

Florida Department of Law Enforcement Alcohol Testing Program

BLK

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: GADSDEN COUNTY SO
Time of Inspection: 10:04

Date of Inspection: 03/30/2016

Serial Number: 80-000959
Software: 8100.27

| Check or Test | YES | NO |
|---|-----|----|
| Date and/or Time Adjusted | | No |
| Diagnostic Check (Pre-Inspection): OK | | No |
| Alcohol Free Subject Test: 0.000 | | No |
| Mouth Alcohol Test: Slope Not Met | | No |
| Interferent Detect Test: Interferent Detect | | No |
| Diagnostic Check (Post-Inspection): OK | | No |

ggm

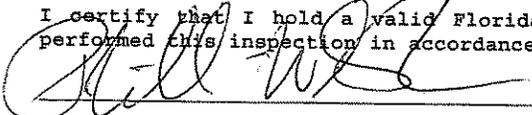
| Alcohol Free Test (g/210L) | 0.05g/210L Test (g/210L) Lot#: _____ Exp: _____ | 0.08g/210L Test (g/210L) Lot#: _____ Exp: _____ | 0.20g/210L Test (g/210L) Lot#: _____ Exp: _____ | 0.08 g/210L Dry Gas Std Test (g/210L) Lot#: _____ Exp: _____ |
|----------------------------|---|---|---|--|
| | | | | |
| | | | | |
| | | | | |

Number of Simulators Used: _____

Remarks:
SKIPPED AI TO OPERATE INSTRUMENT; NOT A COMPLIANCE CHECK

The above instrument complies (X) does not comply () with Chapter 11D-8, FAC.

I certify that I hold a valid Florida Department of Law Enforcement Agency Inspector Permit and that I performed this inspection in accordance with the provisions of Chapter 11D-8, FAC.



PHILLIP W SUBER

Signature and Printed Name

03/30/2016
Date

Florida Department of Law Enforcement Alcohol Testing Program

13K

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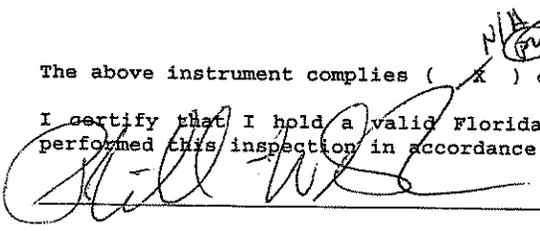
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PHILLIP W SUBER

Signature and Printed Name

03/30/2016
Date