



# INSTRUMENT PROCESSING SHEET

Agency Orange County SOS/N 80-001420

Florida Department of Law Enforcement

Date In 06/21/18DI Completion Date 6/26/18 Ship  P/U  H/D  CMI  EE

<b>Intake</b> Performed By <u>JK</u> <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Registration <input type="checkbox"/> Return from CMI / EE Visual Inspection: <input checked="" type="checkbox"/> Case <input checked="" type="checkbox"/> Handle <input checked="" type="checkbox"/> Keyboard <input checked="" type="checkbox"/> Dry Gas Shelf <input checked="" type="checkbox"/> Feet <input checked="" type="checkbox"/> Breath Tube <input checked="" type="checkbox"/> Ports <input checked="" type="checkbox"/> Screws Tight Other Equipment/ Accessories: <input type="checkbox"/> Power cord <input type="checkbox"/> Printer Cable <input checked="" type="checkbox"/> Static Bag <input type="checkbox"/> 12V DC Cable Notes: _____ _____ _____	<b>Quality Checks</b> Performed By <u>JK</u> <input checked="" type="checkbox"/> Breath Tube Screen <input checked="" type="checkbox"/> Replace External O-Rings <input checked="" type="checkbox"/> Instrument Set Up Verified <input checked="" type="checkbox"/> R-Value <u>201</u> <input checked="" type="checkbox"/> Flow Verification (L/s) Flow Column # <u>A7P103</u> 32 mm <u>148</u> (.139 - .169) 36 mm <u>167</u> (.156 - .190) 53 mm <u>240</u> (.228 - .278) 103 mm <u>488</u> (.447 - .547) <input checked="" type="checkbox"/> Barometric Pressure Check Gauge ID # <u>28427</u> <input checked="" type="checkbox"/> Stability Checks	<b>Flow Calibration</b> Performed By _____ Flow Column # _____ <input type="checkbox"/> 5L/min - 17mm <input type="checkbox"/> 15L/min - 53mm <input type="checkbox"/> 30L/min - 103mm <input type="checkbox"/> R-Value _____ <input type="checkbox"/> Post Calibration Verification (L/s) Flow Column # _____ 32 mm _____ (.139 - .169) 36 mm _____ (.156 - .190) 53 mm _____ (.228 - .278) 103 mm _____ (.447 - .547)																																																											
<b>Final Release Date</b> <div style="text-align: center; font-weight: bold; font-size: 1.2em;">FDLE</div> <div style="text-align: center; font-weight: bold; font-size: 1.2em;">JUN 26 2018</div> <div style="text-align: center; font-weight: bold;">Alcohol Testing Program</div>	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Simulator</th> <th>Serial #</th> <th>Lot #/Exp</th> </tr> </thead> <tbody> <tr> <td>0.050</td> <td>SD1021</td> <td>201707D 7/25/19</td> </tr> <tr> <td>0.080</td> <td>DR1275</td> <td>201707E 7/25/19</td> </tr> <tr> <td>0.200</td> <td>SD1019</td> <td>201707C 7/24/19</td> </tr> <tr> <td>0.080 DGS</td> <td>N/A</td> <td>AG805 702 2/26/20</td> </tr> </tbody> </table>	Simulator	Serial #	Lot #/Exp	0.050	SD1021	201707D 7/25/19	0.080	DR1275	201707E 7/25/19	0.200	SD1019	201707C 7/24/19	0.080 DGS	N/A	AG805 702 2/26/20	<b>Maintenance</b> Performed By _____ <input type="checkbox"/> Battery Replacement <input type="checkbox"/> Dry Gas Regulator Replacement <input type="checkbox"/> Breath Tube Replacement <input type="checkbox"/> Other _____ <b>Temperature Checks</b> Performed By <u>JK</u> <input checked="" type="checkbox"/> Lab Temp °C <u>20.9</u> External Digital Therm. ID#: <u>300503</u> <input checked="" type="checkbox"/> 34°C +/- .2 Serial #: <u>SD1021</u> <input checked="" type="checkbox"/> 34°C +/- .2 Serial #: <u>DR1275</u> <input checked="" type="checkbox"/> 34°C +/- .2 Serial #: <u>SD1019</u>																																												
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<b>Calibration Adjustment</b> Performed By _____ Barometric Pressure Gauge _____ ID # _____ <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Simulator</th> <th>Serial Number</th> <th>Lot Number</th> <th>Expiration</th> </tr> </thead> <tbody> <tr> <td>0.000</td> <td></td> <td>N/A</td> <td>N/A</td> </tr> <tr> <td>0.040</td> <td></td> <td></td> <td></td> </tr> <tr> <td>0.100</td> <td></td> <td></td> <td></td> </tr> <tr> <td>0.200</td> <td></td> <td></td> <td></td> </tr> <tr> <td>0.300</td> <td></td> <td></td> <td></td> </tr> <tr> <td>0.080 DGS</td> <td>N/A</td> <td></td> <td></td> </tr> </tbody> </table> <input type="checkbox"/> Post Calibration Adjustment Stability Checks <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Simulator</th> <th>Serial Number</th> <th>Lot Number</th> <th>Expiration</th> </tr> </thead> <tbody> <tr> <td>0.050</td> <td></td> <td></td> <td></td> </tr> <tr> <td>0.080</td> <td></td> <td></td> <td></td> </tr> <tr> <td>0.200</td> <td></td> <td></td> <td></td> </tr> <tr> <td>0.080 DGS</td> <td>N/A</td> <td></td> <td></td> </tr> </tbody> </table>	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			Simulator	Serial Number	Lot Number	Expiration	0.050				0.080				0.200				0.080 DGS	N/A			<b>Department Inspection</b> Performed By <u>JK</u> Barometric Pressure ID# <u>28427</u> Gauge <u>1016</u> Instrument <u>1015</u> Mouth Alcohol Solution Lot # <u>2016-C</u> Acetone Stock Solution Lot # <u>248 A</u> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Simulator</th> <th>Serial Number</th> </tr> </thead> <tbody> <tr> <td>0.000</td> <td>G11621</td> </tr> <tr> <td>Interferent</td> <td>DR 3855</td> </tr> <tr> <td>0.050</td> <td>SD1021</td> </tr> <tr> <td>0.080</td> <td>DR1275</td> </tr> <tr> <td>0.200</td> <td>SD1019</td> </tr> </tbody> </table>	Simulator	Serial Number	0.000	G11621	Interferent	DR 3855	0.050	SD1021	0.080	DR1275	0.200	SD1019
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Notes/Suggested Service: _____ _____ _____ _____ _____	<b>Attachments</b> <input checked="" type="checkbox"/> Form 41 <input type="checkbox"/> Post-Stability Checks <input checked="" type="checkbox"/> Stability Checks <input type="checkbox"/> Flow Calibration <input checked="" type="checkbox"/> Calibration Certificate <input type="checkbox"/> Form 40 <input type="checkbox"/> Calibration Adjustment <input type="checkbox"/> Other _____ <input checked="" type="checkbox"/> Instrument Complies with Chapter 11D-8, FAC <input type="checkbox"/> Instrument Does Not Comply with Chapter 11D-8, FAC <input checked="" type="checkbox"/> Return to/Place into Evidentiary Use <input type="checkbox"/> Remain Out of Evidentiary Use <input checked="" type="checkbox"/> Conduct an Agency Inspection Before Evidentiary Use <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="text-align: center;"> <u>JK</u> 6/26/18              Tech Review / Date           </div> <div style="text-align: center;"> <u>J. Johnson</u> 6/26/18              Admin Review / Date           </div> </div>																																																												

# Florida Department of Law Enforcement Alcohol Testing Program

## DEPARTMENT INSPECTION REPORT - INTOXILYZER 8000

Agency: ORANGE COUNTY S.O.  
Time of Inspection: 09:56

Date of Inspection: 06/26/2018

Serial Number: 80-001420  
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	0.048	0.080	0.198	0.080
0.000	0.048	0.080	0.200	0.080
0.000	0.049	0.080	0.201	0.079
0.000	0.049	0.080	0.200	0.080
0.000	0.049	0.080	0.201	0.079
0.000	0.049	0.080	0.200	0.080
0.000	0.049	0.080	0.201	0.079
0.000	0.049	0.080	0.201	0.079
0.000	0.049	0.080	0.201	0.079
0.000	0.049	0.080	0.201	0.079
0.000	0.049	0.080	0.200	0.079
Standard Deviations	0.0004	0.0000	0.0009	0.0005

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

Remarks:

*Jam*

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.

JAKE L SHANAHAN

Signature and Printed Name

06/26/2018  
Date

*6/26/18  
JO*

80-001420  
 Stat. 1112 Checks  
 6/26/18

INTOXILYZER 8000  
 Instrument Initialization  
 07:07 06/26/2018

ORANGE COUNTY S.O.  
 Intoxilyzer - Alcohol Analyzer  
 Model 8000 SN 80-001420  
 06/26/2018  
 Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	07:37
Control Test	0.079	07:37
Air Blank	0.000	07:38
Control Test	0.080	07:38
Air Blank	0.000	07:39
Control Test	0.079	07:39
Air Blank	0.000	07:39
Control Test	0.079	07:39
Control Test Stats		
Average	0.0793	
Std Dev	0.0006	
Rel Std Dev(%)	0.7277	

DGS

Operator's Signature  


agm  
 6/26/18  


ORANGE COUNTY S.O.  
 Intoxilyzer - Alcohol Analyzer  
 Model 8000 SN 80-001420  
 06/26/2018  
 Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	07:42
Control Test	0.195	07:43
Air Blank	0.000	07:44
Control Test	0.196	07:44
Air Blank	0.000	07:45
Control Test	0.196	07:46
Air Blank	0.000	07:46
Control Test	0.1957	07:46
Control Test Stats		
Average	0.1957	
Std Dev	0.0006	
Rel Std Dev(%)	0.2951	

Operator's Signature  


ORANGE COUNTY S.O.  
 Intoxilyzer - Alcohol Analyzer  
 Model 8000 SN 80-001420  
 06/26/2018  
 Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	07:48
Control Test	0.079	07:48
Air Blank	0.000	07:49
Control Test	0.079	07:50
Air Blank	0.000	07:50
Control Test	0.079	07:51
Air Blank	0.000	07:51
Control Test	0.079	07:51
Control Test Stats		
Average	0.0790	
Std Dev	0.0000	
Rel Std Dev(%)	0.0000	

Operator's Signature  


ORANGE COUNTY S.O.  
 Intoxilyzer - Alcohol Analyzer  
 Model 8000 SN 80-001420  
 06/26/2018  
 Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	07:58
Control Test	0.048	07:59
Air Blank	0.000	08:00
Control Test	0.049	08:00
Air Blank	0.000	08:01
Control Test	0.049	08:02
Air Blank	0.000	08:02
Control Test	0.049	08:02
Control Test Stats		
Average	0.0487	
Std Dev	0.0006	
Rel Std Dev(%)	1.1863	

Operator's Signature  




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 80-001420, manufactured by CMI, Inc. was calibrated in accordance with FDLE/ATP Form 36 - Department Inspection Procedures - Intoxilyzer 8000.

Serial Number:	<u>80-001420</u>	UNCERTAINTY* $\pm$	
Owning Agency:	<u>ORANGE COUNTY S.O.</u>	0.050 g/ 210 L	0.004
Calibration Date:	<u>06/26/2018</u>	0.080 g/ 210 L	0.005
Calibration Time:	<u>09:56</u>	0.200 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  $\pm$  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.

06/26/2018

Date

  
 JAKE L SHANAHAN,  
 Department Inspector

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

Service • Integrity • Respect • Quality

*Handwritten notes:*  
 8/26/18  
 AS  
 (mirrored on the left side of the page)