



INSTRUMENT PROCESSING SHEET

Agency Homestead Police Department S/N 80-007380
 Florida Department of Law Enforcement Date In 8/17/2020 DI Completion Date 8/19/2020 ☒ Ship ☐ P/U ☐ H/D ☐ CMI ☐ EE

Intake Performed By <u>DERR</u> ☒ 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 <u>DERR</u> ☒ Breath Tube Screen ☒ Replace External O-Rings ☒ Instrument Set Up Verified ☒ R-Value <u>208</u> ☒ Flow Verification (L/s) Flow Column # <u>ATP 104</u> 32 mm <u>0.144</u> (.139 - .169) 36 mm <u>0.167</u> (.156 - .190) 53 mm <u>0.230</u> (.228 - .278) 103 mm <u>0.500</u> (.447 - .547) ☒ Barometric Pressure Check Gauge ID # <u>28663</u> ☒ 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 Alcohol Testing Program Digitally signed by FDLE Alcohol Testing Program Date: 2020.08.19 14:05:46 -04'00'		Maintenance Performed By _____ ☐ Battery Replacement ☐ Dry Gas Regulator Replacement ☐ Breath Tube Replacement ☐ Other _____ Temperature Checks Performed By <u>DERR</u> ☒ Lab Temp °C <u>22.30C</u> External Digital Therm. ID#: <u>300918</u> ☒ 34°C +/- .2 Serial #: <u>SD3967</u> ☒ 34°C +/- .2 Serial #: <u>SD3968</u> ☒ 34°C +/- .2 Serial #: <u>SD3969</u>																																																												
Calibration Adjustment 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> ☐ 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			Department Inspection Performed By <u>DERR</u> Barometric Pressure ID# <u>28199</u> Gauge <u>1012</u> Instrument <u>1012</u> Mouth Alcohol Solution Lot # <u>2019B</u> Acetone Stock Solution Lot # <u>2019A</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>SD3965</td></tr> <tr><td>Interferent</td><td>SD3966</td></tr> <tr><td>0.050</td><td>SD3967</td></tr> <tr><td>0.080</td><td>SD3968</td></tr> <tr><td>0.200</td><td>SD3969</td></tr> </tbody> </table>		Simulator	Serial Number	0.000	SD3965	Interferent	SD3966	0.050	SD3967	0.080	SD3968	0.200	SD3969
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Notes/Suggested Service: <u>New instrument</u> _____ _____ _____ _____ _____		Attachments ☒ Form 41 ☐ Post-Stability Checks ☒ Stability Checks ☐ Flow Calibration ☒ Calibration Certificate ☐ Form 40 ☐ Calibration Adjustment ☒ Other <u>Form 47</u>																																																												
☒ 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		 2020.08.19 13:11:13 -04'00' Tech Review / Date 2020.08.19 14:00:38 -04'00' Admin Review / Date																																																												

Florida Department of Law Enforcement Alcohol Testing Program

DEPARTMENT INSPECTION REPORT - INTOXILYZER 8000

Agency: HOMESTEAD PD
Time of Inspection: 09:19

Date of Inspection: 08/19/2020

Serial Number: 80-007380
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#:201905A 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#:AG003005 Exp: 01/30/2022
0.000	0.048	0.078	0.198	0.080
0.000	0.048	0.078	0.198	0.080
0.000	0.048	0.078	0.198	0.081
0.000	0.048	0.078	0.198	0.080
0.000	0.048	0.078	0.199	0.081
0.000	0.048	0.078	0.199	0.081
0.000	0.048	0.078	0.198	0.080
0.000	0.048	0.078	0.199	0.080
0.000	0.048	0.078	0.200	0.081
0.000	0.048	0.078	0.200	0.081

Standard Deviations	0.0000	0.0000	0.0008	0.0005
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Average Standard Deviation of 0.05, 0.08 and 0.20 g/210L Tests: 0.0003 Number of Simulators Used: 5

Remarks:

2020.08.19
13:11:32
-04'00'

2020.08.19
14:01:07
-04'00'

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.

David E Reyes-Rivera DAVID E REYES-RIVERA
Signature and Printed Name

08/19/2020
Date

Type of Test	Serial Number	Agency	Date	Performed By
Stabilities	80-007380	Homestead Police Department	8/19/2020	DERR <i>ful</i>

0.05g/210L	0.08g/210L	0.20g/210L	DGS 0.08g/210L																																																																																																																																																
0.047 to 0.053	0.077 to 0.083	0.194 to 0.206	0.077 to 0.083																																																																																																																																																
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-04'00'

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9 13:11:53
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Florida Department of
Law Enforcement

REQUEST FOR REGISTRATION

MAKE AND MODEL OF INSTRUMENT: Intoxilyzer 8000

SERIAL NUMBER: 80-007380

OWNING AGENCY: Homestead Police Department

DATE OF DEPARTMENT INSPECTION: 8/19/2020

AGENCY INSPECTOR: Officer Raul Perez

ADDRESS: 45 NE 1ST Avenue

CITY, STATE, ZIP: Homestead, Florida 33030

TELEPHONE NUMBER: (305) 247-1535

FAX NUMBER: _____

EMAIL ADDRESS (if available): raul.perez@homesteadpolice.com

For Program Office Use Only:

- ☐ Registration Issued *BK* 2020.08.19 14:03:12 -04'00'
- ☒ Instrument Added to Evidentiary Instrument Database *SP*
- ☒ Instrument Added to Monthly Statistics Database *SP*
- ☒ Contact Information Added to Instrument Database *SP*



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

Calibration Certificate

This is to certify the calibration of Intoxilyzer 8000 serial number 80-007380, manufactured by CMI, Inc. was calibrated in accordance with FDLE/ATP Form 36 - Department Inspection Procedures - Intoxilyzer 8000.

Serial Number:	<u>80-007380</u>	UNCERTAINTY* $\pm$	
Owning Agency:	<u>HOMESTEAD PD</u>	0.050 g/ 210 L	0.004
Calibration Date:	<u>08/19/2020</u>	0.080 g/ 210 L	0.005
Calibration Time:	<u>09:19</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 ± 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.

08/19/2020

Date


DAVID E REYES-RIVERA,

Department Inspector

FDLE/ATP Form 69 April 2020

Issuing Authority: Alcohol Testing Program

Service • Integrity • Respect • Quality

Page 1 of 1

BK
2020.08.19
14:05:17
-04'00'


2020.08.19
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