



INSTRUMENT PROCESSING SHEET

Agency Highlands County SOS/N 80-001043

Florida Department of Law Enforcement

Date In 03/28/2018DI Completion Date 3/30/18 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 SP

Breath Tube Screen
 Replace External O-Rings
 Instrument Set Up Verified
 R-Value 197
 Flow Verification (L/s)
 Flow Column # ATP103
 32 mm .152 (.139 - .169)
 36 mm .167 (.156 - .190)
 53 mm .242 (.228 - .278)
 103 mm .496 (.447 - .547)

Barometric Pressure Check
 Gauge ID # 281662
 Stability Checks

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)

Final Release Date

FDLE

MAR 30 2018

Alcohol Testing Program

Simulator	Serial #	Lot #/Exp
0.050	<u>G11739</u>	201707D 07/25/2019
0.080	<u>SD3964</u>	201707E 07/25/2019
0.200	<u>DR3856</u>	201707C 07/24/2019
0.080 DGS	N/A	<u>AG805702</u> <u>2-26-20</u>

Maintenance Performed By _____

Battery Replacement
 Dry Gas Regulator Replacement
 Breath Tube Replacement
 Other _____

Temperature Checks Performed By SP

Lab Temp °C 22.2
 External Digital Therm. ID#: 300503
 34°C +/-2 Serial #: G11739
 34°C +/-2 Serial #: SD3964
 34°C +/-2 Serial #: DR3856

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 SP

Barometric Pressure ID# 281662
 Gauge 1018 Instrument 1017
 Mouth Alcohol Solution Lot # 2016-C
 Acetone Stock Solution Lot # 2015-A

Simulator	Serial Number
0.000	<u>SD1019</u>
Interferent	<u>SD1021</u>
0.050	<u>G11739</u>
0.080	<u>SD3964</u>
0.200	<u>DR3856</u>

Attachments

Form 41 Post-Stability Checks
 Stability Checks Flow Calibration
 Calibration Certificate Form 40
 Calibration Adjustment Other _____

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

JD 3/30/18 Scott Kirkland 3/30/18
 Tech Review / Date Admin Review / Date

Florida Department of Law Enforcement Alcohol Testing Program

DEPARTMENT INSPECTION REPORT - INTOXILYZER 8000

BK

Agency: HIGHLANDS COUNTY SO
Time of Inspection: 13:15

Date of Inspection: 03/30/2018

Serial Number: 80-001043
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#:AG805702 Exp: 02/26/2020
0.000	0.049	0.081	0.199	0.078
0.000	0.050	0.081	0.200	0.078
0.000	0.049	0.082	0.199	0.078
0.000	0.049	0.081	0.199	0.078
0.000	0.050	0.082	0.199	0.078
0.000	0.049	0.082	0.199	0.079
0.000	0.050	0.081	0.199	0.079
0.000	0.050	0.081	0.200	0.079
0.000	0.050	0.081	0.200	0.078
0.000	0.050	0.081	0.200	0.079

Standard Deviations	0.0005	0.0004	0.0005	0.0005
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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 () 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.

Shayla Platt

SHAYLA D PLATT
Signature and Printed Name

03/30/2018
Date

3/30/18
JA

STABILITY CHECKS # 80-001043

HIGHLANDS COUNTY SO
 Intoxilyzer - Alcohol Analyzer
 Model 8000 SN 80-001043
 03/30/2018
 Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	10:03
Control Test	0.049	10:04
Air Blank	0.000	10:04
Control Test	0.049	10:05
Air Blank	0.000	10:05
Control Test	0.050	10:06
Air Blank	0.000	10:07
Control Test Stats		
Average	0.0493	
Std Dev	0.0006	
Rel Std Dev(%)	1.1703	

SP

Operator's Signature

3/30/18
 JS

HIGHLANDS COUNTY SO
 Intoxilyzer - Alcohol Analyzer
 Model 8000 SN 80-001043
 03/30/2018
 Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	09:58
Control Test	0.081	09:59
Air Blank	0.000	09:59
Control Test	0.081	10:00
Air Blank	0.000	10:01
Control Test	0.081	10:01
Air Blank	0.000	10:02
Control Test Stats		
Average	0.0810	
Std Dev	0.0000	
Rel Std Dev(%)	0.0000	

SP

Operator's Signature

HIGHLANDS COUNTY SO
 Intoxilyzer - Alcohol Analyzer
 Model 8000 SN 80-001043
 03/30/2018
 Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	09:53
Control Test	0.196	09:54
Air Blank	0.000	09:54
Control Test	0.197	09:55
Air Blank	0.000	09:55
Control Test	0.197	09:56
Air Blank	0.000	09:57
Control Test Stats		
Average	0.1967	
Std Dev	0.0006	
Rel Std Dev(%)	0.2936	

SP

Operator's Signature

HIGHLANDS COUNTY SO
 Intoxilyzer - Alcohol Analyzer
 Model 8000 SN 80-001043
 03/30/2018
 Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	09:50
Control Test	0.078	09:50
Air Blank	0.000	09:50
Control Test	0.078	09:51
Air Blank	0.000	09:51
Control Test	0.078	09:51
Air Blank	0.000	09:52
Control Test Stats		
Average	0.0780	
Std Dev	0.0000	
Rel Std Dev(%)	0.0000	

DGS

SP

Operator's Signature

ASK



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

Calibration Certificate

This is to certify the calibration of Intoxilyzer 8000 serial number 80-001043, manufactured by CMI, Inc. was calibrated in accordance with FDLE/ATP Form 36 - Department Inspection Procedures - Intoxilyzer 8000.

Serial Number:	<u>80-001043</u>	UNCERTAINTY* ±
Owning Agency:	<u>HIGHLANDS COUNTY SO</u>	0.050 g/ 210 L
Calibration Date:	<u>03/30/2018</u>	0.080 g/ 210 L
Calibration Time:	<u>13:15</u>	0.200 g/ 210 L
		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 target 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.

03/30/2018

Date

Shayla Platt

SHAYLA D PLATT,

Department Inspector

FDLE/ATP Form 69 March 2018
 Issuing Authority: Alcohol Testing Program

Service • Integrity • Respect • Quality

3/30/18
13K

Return Material Authorization

Ship to: CMI, Inc.
 Enforcement Electronics

Shipment to repair facility authorized by: Gregory Glasco on 2/5/18

Items Returned: Instrument Supplies Other Describe: _____
Instrument Model: Intoxilyzer 8000 Serial Number: 80-001043

Bill To Address: <u>Highlands County SO</u> <u>434 Fernleaf Avenue</u> <u>Sebring, FL 33870-4410</u>	Ship to Address: <u>FDLE-ATP</u> <u>2331 Phillips Road</u> <u>Tallahassee, FL 32308</u>
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Reason for Return:
Instrument will not turn on.

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: Gregory Glasco
Phone #: 863-402-7200 Email: gglasco@highlandssheriff.org
ATP Contact Name: Shayla Platt ATP Email: shaylplatt@fdle.state.fl.us

3/30/18
JO
BK



INSTRUMENT PROCESSING SHEET

Agency Highlands County SO

S/N 80-001043

Florida Department of
Law Enforcement

Date In 02/08/2018

DI Completion Date _____

Ship P/U H/D CMI EE

Intake Performed By JJ

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 _____
 Flow Verification (L/s)

Flow Column # _____
 32 mm _____ (.139 - .169)
 36 mm _____ (.156 - .190)
 53 mm _____ (.228 - .278)
 103 mm _____ (.447 - .547)

Barometric Pressure Check
 Gauge ID # _____
 Stability Checks

Simulator	Serial #	Lot #/Exp
0.050		201707D 07/25/2019
0.080		201707E 07/25/2019
0.200		201707C 07/24/2019
0.080 DGS	N/A	

Flow Calibration Performed By _____

Flow Column # _____
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 15L/min - 53mm
 30L/min - 103mm

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Battery Replacement
 Dry Gas Regulator Replacement
 Breath Tube Replacement
 Other _____

Temperature Checks Performed By _____

Lab Temp °C _____
 External Digital Therm. ID#: _____
 34°C +/- .2 Serial #: _____
 34°C +/- .2 Serial #: _____
 34°C +/- .2 Serial #: _____

Final Release Date

Calibration Adjustment Performed By _____

Barometric Pressure Gauge _____ ID # _____

Simulator	Serial Number	Lot Number	Expiration
0.000		N/A	N/A
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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# _____
 Gauge _____ Instrument _____
 Mouth Alcohol Solution Lot # _____
 Acetone Stock Solution Lot # _____

Simulator	Serial Number
0.000	
Interferent	
0.050	
0.080	
0.200	

Attachments

Form 41 Post-Stability Checks
 Stability Checks Flow Calibration
 Calibration Certificate Form 40
 Calibration Adjustment Other _____

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

JJ 3/30/18 Burt Kirkland 3/30/18
 Tech Review / Date Admin Review / Date