FDLE
Florida Department of Law Enforcement

INSTRUMENT PROCESSING SHEET

Agency Washington County SO S/N 80-000782

Date In 12/27/2017 DI Completion Date 1/4/18 ☐Ship ☒P/U ☐H/D ☐CMI ☐EE

Intake Performed By JD

☑ Annual
☐ Registration
☑ Return from CMI / EE

Visual Inspection:
☑ Case ☑ Handle
☑ Keyboard ☑ Dry Gas Shelf
☑ Feet ☑ Breath Tube
☑ Ports ☑ Screws Tight

Other Equipment/ Accessories:
☐ Power cord ☐ Printer Cable
☑ Static Bag ☐ 12V DC Cable

Notes:

Quality Checks Performed By

☒ Breath Tube Screen
☒ Replace External O-Rings
☒ Instrument Set Up Verified
☒ R-Value 212
☒ Flow Verification (L/s)
Flow Column # ATP105
32 mm .154 (.139 - .169)
36 mm .175 (.156 - .190)
53 mm .250 (.228 - .278)
103 mm .521 (.447 - .547)
☒ Barometric Pressure Check
Gauge ID # 28421
☒ Stability Checks

Simulator	Serial #	Lot #/Exp
0.050	62835	201707D 7/25/19
0.080	SD1013	201707E 7/25/19
0.200	SD1025	201707C 7/24/19
0.080 DGS	N/A	AG715202 6/1/19

Flow Calibration Performed By

Flow Column #
☐ 5L/min – 17mm
☐ 15L/min – 53mm
☐ 30L/min – 103mm
☐ R-Value
☐ Post Calibration Verification (L/s)
Flow Column #
32 mm (.139 - .169)
36 mm (.156 - .190)
53 mm (.228 - .278)
103 mm (.447 - .547)

Maintenance Performed By

☐ Battery Replacement
☐ Dry Gas Regulator Replacement
☐ Breath Tube Replacement
☐ Other

Temperature Checks Performed By

☒ Lab Temp °C 21.2
External Digital Therm. ID#: 300504
☒ 34°C +-.2 Serial #: 62835
☒ 34°C +-.2 Serial #: SD1013
☒ 34°C +-.2 Serial #: SD1025

Final Release Date

FDLE
JAN 16 2018
Alcohol Testing Program

Calibration Adjustment Performed By

Barometric Pressure Gauge ID #

Simulator	Serial Number	Lot Number	Expiration
0.000		N/A	N/A
0.040			
0.100			
0.200			
0.300			
0.080 DGS	N/A		

☐ Post Calibration Adjustment Stability Checks

Simulator	Serial Number	Lot Number	Expiration
0.050			
0.080			
0.200			
0.080 DGS	N/A		

Department Inspection Performed By

Barometric Pressure ID# 28421
Gauge 1019 Instrument 1020
Mouth Alcohol Solution Lot # 2016-C
Acetone Stock Solution Lot # 2017-A

Simulator	Serial Number
0.000	62880
Interferent	62840
0.050	62835
0.080	SD1013
0.200	SD1025

Attachments

☒ Form 41
☒ Stability Checks
☐ Calibration Adjustment
☐ Post-Stability Checks
☐ Flow Calibration
☒ Form 40
☒ Other CAL. CERT, OWNERSHIP MEMO

Notes/Suggested Service:

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

1/4/18 Tech Review / Date
1/16/18 Admin Review / Date

Florida Department of Law Enforcement
Alcohol Testing Program

DEPARTMENT INSPECTION REPORT - INTOXILYZER 8000

Agency: FHP TROOP A
Time of Inspection: 12:07
Date of Inspection: 01/04/2018
Serial Number: 80-000782
Software: 8100.27

Check or Test	YES	NO	Check or Test	YES	NO
Diagnostic Check (Pre-Inspection): OK	Yes		Date and/or Time Adjusted		No
Minimum Sample Volume Check: OK	Yes		Barometric Pressure Sensor Check: 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#:201707D Exp: 07/25/2019	0.08g/210L Test (g/210L) Lot#:201707E Exp: 07/25/2019	0.20g/210L Test (g/210L) Lot#:201707C Exp: 07/24/2019	0.08 g/210L Dry Gas Std Test (g/210L) Lot#:AG715202 Exp: 06/01/2019
0.000	0.050	0.083	0.201	0.080
0.000	0.050	0.083	0.203	0.080
0.000	0.051	0.083	0.203	0.080
0.000	0.050	0.083	0.202	0.080
0.000	0.051	0.083	0.203	0.080
0.000	0.050	0.083	0.202	0.080
0.000	0.050	0.083	0.203	0.081
0.000	0.050	0.083	0.203	0.080
0.000	0.050	0.084	0.202	0.081
0.000	0.050	0.083	0.202	0.080
Standard Deviations	0.0004	0.0003	0.0006	0.0004

Average Standard Deviation of 0.05, 0.08 and 0.20 g/210L Tests: 0.0004 Number of Simulators Used: 5

Remarks:

The above instrument complies (X) does not comply ( ) with Chapter 11D-8, FAC.

I certify that I performed this inspection in accordance with the provisions of Chapter 11D-8, FAC.

Patrick J Murphy
PATRICK J MURPHY
Signature and Printed Name

01/04/2018
Date

1/16/18

FDLE/ATP Form 41 –Revised August 2005

FHP TROOP A
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-000782
01/04/2018
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	09:10
Control Test	0.049	09:11
Air Blank	0.000	09:11
Control Test	0.049	09:12
Air Blank	0.000	09:12
Control Test	0.050	09:13
Air Blank	0.000	09:14
Control Test Stats		
Average	0.0493	
Std Dev	0.0006	
Rel Std Dev(%)	1.1703	

P Murphy
Operator's Signature

FHP TROOP A
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-000782
01/04/2018
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	09:00
Control Test	0.083	09:00
Air Blank	0.000	09:01
Control Test	0.082	09:02
Air Blank	0.000	09:02
Control Test	0.082	09:03
Air Blank	0.000	09:04
Control Test Stats		
Average	0.0823	
Std Dev	0.0006	
Rel Std Dev(%)	0.7012	

P Murphy
Operator's Signature

FHP TROOP A
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-000782
01/04/2018
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	09:19
Control Test	0.203	09:20
Air Blank	0.000	09:20
Control Test	0.201	09:21
Air Blank	0.000	09:22
Control Test	0.200	09:22
Air Blank	0.000	09:23
Control Test Stats		
Average	0.2013	
Std Dev	0.0015	
Rel Std Dev(%)	0.7587	

P Murphy
Operator's Signature

FHP TROOP A
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-000782
01/04/2018
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	09:34
Control Test	0.081	09:34
Air Blank	0.000	09:35
Control Test	0.081	09:35
Air Blank	0.000	09:35
Control Test	0.081	09:36
Air Blank	0.000	09:36
Control Test Stats		
Average	0.0810	
Std Dev	0.0000	
Rel Std Dev(%)	0.0000	

DGS

P Murphy
Operator's Signature

1/16/18

FDLE

Calibration Certificate

Florida Department of Law Enforcement
Alcohol Testing Program
2729 Fort Knox Blvd.
Bldg. 2, Suite 1300
Tallahassee, FL 32308

This is to certify the calibration of Intoxilyzer 8000 serial number 80-000782 , manufactured by CMI, Inc. was calibrated in accordance with FDLE/ATP Form 36 - Department Inspection Procedures - Intoxilyzer 8000.

Serial Number:	80-000782
Owning Agency:	FHP TROOP A
Calibration Date:	01/04/2018
Calibration Time:	12:07

	UNCERTAINTY* ±
0.05 g/ 210 L	0.004
0.08 g/ 210 L	0.005
0.20 g/ 210 L	0.008
0.080 g/ 210 L Dry Gas Control	0.005

All results are reported in g/ 210 L.
Bias is limited by Calibration acceptance criteria. All calibration results must be within ± 0.005 or 5%, whichever is greater, of the Tartget Alcohol concentration.
*Uncertainty is based on fleet-wide data and is expressed to a 99% level of confidence (k=3).

TRACEABILITY INFORMATION
This instrument was calibrated using solutions prepared by Alcohol Countermeasure Systems, Inc. (ACS) ACS prepared and certified these CRMs in accordance with ISO 17034 and ISO/ IEC 17025 Standards.

Simulator temperatures are traceable to NIST. Thermometer temperatures are checked with NIST traceable Eutechnics 4400 digital thermometers calibrated by Precision Metrology in accordance with ISO/ IEC 17025 standards.

Dry gas control measurements are traceable to NIST through the uses of CRMs supplied by an accredited CRM supplier. The supplier of dry gas standard controls prepared and certified the CRMs in accordance with ISO Guide 34 and ISO/ IEC 17025 standards.

This document shall not be reproduced except in full, without written approval of the Florida Department of Law Enforcement Alcohol Testing Program.

01/04/2018
Date

Patrick Murphy
PATRICK J MURPHY,
Department Inspector

1/16/18

Florida Department of Law Enforcement
Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: WASHINGTON COUNTY SO
Serial Number: 80-000782
Time of Inspection: 08:27
Date of Inspection: 01/04/2018
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:

Number of Simulators Used: _____

Remarks:
SKIPPED AI TO OPERATE INSTRUMENT

The above instrument complies (X) 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.

Patrick J Murphy
PATRICK J MURPHY
Signature and Printed Name

01/04/2018
Date

1/16/18

FDLE/ATP Form 40 – March 2004

FDLE

Florida Department of
Law Enforcement

Richard L. Swearingen
Commissioner

Criminal Justice Professionalism
Post Office Box 1489
Tallahassee, Florida 32302-1489
(850) 410-8600
www.fdle.state.fl.us

Rick Scott, *Governor*
Pam Bondi, *Attorney General*
Jimmy Patronis, *Chief Financial Officer*
Adam Putnam, *Commissioner of Agriculture*

MEMORANDUM

DATE: January 16, 2018

TO: To Whomever It May Concern

FROM: Patrick Murphy (Department Inspector, FDLE) PJM

SUBJECT: Ownership of Intoxilyzer 8000 serial Number 80-000782

Please be advised that Intoxilyzer 8000 Serial Number 80-000782, once the property of Washington County Sheriff's Office, has been donated to, and is now the property of, the Florida Highway Patrol, Troop A, Panama City, FL.

1/16/18
JO

Return Material Authorization form

SHIP TO: ☑ CMI, Inc.

☒ ~~Enforcement Electronics~~

Shipment to repair facility authorized by: Sue Barge on 80-000782

Items Returned: Instrument ☒ Supplies ☐ other ☐ Please Describe: _____

Instrument Model: 8000 Serial Number 80-000782

Bill To Address:	Ship To Address:
Sue Barge	
Florida Highway Patrol	FDLE ATP
6030 County Road 2321	2331 Phillips Rd
Panama City FL 32404	Tallahassee FL 32308

Reason for Return:

Ambient and purge fails in an environment in which other instruments ~~and~~ are unaffected - see attached

Please choose one of the following options:

☐ 1. I _____, authorize all repairs.

☐ 2. I _____, authorize repairs up to $_____ .

☒ 3. I require an estimate **BEFORE** any repairs will be authorized and/or conducted,
Please contact, Name: Sue Barge Phone Number: 850-873-7020 x23654
susanbarge@flhsmv.gov

Notes:

Return Material Authorization form

SHIP TO: ☐ CMI, Inc.

☒ Enforcement Electronics

Shipment to repair facility authorized by: Sue Barge on 80-000782

Items Returned: Instrument ☒ Supplies ☐ other ☐ Please Describe: _____

Instrument Model: 8000 Serial Number 80-000782

Bill To Address:	Ship To Address:
Sue Barge Florida Highway Patrol 6030 County Road 2321 Panama City FL 32404	FDLE ATP 2331 Phillips Rd Tallahassee FL 32308

Reason for Return:

Ambient and purge fails in an environment in which other instruments ~~and~~ are unaffected - see attached

Please choose one of the following options:

☐ 1. I _____, authorize all repairs.

☐ 2. I _____, authorize repairs up to $_____ .

☒ 3. I require an estimate **BEFORE** any repairs will be authorized and/or conducted,
Please contact, Name: Sue Barge Phone Number: 850-873-7020 x 23654
susanbarge@flhsmv.gov

Notes:

Florida Department of Law Enforcement
Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: WASHINGTON COUNTY SO
Time of Inspection: 13:23 Date of Inspection: 08/12/2017

Serial Number: 80-000782
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		No

Alcohol Free Test (g/210L)	0.05g/210L Test (g/210L) Lot#:201603D Exp: 03/08/2018	0.08g/210L Test (g/210L) Lot#:201611B Exp: 11/15/2018	0.20g/210L Test (g/210L) Lot#: Exp:	0.08 g/210L Dry Gas Std Test (g/210L) Lot#: Exp:
0.000	0.049			
0.000	0.049			
0.000	0.050			

Number of Simulators Used: 5

Remarks:
08: Ambient Fail, Ambient Fail. Non-compliance:AMBIEN FIAL.

The above instrument complies ( ) does not comply (X) 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: SUSAN M BARGE

Date: 08/12/2017

FDLE/ATP Form 40 – March 2004

FDLE
Alcohol Testing Program

INSTRUMENT PROCESSING SHEET

Agency FHP - Washington S/N 80-000782

Date In 8/15/17 Date Out _____ ☐Ship ☐P/U ☐H/D ☐CMI ☐EE

Intake Performed By DD

- ☐ Registration
- ☑ Annual
- ☐ Return from CMI
- ☐ Return from Enforcement Electronics
- ☐ Other _____

Visual Inspection:

- OK Case
- OK Handle
- OK Dry Gas Holder
- OK Feet
- OK Keyboard/Plug
- OK Back/Plugs
- OK Screws tight
- OK Breath Hose

Other Equipment:

- ☐ Power cord
- ☐ Printer Cable
- ☐ Other _____

Notes: _____

Quality Checks Performed By _____

- ☐ Lab Temp °C _____
- ☐ Breath Tube Screen
- ☐ Replace External O-Rings
- ☐ Instrument Set Up Verified
- ☐ R-Value _____
- ☐ Flow Verification (L/s)
  - Flow Column # _____
  - 32mm _____ (.139 - .169)
  - 36mm _____ (.156 - .190)
  - 53mm _____ (.228 - .278)
  - 103mm _____ (.447 - .547)
- ☐ Barometric Pressure Check
  - Gauge ID # _____
- ☐ Stability Checks

Simulator	Serial #	Lot #/Exp
0.05		
0.08		
0.20		
0.08 DGS	N/A	

Flow Calibration Performed By _____

- ☐ Flow Calibration N/A
- ☐ Flow Calibration Complete
  - Flow Column # _____
  - ☐ 5L/min – 17mm
  - ☐ 15L/min – 53mm
  - ☐ 30L/min – 103mm
- ☐ R-Value _____
- ☐ Post Calibration Verification (L/s)
  - Flow Column # _____
  - 32mm _____ (.139 - .169)
  - 36mm _____ (.156 - .190)
  - 53mm _____ (.228 - .278)
  - 103mm _____ (.447 - .547)

Maintenance Performed By _____

- ☐ Battery Replacement
- ☐ Dry Gas Regulator Replacement
- ☐ Breath Tube Replacement
- ☐ Other _____

Quality Checks Cont. Performed By ____

Simulator Temperatures °C

External Digital Therm. ID#: _____

- ☐ 34°C +-.2 Serial #: _____
- ☐ 34°C +-.2 Serial #: _____
- ☐ 34°C +-.2 Serial #: _____

Calibration Adjustment Performed By _____

- ☐ Calibration Adjustment N/A
- ☐ Calibration Adjustment Complete

Barometric Pressure Gauge _____ ID # _____

Simulator	Serial Number	Lot Number	Expiration
0.000		N/A	N/A
0.040			
0.100			
0.200			
0.300			
0.080 DGS	N/A		

☐ Post Calibration Adjustment Stability Checks

Simulator	Serial Number	Lot Number	Expiration
0.05			
0.08			
0.20			
0.08 DGS	N/A		

Department Inspection Performed By _____

- ☐ Barometric Pressure _____ Gauge
  ID# _____ _____ Instrument

Mouth Alcohol Solution Lot # _____

Acetone Stock Solution Lot # _____

Simulator	Serial Number
0.00	
Interferent	
0.05	
0.08	
0.20	

Attachments

- ☐ Form 41
- ☐ Pre-Stability Tests
- ☐ Flow Calibration
- ☐ Calibration Adjustment
- ☐ Post-Stability Tests
- ☐ Other _____

Notes/Suggested Service:
Shipped To Enforcement Electronics due Ambient And Purge Fails

- ☐ **Instrument Complies with Chapter 11D-8, FAC**
- ☐ **Instrument Does Not Comply with Chapter 11D-8, FAC**
- ☐ **Return to/Place into Evidentiary Use**
- ☐ **Remain Out of Evidentiary Use**
- ☐ **Conduct an Agency Inspection Before Evidentiary Use**

Quality Control Review Date