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OCT 19 2017

Florida Department of Law Enforcement Alcohol Testing Program

FDLE
Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: NASSAU COUNTY SO
Time of Inspection: 08:18

Date of Inspection: 10/19/2017

Serial Number: 80-001281
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#:201603D Exp: 03/08/2018	0.08g/210L Test (g/210L) Lot#:201611E Exp: 11/15/2018	0.20g/210L Test (g/210L) Lot#:201604C Exp: 04/05/2018	0.08 g/210L Dry Gas Std Test (g/210L) Lot#:09216080A2 Exp: 05/05/2018
0.000	0.048	0.079	0.195	0.081
0.000	0.048	0.078	0.195	0.081
0.000	0.049	0.079	0.197	0.080

Number of Simulators Used: 4

Remarks:

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.

Signature and Printed Name

TERRY L NYE

10/19/2017
Date

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Florida Department of Law Enforcement Alcohol Testing Program

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AUG 17 2017

FDLE

AGENCY INSPECTION REPORT - INTOXILYZER 8000 Alcohol Testing Program

Agency: Nassau So
Time of Inspection:

Date of Inspection: 08/15/2017

Serial Number 801281
Software:

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

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:

Agency inspection could not be completed due to dry gas regulator malfunction

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.

It may be 8800y

Signature and Printed Name

08/15/2017
Date