FDLE
Florida Department of Law Enforcement

DEPARTMENT INSPECTOR FIELD NOTES

RYAN DOVEL

Agency: INDIALANTIC PD Instrument Serial Number: 80-001006

Department Inspection:	Agency Inspection/Agency Contact:	Records Audit:
☐ Registration ☐ Request for Registration Attached ☐ Annual ☐ Inspection After Repair ☐ Other: _____ ☐ Barometric Pressure: _____ Gauge _____ Instrument ☐ Instrument Set Up Verified	☐ Agency Inspection Notification ☐ Agency Contact ☐ Other _____ Date of Notification/Contact: _____ Agency Inspector: _____	The following records were audited: ☒ Agency Inspection Reports ☐ Breath Test Instrument Repair/Maintenance Records ☐ Instrument Registration ☐ Dry Gas Standard Certificate(s) of Analysis ☐ Other: _____ ☐ Other: _____

Comments:
PLEASE FORWARD AN AMENDED FORM 40 TO INCLUDE THE CAUSE FOR THE REPEATED INT. DETECT TEST FOR YOUR INSPECTION COMPLETED ON 10/23/16

Instrument/Area:	Equipment:	Supplies:
☐ Clean/Dry ☐ Secure ☐ Limited Access ☐ Other: _____	☐ Proper Number of Simulators ☐ Checked Simulators for Air Leak Resistant Seal and Proper Temperature ☐ Class A Glassware	☐ Distilled/Deionized Water ☐ Mouth Alcohol Solution ☐ Acetone Stock Solution ☐ Alcohol Reference Solution ☐ Dry Gas Standard ☐ Mouth Pieces

Comments:

Action:	
☒ Instrument Complies with Chapter 11D-8, FAC ☐ Instrument Does Not Comply with Chapter 11D-8, FAC	Comments:
☒ Remain in Evidentiary Use ☐ Return to/Place into Evidentiary Use ☐ Remove from Evidentiary Use ☐ Remain Out of Evidentiary Use	
☐ Conduct an Agency Inspection Before Evidentiary Use	

Shayla Platt — 11/9/16
Signature of Alcohol Testing Program Staff Member — Date

Original – FDLE Copy – Agency