	038	42-3-114	Operated a motor vehicle with expired license plates	TIB		0
X	141	42-4-1402(2(a)( )	Careless Driving ~~(Caused bodily injury / Caused death)~~	MT2	Summons	4
	137	42-4-1402.5(2)	Careless Driving (Caused serious bodily injury to a vulnerable road user)	MT1	Summons	12
	142	42-4-1008(1)	Following too closely	TIA		4
	319	42-4-703	Failed to stop/yield right-of-way as required at stop sign at intersection/junction of roadway	TIA		4
		42-4-1007(1)(a)	( ) Changed lanes when unsafe ( ) Failed to drive with-in a single lane (weaving)	TIA		3
	304	42-4-604	Failed to obey traffic control signal	TIA		4
	713	42-4-235(2)(a)	Operated a commercial vehicle on a public highway in violation of the Department of Public Safety rules and regulations governing safety standards	MT2		0
	700	42-4-106(5)(a)(III)	Operated commercial motor vehicle and failed to comply with (Tire/Chain) restrictions	TIB		0
X	MFF	18-12-106 (1)(d)				
		POSSESSION OF A WEAPON WHILE UNDER THE INFLUENCE OF INTOXICATING LIQUOR OR CONTROLLED SUBSTANCE		M	SUMMONS	

2020 JUN 17 PM 2:57 DOUGLAS COUNTY, CO CLERK DISTRICT COURT

☐ FINGERPRINTED PHOTOGRAPHED	☐ PLACARD HAZMAT	CMV USDOT #	DNA SURCHARGE $2.50	TOTAL SURCHARGE $	TOTAL FINE + SURCHARGE $
					SUMMONS

SUMMONS ☐ TRAFFIC INFRACTION ☒ OFFENSE ☐ FELONY

I PROMISE TO APPEAR AT THE DATE, TIME AND PLACE INDICATED BELOW. ☐ VALID COLO DL

X [signature]

☐ DEFENDANT IN CUSTODY SEE "SUMMONS" INSTRUCTIONS ON REVERSE SIDE

YOU ARE SUMMONED AND ORDERED TO APPEAR TO ANSWER CHARGES AS NOTED ABOVE IN,

DOUGLAS COUNTY COURT

ADDRESS/DIRECCIÓN DE LA CORTE	CITY/CIUDAD	APPEARANCE DATE/FECHA	APPEARANCE TIME/TIEMPO
4000 JUSTICE WAY	CASTLE ROCK	7/17/20	9:30 AM

PENALTY ASSESSMENT ☐ TRAFFIC INFRACTION ☐ OFFENSE

MY SIGNATURE IS A PROMISE TO PAY THIS PENALTY ASSESSMENT WITHIN 40 DAYS. IF I DO NOT SUBMIT PAYMENT, MY SIGNATURE IS A PROMISE TO APPEAR IN COURT AT THE DATE, TIME AND PLACE INDICATED HEREIN.

X [signature]

SEE "PENALTY ASSESSMENT" INSTRUCTIONS ON REVERSE SIDE

THE UNDERSIGNED HAS PROBABLE CAUSE TO BELIEVE THAT THE DEFENDANT COMMITTED THE OFFENSE(S) AGAINST THE PEACE AND DIGNITY OF THE PEOPLE OF THE STATE OF COLORADO AND AFFIRMS THAT A COPY OF THIS SUMMONS AND COMPLAINT OR PENALTY ASSESSMENT WAS SERVED UPON THE DEFENDANT.

OFFICER SIGNATURE:	PRINT OFFICER LAST NAME	NUMBER
[signature]	UGLE	9066

DISTRICT	TROOP	PATROL	DATE ISSUED
1	C	A	6-12-20

COURT COPY

-DISTRICT ATTORNEY-

OFFICER NAME	PERSONNEL NO.	SHIFT	CAR NO.	☒ MARKED PATROL VEHICLE ☐ UNMARKED PATROL VEHICLE
VIGIL	9066	3P	464	

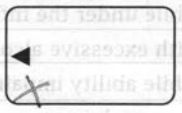
DAY OF WEEK	☐ MON	☐ TUES	☐ WED	☐ THUR	☒ FRI	☐ SAT ☐ SUN
WEATHER	☒ CLEAR	☐ CLOUDY	☐ RAIN	☐ SNOW	☐ SLEET/HAIL	☐ FOG ☐ WINDY
LIGHTING	☐ DAWN	☐ DUSK	☒ DAY	☐ NIGHT	☐ REDUCED VISIBILITY DUE TO WEATHER	
ROAD SURFACE	☒ DRY	☐ WET	☐ ICY	☐ SNOW	☐ FOREIGN MATERIAL	
TRAFFIC	☒ LIGHT	☐ MOD	☐ HEAVY	☐ NONE	☐ STOPPED	
DEFENDANT'S ATTITUDE	☐ EXCEL	☐ GOOD	☐ FAIR	☐ POOR	☐ HOSTILE/COMBATIVE	
DEFENDANT ID VIA	☒ COLO. DL/ID CARD	☐ OUT OF STATE DL/ID	☐ FINGERPRINTS / TRACE EVIDENCE			

SPEED ENFORCEMENT

☐ RADAR ☐ PACE-CLOCK ☐ LIDAR ☐ VASCAR ☐ AIRCRAFT

MODEL	UNIT SERIAL NO.	TIME OF FUNCTION CHECK (LIDAR)
TUNING FORK #:	TUNING FORK #:	ANNUAL CERTIFICATION DATE (LIDAR)
DISTANCE (LIDAR)	VISUAL SPEED EST. MPH	MEASURED SPEED MPH
VIOLATOR LANE POSITION NO1 NO2 NO3 NO4 NO5	VIOLATOR DIRECTION OF TRAVEL N S E W	☐ MOVING RADAR/VASCAR ☐ STATIONARY RADAR/VASCAR

VEHICLE OCCUPANTS



DUI/DUID TESTING

☒ PBT RESULT	.156
☐ BREATH TEST (BRAC)	
☒ BLOOD TEST	
☐ URINE TEST	
☐ DRIVER REFUSED	

SUSPECTED GANG AFFILIATION: ☐ YES ☐ NO

GANG ORGANIZATION (IF KNOWN):

✦ LOCATION, OFFENSE, VENUE, IDENTIFICATION, AND DATE ✦

OFFICER'S NOTES: D WAS EB ON C420 MP 25.

D WAS INVOLVED IN 3 CAR CRASH.

D V. ROADSIDES.

ROADSIDES NOT AS A SOBER PERSON

Digital Evidence: ☐ Audio/Video ☐ Photos ☐ Audio/Video Not Available Explanation:

WITNESS INFORMATION

LAST NAME	FIRST NAME	MI	DATE OF BIRTH
ADDRESS	CITY, STATE, ZIP		HOME TELEPHONE NO.
RELEVANCE TO CASE	☐ MADE WRITTEN STATEMENT		MOBILE TELEPHONE NO.

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ADDRESS	CITY, STATE, ZIP		HOME TELEPHONE NO.
RELEVANCE TO CASE	☐ MADE WRITTEN STATEMENT		MOBILE TELEPHONE NO.

OFFICER NAME	NUMBER	AGENCY	RELEVANCE TO CASE
OFFICER NAME	NUMBER	AGENCY	RELEVANCE TO CASE