



# INSTRUMENT PROCESSING SHEET

Agency Hardee County SO

S/N 80-007160

Florida Department of  
Law Enforcement

Date In 12/03/2020 DI Completion Date 12/10/2020

☒ Ship ☐ P/U ☐ H/D ☐ CMI ☐ EE

<b>Intake</b> Performed By <u>MH</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>MH</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>211</u> <input checked="" type="checkbox"/> Flow Verification (L/s) Flow Column # <u>ATP 101</u> 32 mm <u>0.160</u> (.139 - .169) 36 mm <u>0.171</u> (.156 - .190) 53 mm <u>0.250</u> (.228 - .278) 103 mm <u>0.511</u> (.447 - .547) <input checked="" type="checkbox"/> Barometric Pressure Check Gauge ID # <u>28199</u> <input checked="" type="checkbox"/> Stability Checks <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>Simulator</th> <th>Serial #</th> <th>Lot #/Exp</th> </tr> <tr> <td>0.050</td> <td>MP4863</td> <td>202010A 10/05/2022</td> </tr> <tr> <td>0.080</td> <td>MP4864</td> <td>202010B 10/05/2022</td> </tr> <tr> <td>0.200</td> <td>MP5097</td> <td>202010D 10/06/2022</td> </tr> <tr> <td>0.080 DGS</td> <td>N/A</td> <td>AG003005 01/30/2022</td> </tr> </table>	Simulator	Serial #	Lot #/Exp	0.050	MP4863	202010A 10/05/2022	0.080	MP4864	202010B 10/05/2022	0.200	MP5097	202010D 10/06/2022	0.080 DGS	N/A	AG003005 01/30/2022	<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>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>TDC</u> <input checked="" type="checkbox"/> Lab Temp °C <u>22.64</u> External Digital Therm. ID#: <u>300504</u> <input checked="" type="checkbox"/> 34°C +/-2 Serial #: <u>MP4863</u> <input checked="" type="checkbox"/> 34°C +/-2 Serial #: <u>MP4864</u> <input checked="" type="checkbox"/> 34°C +/-2 Serial #: <u>MP5097</u>																																													
Simulator	Serial #	Lot #/Exp																																																												
0.050	MP4863	202010A 10/05/2022																																																												
0.080	MP4864	202010B 10/05/2022																																																												
0.200	MP5097	202010D 10/06/2022																																																												
0.080 DGS	N/A	AG003005 01/30/2022																																																												
<b>Final Release Date</b> <div style="display: flex; align-items: center;"> <div style="flex: 1;"> <p>FDLE Alcohol Testing Program</p> </div> <div style="flex: 1; border-left: 1px solid black; padding-left: 10px;"> <p>Digitally signed by FDLE Alcohol Testing Program Date: 2020.12.18 11:45:32 -05'00'</p> </div> </div>																																																														
<b>Calibration Adjustment</b> Performed By _____ Barometric Pressure Gauge _____ ID # _____ <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>Simulator</th> <th>Serial Number</th> <th>Lot Number</th> <th>Expiration</th> </tr> <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> </table> <input type="checkbox"/> Post Calibration Adjustment Stability Checks <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>Simulator</th> <th>Serial Number</th> <th>Lot Number</th> <th>Expiration</th> </tr> <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> </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>MH</u> Barometric Pressure ID# <u>28663</u> Gauge <u>1021</u> Instrument <u>1020</u> Mouth Alcohol Solution Lot # <u>2020-A</u> Acetone Stock Solution Lot # <u>2019-A</u> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>Simulator</th> <th>Serial Number</th> </tr> <tr> <td>0.000</td> <td>SD1014</td> </tr> <tr> <td>Interferent</td> <td>SD1015</td> </tr> <tr> <td>0.050</td> <td>MP4863</td> </tr> <tr> <td>0.080</td> <td>MP4864</td> </tr> <tr> <td>0.200</td> <td>MP5097</td> </tr> </table> <b>Attachments</b> <div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Form 41 <small>MH 12/15/20</small>  <input checked="" type="checkbox"/> Stability Checks <small>MH 12/15/20</small>  <input checked="" type="checkbox"/> Calibration Certificate  <input type="checkbox"/> Calibration Adjustment         </div> <div> <input type="checkbox"/> Post-Stability Checks  <input type="checkbox"/> Flow Calibration  <input type="checkbox"/> Form 40  <input checked="" type="checkbox"/> Other <u>Add. Stabilities</u> </div> </div>		Simulator	Serial Number	0.000	SD1014	Interferent	SD1015	0.050	MP4863	0.080	MP4864	0.200	MP5097
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																																																													
Simulator	Serial Number																																																													
0.000	SD1014																																																													
Interferent	SD1015																																																													
0.050	MP4863																																																													
0.080	MP4864																																																													
0.200	MP5097																																																													
Notes/Suggested Service: _____ Tech: Added correct attachments check marks <u>MH</u> _____ _____ _____ _____																																																														
<div style="display: flex; justify-content: space-between;"> <div> <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> <div style="text-align: right;"> <p>2020.12. 18 11:44:37</p> <p><i>Israel Soto</i> 12-16-2020</p> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <p>Tech Review / Date</p> <p>Admin Review / Date</p> </div>																																																														



# Florida Department of Law Enforcement Alcohol Testing Program

## DEPARTMENT INSPECTION REPORT - INTOXILYZER 8000

Agency: HARDEE COUNTY SO  
Time of Inspection: 13:50

Date of Inspection: 12/10/2020

Serial Number: 80-007160  
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#:202010A Exp: 10/05/2020	0.08g/210L Test (g/210L) Lot#:202010B Exp: 10/05/2020	0.20g/210L Test (g/210L) Lot#:202010D Exp: 10/06/2022	0.08 g/210L Dry Gas Std Test (g/210L) Lot#:AG003005 Exp: 01/30/2022
0.000	0.047	0.078	0.196	0.079
0.000	0.047	0.079	0.197	0.079
0.000	0.048	0.079	0.197	0.079
0.000	0.048	0.078	0.197	0.078
0.000	0.048	0.078	0.197	0.080
0.000	0.048	0.079	0.197	0.078
0.000	0.049	0.078	0.197	0.079
0.000	0.048	0.079	0.196	0.079
0.000	0.048	0.079	0.196	0.079
0.000	0.049	0.078	0.197	0.078

Standard Deviations	0.0006	0.0005	0.0004	0.0006
---------------------	--------	--------	--------	--------

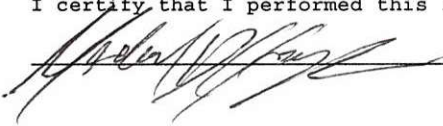
Average Standard Deviation of 0.05, 0.08 and 0.20 g/210L Tests: 0.0005 Number of Simulators Used: 5

Remarks:

15  
2020.12  
18  
11:39:2  
9  
-05'00'

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.



MICHAEL D HAUGHEY  
Signature and Printed Name

12/10/2020  
Date

TYPE OF TEST	SERIAL NUMBER	AGENCY	DATE	PERFORMED BY
Stabilities	80-007160	Hardee County SO	12/03/2020	ML

0.05g/210L	0.08g/210L	0.20g/210L	DGS 0.08g/210L
0.047 to 0.053 <input checked="" type="checkbox"/>	0.077 to 0.083 <input checked="" type="checkbox"/>	0.194 to 0.206 <input checked="" type="checkbox"/>	0.077 to 0.083 <input checked="" type="checkbox"/>

HARDEE COUNTY SO  
Intoxilyzer - Alcohol Analyzer  
Model 8000 SN 80-007160  
12/03/2020  
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	15:59
Control Test	0.048	16:00
Air Blank	0.000	16:00
Control Test	0.048	16:01
Air Blank	0.000	16:02
Control Test	0.048	16:02
Air Blank	0.000	16:03
Control Test Stats		
Average	0.0480	
Std Dev	0.0000	
Rel Std Dev(%)	0.0000	

Operator's Signature

HARDEE COUNTY SO  
Intoxilyzer - Alcohol Analyzer  
Model 8000 SN 80-007160  
12/03/2020  
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	16:04
Control Test	0.077	16:04
Air Blank	0.000	16:05
Control Test	0.078	16:06
Air Blank	0.000	16:06
Control Test	0.079	16:07
Air Blank	0.000	16:07
Control Test Stats		
Average	0.0780	
Std Dev	0.0010	
Rel Std Dev(%)	1.2821	

Operator's Signature

HARDEE COUNTY SO  
Intoxilyzer - Alcohol Analyzer  
Model 8000 SN 80-007160  
12/03/2020  
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	16:08
Control Test	0.195	16:09
Air Blank	0.000	16:09
Control Test	0.195	16:10
Air Blank	0.000	16:11
Control Test	0.195	16:11
Air Blank	0.000	16:12
Control Test Stats		
Average	0.1950	
Std Dev	0.0000	
Rel Std Dev(%)	0.0000	

Operator's Signature

HARDEE COUNTY SO  
Intoxilyzer - Alcohol Analyzer  
Model 8000 SN 80-007160  
12/03/2020  
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	16:13
Control Test	0.078	16:14
Air Blank	0.000	16:14
Control Test	0.079	16:14
Air Blank	0.000	16:15
Control Test	0.078	16:15
Air Blank	0.000	16:16
Control Test Stats		
Average	0.0783	
Std Dev	0.0006	
Rel Std Dev(%)	0.7370	

Operator's Signature





# Calibration Certificate

Florida Department of Law Enforcement  
Alcohol Testing Program  
4700 Terminal Drive, Suite 1  
Ft. Myers, FL 33907

This is to certify the calibration of Intoxilyzer 8000 serial number 80-007160, manufactured by CMI, Inc. was calibrated in accordance with FDLE/ATP Form 36 - Department Inspection Procedures - Intoxilyzer 8000.

Serial Number:	<u>80-007160</u>	UNCERTAINTY* $\pm$
Owning Agency:	<u>HARDEE COUNTY SO</u>	0.050 g/ 210 L 0.004
Calibration Date:	<u>12/10/2020</u>	0.080 g/ 210 L 0.005
Calibration Time:	<u>13:50</u>	0.200 g/ 210 L 0.007
		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 99.73% level of confidence ( $k=3$ ).

The instrument results before and after any adjustment are found in the associated pre and post stability checks.

## 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.

12/10/2020

Date

  
MICHAEL D HAUGHEY,  
Department Inspector

FDLE/ATP Form 69 April 2020  
Issuing Authority: Alcohol Testing Program

Service • Integrity • Respect • Quality

Page 1 of 1

2020.12.  
18  
11:38:01  
-05'00'

HARDEE COUNTY SO  
Intoxilyzer - Alcohol Analyzer  
Model 8000 SN 80-007160  
12/10/2020  
Software: 8100.27

80-007160  
12/10/2020

Test	g/210L	Time
Air Blank	0.000	10:41
Control Test	0.049	10:41
Air Blank	0.000	10:42
Control Test	0.049	10:43
Air Blank	0.000	10:43
Control Test	0.048	10:44
Air Blank	0.000	10:44
Control Test	0.050	10:45
Air Blank	0.000	10:46
Control Test	0.049	10:46
Air Blank	0.000	10:47
Control Test	0.049	10:47
Air Blank	0.000	10:48
Control Test	0.049	10:49
Air Blank	0.000	10:49
Control Test	0.048	10:50
Air Blank	0.000	10:50
Control Test	0.049	10:51
Air Blank	0.000	10:52
Control Test	0.050	10:52
Air Blank	0.000	10:53
Control Test	0.048	10:54
Air Blank	0.000	10:54
Control Test	0.049	10:55
Air Blank	0.000	10:55
Control Test	0.049	10:56
Air Blank	0.000	10:57
Control Test	0.049	10:57
Air Blank	0.000	10:58
Control Test	0.049	10:58
Air Blank	0.000	10:59
Control Test	0.049	11:00
Air Blank	0.000	11:00
Control Test	0.049	11:01
Air Blank	0.000	11:01
Control Test	0.048	11:02
Air Blank	0.000	11:03
Control Test	0.049	11:03
Air Blank	0.000	11:04
Control Test	0.049	11:05
Air Blank	0.000	11:05
Control Test Stats		
Average	0.0489	
Std Dev	0.0006	
Rel Std Dev(%)	1.1299	

Agencies reported  
Instrument reading  
Low. Ran Extra  
Stabilities.

AS

2020.12.  
18  
11:36:51  
-05'00'



Operator's Signature





## INSTRUMENT PROCESSING SHEET

Agency Hardee CountyS/N 80-007160Florida Department of  
Law EnforcementDate In 12/18/2019DI Completion Date 1/9/20☒ Ship☐ P/U☐ H/D☐ CMI☐ EE

<b>Intake</b> Performed By <u>SP</u> <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Registration <input checked="" 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 checked="" type="checkbox"/> Power cord <input type="checkbox"/> Printer Cable <input checked="" type="checkbox"/> Static Bag <input checked="" type="checkbox"/> 12V DC Cable Notes: _____ _____ _____		<b>Quality Checks</b> Performed By <u>SP</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>213</u> <input checked="" type="checkbox"/> Flow Verification (L/s) Flow Column # <u>ATP-102</u> 32 mm <u>0.152</u> (.139 - .169) 36 mm <u>0.167</u> (.156 - .190) 53 mm <u>0.242</u> (.228 - .278) 103 mm <u>0.503</u> (.447 - .547) <input checked="" type="checkbox"/> Barometric Pressure Check Gauge ID # <u>30793</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> FDLE JAN 13 2020 Alcohol Testing Program		<table border="1"> <thead> <tr> <th>Simulator</th> <th>Serial #</th> <th>Lot #/Exp</th> </tr> </thead> <tbody> <tr> <td>0.050</td> <td>MP5088</td> <td>201905A 05-14-2021</td> </tr> <tr> <td>0.080</td> <td>MP5089</td> <td>201905B 05-14-2021</td> </tr> <tr> <td>0.200</td> <td>MP5090</td> <td>201904D 04-30-2021</td> </tr> <tr> <td>0.080 DGS</td> <td>N/A</td> <td>AG916501 06-14-2021</td> </tr> </tbody> </table>		Simulator	Serial #	Lot #/Exp	0.050	MP5088	201905A 05-14-2021	0.080	MP5089	201905B 05-14-2021	0.200	MP5090	201904D 04-30-2021	0.080 DGS	N/A	AG916501 06-14-2021	<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>SP</u> <input checked="" type="checkbox"/> Lab Temp °C <u>21.9</u> External Digital Therm. ID#: <u>300505</u> <input checked="" type="checkbox"/> 34°C +/- .2 Serial #: <u>SD1012</u> <input checked="" type="checkbox"/> 34°C +/- .2 Serial #: <u>DR1279</u> <input checked="" type="checkbox"/> 34°C +/- .2 Serial #: <u>SD1013</u>																																												
Simulator	Serial #	Lot #/Exp																																																													
0.050	MP5088	201905A 05-14-2021																																																													
0.080	MP5089	201905B 05-14-2021																																																													
0.200	MP5090	201904D 04-30-2021																																																													
0.080 DGS	N/A	AG916501 06-14-2021																																																													
<b>Calibration Adjustment</b> Performed By _____ Barometric Pressure Gauge ID # _____ <table border="1"> <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"> <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>SP</u> Barometric Pressure ID# <u>26932</u> Gauge <u>1030</u> Instrument <u>1029</u> Mouth Alcohol Solution Lot # <u>2018-B</u> Acetone Stock Solution Lot # <u>2019-A</u> <table border="1"> <thead> <tr> <th>Simulator</th> <th>Serial Number</th> </tr> </thead> <tbody> <tr> <td>0.000</td> <td>G2408</td> </tr> <tr> <td>Interferent</td> <td>G2882</td> </tr> <tr> <td>0.050</td> <td>SD1012</td> </tr> <tr> <td>0.080</td> <td>DR1279</td> </tr> <tr> <td>0.200</td> <td>SD1013</td> </tr> </tbody> </table>		Simulator	Serial Number	0.000	G2408	Interferent	G2882	0.050	SD1012	0.080	DR1279	0.200	SD1013
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																																																														
Simulator	Serial Number																																																														
0.000	G2408																																																														
Interferent	G2882																																																														
0.050	SD1012																																																														
0.080	DR1279																																																														
0.200	SD1013																																																														
Notes/Suggested Service: _____ _____ _____ _____ _____ _____		<b>Attachments</b> <input checked="" type="checkbox"/> Form 41 <input checked="" type="checkbox"/> Stability Checks <input checked="" type="checkbox"/> Calibration Certificate <input type="checkbox"/> Calibration Adjustment <input type="checkbox"/> Post-Stability Checks <input type="checkbox"/> Flow Calibration <input type="checkbox"/> Form 40 <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																																																													
		Tech Review / Date <u>1/9/2020</u> <u>Brett Kirkland</u> Admin Review / Date <u>1/9/2020</u>																																																													



# 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 80-007160, manufactured by CMI, Inc. was calibrated in accordance with FDLE/ATP Form 36 - Department Inspection Procedures - Intoxilyzer 8000.

Serial Number:	<u>80-007160</u>	UNCERTAINTY* $\pm$	
Owning Agency:	<u>HARDEE COUNTY SO</u>	0.050 g/ 210 L	0.004
Calibration Date:	<u>01/09/2020</u>	0.080 g/ 210 L	0.005
Calibration Time:	<u>12:30</u>	0.200 g/ 210 L	0.007
		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 99.73% 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.

01/09/2020

Date

Shayla Platt  
SHAYLA D PLATT,  
Department Inspector

FDLE/ATP Form 69 July 2018

Issuing Authority: Alcohol Testing Program

Service • Integrity • Respect • Quality

Page 1 of 1

*Handwritten:* BSK 1/10/2020



# Florida Department of Law Enforcement Alcohol Testing Program

## DEPARTMENT INSPECTION REPORT - INTOXILYZER 8000

Agency: HARDEE COUNTY SO  
Time of Inspection: 12:30

Date of Inspection: 01/09/2020

Serial Number: 80-007160  
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) 201905A Lot#:201905B-SP Exp: 05/14/2021	0.08g/210L Test (g/210L) Lot#:201905B Exp: 05/14/2021	0.20g/210L Test (g/210L) Lot#:201904D Exp: 04/30/2021	0.08 g/210L Dry Gas Std Test (g/210L) Lot#:AG916501 Exp: 06/14/2021
0.000	0.046	0.076	0.195	0.079
0.000	0.046	0.076	0.196	0.079
0.000	0.046	0.077	0.197	0.079
0.000	0.046	0.077	0.196	0.078
0.000	0.046	0.077	0.196	0.078
0.000	0.047	0.077	0.196	0.079
0.000	0.046	0.076	0.197	0.079
0.000	0.047	0.077	0.196	0.078
0.000	0.047	0.077	0.197	0.078
0.000	0.048	0.076	0.196	0.079

Standard Deviations	0.0007	0.0005	0.0006	0.0005
---------------------	--------	--------	--------	--------

Average Standard Deviation of 0.05, 0.08 and 0.20 g/210L Tests: 0.0005 Number of Simulators Used: 5

Remarks:

JBM  
TSK  
1/20/2020

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

01/09/2020  
Date



# Stability checks

HARDEE COUNTY SO  
Intoxilyzer - Alcohol Analyzer  
Model 8000 SN 80-007160  
01/09/2020  
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	09:55
Control Test	0.048	09:55
Air Blank	0.000	09:56
Control Test	0.047	09:57
Air Blank	0.000	09:57
Control Test	0.048	09:58
Air Blank	0.000	09:58
Control Test Stats		
Average	0.0477	
Std Dev	0.0006	
Rel Std Dev(%)	1.2112	

*[Signature]*

Operator's Signature

HARDEE COUNTY SO  
Intoxilyzer - Alcohol Analyzer  
Model 8000 SN 80-007160  
01/09/2020  
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	09:59
Control Test	0.078	10:00
Air Blank	0.000	10:01
Control Test	0.078	10:01
Air Blank	0.000	10:02
Control Test	0.079	10:02
Air Blank	0.000	10:03
Control Test Stats		
Average	0.0783	
Std Dev	0.0006	
Rel Std Dev(%)	0.7370	

wet

*[Signature]*

Operator's Signature

HARDEE COUNTY SO  
Intoxilyzer - Alcohol Analyzer  
Model 8000 SN 80-007160  
01/09/2020  
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	10:04
Control Test	0.199	10:05
Air Blank	0.000	10:05
Control Test	0.198	10:06
Air Blank	0.000	10:06
Control Test	0.198	10:07
Air Blank	0.000	10:08
Control Test Stats		
Average	0.1983	
Std Dev	0.0006	
Rel Std Dev(%)	0.2911	

*[Signature]*

Operator's Signature

HARDEE COUNTY SO  
Intoxilyzer - Alcohol Analyzer  
Model 8000 SN 80-007160  
01/09/2020  
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	10:13
Control Test	0.079	10:13
Air Blank	0.000	10:13
Control Test	0.080	10:14
Air Blank	0.000	10:14
Control Test	0.079	10:15
Air Blank	0.000	10:15
Control Test Stats		
Average	0.0793	
Std Dev	0.0006	
Rel Std Dev(%)	0.7277	

Dry

*[Signature]*

Operator's Signature

*[Signature]*  
TSK  
1/10/2020

# Return Material Authorization

Ship to:



CMI, Inc.



Enforcement Electronics

Shipment to repair facility authorized by: TJ Graham on 05/21/2019

Items Returned: Instrument ☒ Supplies ☐ Other ☐ Describe: \_\_\_\_\_

Instrument Model: Intoxilyzer 8000 Serial Number: 80-007160

Bill To Address:

Hardee County SO

900 E. Summit St.

Wauchula, FL 33873

Ship to Address:

FDLE Off-site Mail Facility

Alcohol Testing Program

813-B Lake Bradford Road

Tallahassee, FL 32308

Reason for Return:

I am unable to obtain flow values that meet FDLE ATP specifications. Please check flow sensor.

**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: Will Cartwright

Phone #: 863-767-9042

Email: wcartwright@hardeeso.com

ATP Contact Name: TJ Graham

ATP Email: thomasgraham@fdle.state.fl.us

*BJM*  
*12K*  
*1/10/2020*





## INSTRUMENT PROCESSING SHEET

Agency Hardee County SOS/N 80-007160Florida Department of  
Law EnforcementDate In 05/13/2019 DI Completion Date \_\_\_\_\_☐ Ship ☐ P/U ☐ H/D ☒ CMI ☐ EE

Intake	Performed By <u>DP</u>	Quality Checks	Performed By <u>JP</u>	Flow Calibration	Performed By <u>JP/SP</u>																																																													
<input checked="" type="checkbox"/> Annual <input type="checkbox"/> Registration <input checked="" 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 checked="" type="checkbox"/> Power cord <input checked="" type="checkbox"/> Printer Cable <input checked="" type="checkbox"/> Static Bag <input checked="" type="checkbox"/> 12V DC Cable  Notes: _____ _____ _____  <b>Final Release Date</b> _____ _____ _____		<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>209</u> <input checked="" type="checkbox"/> Flow Verification (L/s) Flow Column # <u>ATP-103</u> 32 mm <u>.171</u> (.139 - .169) 36 mm <u>.187</u> (.156 - .190) 53 mm <u>.257</u> (.228 - .278) 103 mm <u>.523</u> (.447 - .547) <input type="checkbox"/> Barometric Pressure Check Gauge ID # _____ <input type="checkbox"/> Stability Checks <table border="1"><thead><tr><th>Simulator</th><th>Serial #</th><th>Lot #/Exp</th></tr></thead><tbody><tr><td>0.050</td><td></td><td></td></tr><tr><td>0.080</td><td></td><td></td></tr><tr><td>0.200</td><td></td><td></td></tr><tr><td>0.080 DGS</td><td>N/A</td><td></td></tr></tbody></table>	Simulator	Serial #	Lot #/Exp	0.050			0.080			0.200			0.080 DGS	N/A			Flow Column # <u>ATP-105</u> <input checked="" type="checkbox"/> 5L/min - 17mm <input checked="" type="checkbox"/> 15L/min - 53mm <input checked="" type="checkbox"/> 30L/min - 103mm <input checked="" type="checkbox"/> R-Value <u>213/214/214</u> <input checked="" type="checkbox"/> Post Calibration Verification (L/s) Flow Column # <u>ATP-103</u> 32 mm <u>.144/.144/.140</u> (.139 - .169) 36 mm <u>.160/.160/.160</u> (.156 - .190) 53 mm <u>.226/.226/.226</u> (.228 - .278) 103 mm <u>.488/.480/.492</u> (.447 - .547)  <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 _____ <input type="checkbox"/> Lab Temp °C _____ External Digital Therm. ID#: _____ <input type="checkbox"/> 34°C +/- .2 Serial #: _____ <input type="checkbox"/> 34°C +/- .2 Serial #: _____ <input type="checkbox"/> 34°C +/- .2 Serial #: _____																																															
Simulator	Serial #	Lot #/Exp																																																																
0.050																																																																		
0.080																																																																		
0.200																																																																		
0.080 DGS	N/A																																																																	
<b>Calibration Adjustment</b> Performed By _____		<b>Department Inspection</b> Performed By _____																																																																
Barometric Pressure Gauge _____ ID # _____ <table border="1"><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"><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			Barometric Pressure ID# _____ Gauge _____ Instrument _____ Mouth Alcohol Solution Lot # _____ Acetone Stock Solution Lot # _____ <table border="1"><thead><tr><th>Simulator</th><th>Serial Number</th></tr></thead><tbody><tr><td>0.000</td><td></td></tr><tr><td>Interferent</td><td></td></tr><tr><td>0.050</td><td></td></tr><tr><td>0.080</td><td></td></tr><tr><td>0.200</td><td></td></tr></tbody></table> <b>Attachments</b> <table border="1"><tbody><tr><td><input type="checkbox"/> Form 41 <input type="checkbox"/> Stability Checks <input type="checkbox"/> Calibration Certificate <input type="checkbox"/> Calibration Adjustment</td><td><input type="checkbox"/> Post-Stability Checks <input checked="" type="checkbox"/> Flow Calibration <input type="checkbox"/> Form 40 <input type="checkbox"/> Other _____</td></tr></tbody></table> <input type="checkbox"/> Instrument Complies with Chapter 11D-8, FAC <input type="checkbox"/> Instrument Does Not Comply with Chapter 11D-8, FAC <input type="checkbox"/> Return to/Place into Evidentiary Use <input checked="" type="checkbox"/> Remain Out of Evidentiary Use <input type="checkbox"/> Conduct an Agency Inspection Before Evidentiary Use  Tech Review / Date _____ Admin Review / Date _____			Simulator	Serial Number	0.000		Interferent		0.050		0.080		0.200		<input type="checkbox"/> Form 41 <input type="checkbox"/> Stability Checks <input type="checkbox"/> Calibration Certificate <input type="checkbox"/> Calibration Adjustment	<input type="checkbox"/> Post-Stability Checks <input checked="" type="checkbox"/> Flow Calibration <input type="checkbox"/> Form 40 <input type="checkbox"/> Other _____
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																																																																	
Simulator	Serial Number																																																																	
0.000																																																																		
Interferent																																																																		
0.050																																																																		
0.080																																																																		
0.200																																																																		
<input type="checkbox"/> Form 41 <input type="checkbox"/> Stability Checks <input type="checkbox"/> Calibration Certificate <input type="checkbox"/> Calibration Adjustment	<input type="checkbox"/> Post-Stability Checks <input checked="" type="checkbox"/> Flow Calibration <input type="checkbox"/> Form 40 <input type="checkbox"/> Other _____																																																																	
Notes/Suggested Service: <u>Please change the level 2 password to something unique. JP</u>  <u>Unable to obtain flow values within acceptable ranges. Two analysts attempted the calibration. The instrument will be returned to the repair facility. JP</u>																																																																		

JP  
1/10/2020

80-007160

5/21/19  
JD

INTOXILYZER 8000  
Instrument Initialization  
11:14 05/21/2019

HARDEE COUNTY SO  
Intoxilyzer - Alcohol Analyzer  
Model 8000  
05/21/2019  
Software: 8100.27

SN 80-007160

Flow Calibration #2  
5/21/19  
JD

Flow Rate Calibration\*\*\*\*\*  
1: Rate (Liters/min) = 7.000  
SORT(Diff) = 5  
2: Rate (Liters/min) = 15  
SORT(Diff) = 12.082  
3: Rate (Liters/min) = 30  
SORT(Diff) = 21.840  
Dependent Data Scale Factor = 100000 L/min  
Independent Data Scale Factor = 256  
Rounded Slope = 650  
Rounded Intercept = -604420  
Correlation = 0.99789

HARDEE COUNTY SO  
Intoxilyzer - Alcohol Analyzer  
Model 8000  
05/21/2019  
Software: 8100.27

SN 80-007160

Flow Calibration #2  
5/21/19  
JD

Flow Rate Calibration\*\*\*\*\*  
1: Rate (Liters/min) = 5  
SORT(Diff) = 7.141  
2: Rate (Liters/min) = 15  
SORT(Diff) = 12.121  
3: Rate (Liters/min) = 30  
SORT(Diff) = 21.633  
Dependent Data Scale Factor = 100000 L/min  
Independent Data Scale Factor = 256  
Rounded Slope = 666  
Rounded Intercept = -658118  
Correlation = 0.99798

HARDEE COUNTY SO  
Intoxilyzer - Alcohol Analyzer  
Model 8000  
05/21/2019  
Software: 8100.27

SN 80-007160

Flow Calibration #3  
5/21/19  
JD

Flow Rate Calibration\*\*\*\*\*  
1: Rate (Liters/min) = 5  
SORT(Diff) = 7.348  
2: Rate (Liters/min) = 15  
SORT(Diff) = 12.082  
3: Rate (Liters/min) = 30  
SORT(Diff) = 21.539  
Dependent Data Scale Factor = 100000 L/min  
Independent Data Scale Factor = 256  
Rounded Slope = 678  
Rounded Intercept = -704884  
Correlation = 0.99720

HARDEE COUNTY SO  
Intoxilyzer - Alcohol Analyzer  
Model 8000  
05/21/2019  
Software: 8100.27

SN 80-007160

Flow Calibration #4  
5/21/19  
JD

Flow Rate Calibration\*\*\*\*\*  
1: Rate (Liters/min) = 5  
SORT(Diff) = 7.070  
2: Rate (Liters/min) = 15  
SORT(Diff) = 12.082  
3: Rate (Liters/min) = 30  
SORT(Diff) = 21.539  
Dependent Data Scale Factor = 100000 L/min  
Independent Data Scale Factor = 256  
Rounded Slope = 668  
Rounded Intercept = -652017  
Correlation = 0.99816

#4  
R = 215  
32 = .144  
36 = .160  
53 = .226  
103 = .496

QDM  
TSK  
11/10/2020