



Florida Department of Law Enforcement

**AGENCY INSPECTION AND OTHER ELECTRONIC DATA REVIEW**

MAR 07 2016

FDLE

Alcohol Testing Program

Agency: Hialeah Police Department

Instrument Serial Number: 80-002462

<b>AGENCY INSPECTION DATA REVIEW</b>		
Agency Inspector: <u>Montoya, Genaro N</u>	Date of Inspection: <u>02/11/2016</u>	Time of Inspection: <u>13:04:53</u>
Agency Inspection Discrepancy: <input type="checkbox"/> Incomplete <input type="checkbox"/> Untimely/Not Received <input type="checkbox"/> Erroneous Information <input checked="" type="checkbox"/> Procedural <input type="checkbox"/> Other _____		
<input type="checkbox"/> Agency Inspection Not Conducted or Records regarding Agency Inspection have not been uploaded.		
<input type="checkbox"/> Lot Number <input type="checkbox"/> Expiration Date for _____ g/210L <input type="checkbox"/> Alcohol Reference Solution <input type="checkbox"/> Dry Gas Standard is <input type="checkbox"/> Incorrect <input type="checkbox"/> Expired.		
<input checked="" type="checkbox"/> FDLE/ATP Form 39 states in part, "If a test must be repeated, the REASON must be entered when prompted and recorded in the Remarks section of FDLE/ATP Form 40 Agency Inspection Report – Intoxilyzer 8000. The <input checked="" type="checkbox"/> REASON for repeating the following test(s); OR the <input checked="" type="checkbox"/> Possible Cause and Corrective Action Taken on the following test(s) was not recorded: <input type="checkbox"/> Alcohol Free Subject Test <input type="checkbox"/> Mouth Alcohol Test <input type="checkbox"/> Alcohol Free Test <input type="checkbox"/> Interferent Detect Test <input checked="" type="checkbox"/> 0.05 g/210L Test <input type="checkbox"/> 0.08 g/210L Test <input type="checkbox"/> 0.20 g/210L Test <input type="checkbox"/> 0.08 g/210L Dry Gas Standard Test		
<input type="checkbox"/> FDLE/ATP Form 39 states in part, "If the instrument does not comply with the requirements of Chapter 11D-8, FAC, remove the instrument from service and notify the Department Inspector." <input type="checkbox"/> The Department Inspector was not notified. However, the issue was satisfactorily corrected and the repeated Agency Inspection complies with the requirements of Chapter 11D-8, FAC. <input type="checkbox"/> The Department Inspector was not notified. However, the repeated Agency Inspection does not comply with the requirements of Chapter 11D-8, FAC and the instrument was correctly removed from evidentiary use. <input type="checkbox"/> The Department Inspector was not notified. The repeated Agency Inspection does not comply with the requirements of Chapter 11D-8, FAC and the instrument was not removed from evidentiary use.		
<input type="checkbox"/> The Agency Inspection is noted as "Complies" when it does not comply with the requirements of Chapter 11D-8, FAC.		
<input type="checkbox"/> Other: _____		

<b>OTHER ELECTRONIC DATA REVIEW</b>	
<input type="checkbox"/> Login Records Date: _____	Comments: _____
<input type="checkbox"/> Cylinder Change Records Date: _____	
<input type="checkbox"/> Control Test Records Date: _____	
<input type="checkbox"/> Diagnostic Check Records Date: _____	

<b>CORRECTIVE ACTION</b>
<input checked="" type="checkbox"/> Record hand-written amendments on the FDLE/ATP Form 40, Agency Inspection Report, initial and date the amendments, mark the report "AMENDED", and forward a copy to the Department Inspector by <u>04/12/2016</u> (Date).
<input type="checkbox"/> Provide a written explanation regarding the referenced item(s) to the Department Inspector by _____ (Date).
<input type="checkbox"/> Upload the Agency Inspection(s).
<input type="checkbox"/> Remove the instrument from evidentiary use until otherwise directed by the Department.
<input type="checkbox"/> No action required
<input type="checkbox"/> Other: _____

*Genaro N. Montoya*  
Signature of Alcohol Testing Program Staff Member

3/2/2016  
Date

Florida Department of Law Enforcement  
Alcohol Testing Program

RECEIVED

MAR 07 2016

FDLE

Alcohol Testing Program

**AGENCY INSPECTION REPORT - INTOXILYZER 8000**

Agency: HIALEAH PD

Serial Number: 80-002462

Time of Inspection: 13:04

Date of Inspection: 02/11/2016

Software: 8100.27

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

Alcohol Free Test (g/210L)	0.05g/210L Test (g/210L) Lot#: 201411K Exp: 11/25/2016	0.08g/210L Test (g/210L) Lot#: 201502G Exp: 02/24/2017	0.20g/210L Test (g/210L) Lot#: 201505A Exp: 05/12/2017	0.08 g/210L Dry Gas Std Test (g/210L) Lot #: 06415080A1 Exp: 04/05/2017
0.000	0.035 / 0.050	0.081	0.208	0.079
0.000	0.040 / 0.051	0.082	0.207	0.079
0.000	0.039 / 0.061	0.082	0.207	0.079

Number of Simulators Used: 5

**\*AMENDED**

Remarks: *Nose became loose on the simulator, causing a control outside tolerance on the 05: Control Outside Tolerance. 0.05g/210L test. G.M. 03-07-16*

The above instrument complies (  ) 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.

*Genaro N Montoya* 1489

GENARO N MONTOYA

Signature and Printed Name

02/11/2016

Date

FDLE/ATP Form 40 -- March 2004

Reprinted From Database