

*(Handwritten mark)*

# Florida Department of Law Enforcement Alcohol Testing Program

## AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: NASSAU CO SO  
Time of Inspection: 12:56

Date of Inspection: 08/27/2018

Serial Number: 80-001053  
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)<br>Lot#: 201802B<br>Exp: 02/06/2020 | 0.08g/210L Test (g/210L)<br>Lot#: 201709A<br>Exp: 09/12/2019 | 0.20g/210L Test (g/210L)<br>Lot#: 201802G<br>Exp: 02/22/2020 | 0.08 g/210L Dry Gas Std Test (g/210L)<br>Lot#: 22817080A5<br>Exp: 10/05/2019 |
|----------------------------|--|--|--|--|
| 0.000                      | 0.054  | INT / 0.084  | 0.200  | 0.080  |
| 0.000                      | 0.052  | / 0.082  | 0.201  | 0.081  |
| 0.000                      | 0.052  | / 0.082  | 0.199  | 0.080  |

Number of Simulators Used: 4

Remarks:  
REPEAT . Interferent sim too close to inlet hose  
*IB 8-2718*

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.

*(Handwritten Signature)* \_\_\_\_\_  
TERRY L NYE  
Signature and Printed Name

08/27/2018  
Date

# Florida Department of Law Enforcement Alcohol Testing Program

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## AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: NASSAU CO SO  
Time of Inspection: 08:06

Date of Inspection: 08/03/2018

Serial Number: 80-001053  
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)<br>Lot#:201703A<br>Exp: 03/07/2019 | 0.08g/210L Test (g/210L)<br>Lot#:201611B<br>Exp: 11/15/2018 | 0.20g/210L Test (g/210L)<br>Lot#:201702B<br>Exp: 02/23/2019 | 0.08 g/210L Dry Gas Std Test (g/210L)<br>Lot#:22817080A5<br>Exp: 10/05/2019 |
|----------------------------|---|---|---|---|
| 0.000                      | 0.054   | 0.085   | 0.201   | 0.080   |
| 0.000                      | 0.054   | 0.085   | 0.201   | 0.080   |
| 0.000                      | 0.055   | 0.084   | 0.201   | 0.081   |

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.

Terry L Nye 5804 \_\_\_\_\_ TERRY L NYE  
Signature and Printed Name

08/03/2018  
Date

# Florida Department of Law Enforcement Alcohol Testing Program

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## AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: Nassau 8050  
Time of Inspection:

Date of Inspection:

Serial Number: 80-001053  
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)<br>Lot#: _____<br>Exp: _____ | 0.08g/210L Test (g/210L)<br>Lot#: _____<br>Exp: _____ | 0.20g/210L Test (g/210L)<br>Lot#: _____<br>Exp: _____ | 0.08 g/210L Dry Gas Std Test (g/210L)<br>Lot#: _____<br>Exp: _____ |
|----------------------------|---|---|---|--|
|                            |   |   |   |  |
|                            |   |   |   |  |
|                            |   |   |   |  |

Number of Simulators Used: \_\_\_\_\_ what out of service 7-31-18

Remarks:  
  
No inspection done in July 2018  
Due to simulators being out for calibration  
Inspection done 8-3-18. To bring back  
into service

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] 88011

Signature and Printed Name

\_\_\_\_\_ Date