

Florida Department of Law Enforcement Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: Santa Rosa County SO
Time of Inspection: 17:54

Date of Inspection: 12/30/2015

Serial Number: 80-001302
Software:

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

| 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: _____ |
|----------------------------|---|---|---|--|
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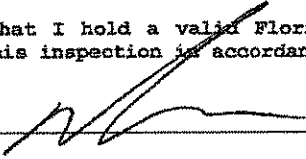
Number of Simulators Used: 5

Remarks:

Instrument failed to complete initial diagnostic test following warm up. Unable to initiate agency inspection procedure.

The above instrument complies () does not comply (X) 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.



 Signature and Printed Name

12/30/2015
 Date