RECEIVED

Florida Department of Law Enforcement Alcohol Testing Program

JUL 29 2016

COMMITTEETING Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: FL HIGHWAY PATROL Time of Inspection: 11:04

Date of Inspection: 07/25/2016

Serial Number: 80-006261

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 |

| 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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|---|----------|
| ı | 10000 |
| ı | (343-11) |
| 4 | V87 411 |

Number of Simulators Used: _____

Remarks:

COMPLIANCE NOT DETERMINED, AI NOT CONDUCTED

| The | apove | instrument | complies | (| Х |) | does | not | comp. | ly : | () | 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 is accordance with the provisions of Chapter 11D-8, FAC.

Signature and Printed Name

07/25/2016 Date