## Florida Department of Law Enforcement Alcohol Testing Program

## AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: INDIALANTIC P.D. Time of Inspection: 14:48

Date of Inspection: 09/27/2021

Serial Number: 80-001006

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	Yes	

Alcohol Free Test (g/210L)	0.05g/210L Test (g/210L) Lot#:201910D Exp: 10/22/2021	0.08g/210L Test (g/210L) Lot#:202007A Exp: 07/21/2022	0.20g/210L Test (g/210L) Lot#:202005A Exp: 05/12/2022	0.08 g/210L Dry Gas Std Test (g/210L) Lot*:30219080A4 Exp: 01/05/2022		
0.000	0.046	0.078	0.201	0.079		
0.000	0.047	0.078	0.203	0.079		
0.000	0.047	0.079	0.202	0.080		

Number	OF	Simu	lators	IIsed:	4	

Remarks:

A F / M A: Range Exceeded.

To much mouth alcohol used during test

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

#12 ZACHARY A GIBSON
Signature and Printed Name

00/27/2021



## **AGENCY INSPECTION AND OTHER ELECTRONIC DATA REVIEW**

Agency: Indialantic PD Instrument Serial Number: 80-001006 **AGENCY INSPECTION DATA REVIEW** Agency Inspector: Zachary Gibson Date of Inspection: 09-27-2021 Time of Inspection: 14:48 **Agency Inspection Discrepancy:** Incomplete Untimely/Not Received **Erroneous Information** Procedural П Other Agency Inspection Not Conducted or Records regarding Agency Inspection have not been uploaded. Lot Number □ Expiration Date for \_\_\_\_\_g/ 210L □ Alcohol Reference Solution □ Dry Gas Standard is □ Incorrect □ Expired. FDLE/ATP Form 39 states in part, "If a test must be repeated, the REASON must be entered when prompted and recorded in the Remarks section of FDLE/ATP Form 40 Agency Inspection Report – Intoxilyzer 8000. The KEASON for repeating the following test(s): OR the Possible Cause and Corrective Action Taken on the following test(s) was not recorded: Mouth Alcohol Test ☐ Alcohol Free Test ☐ Interferent Detect Test □ 0.05 g/210L Test ☐ 0.08 g/210L Test ☐ 0.20 g/210L Test □ 0.08 g/210L Dry Gas Standard Test FDLE/ATP Form 39 states in part, "If the instrument does not comply with the requirements of Chapter 11D-8, FAC, remove the instrument from service and notify the Department Inspector." The Department Inspector was not notified. However, the issue was satisfactorily corrected and the repeated Agency Inspection complies with the requirements of Chapter 11D-8, FAC. The Department Inspector was not notified. However, the repeated Agency Inspection does not comply with the requirements of Chapter 11D-8, FAC and the instrument was correctly removed from evidentiary use. The Department Inspector was not notified. The repeated Agency Inspection does not comply with the requirements of Chapter 11D-8, FAC and the instrument was not removed from evidentiary use. The Agency Inspection is noted as "Complies" when it does not comply with the requirements of Chapter 11D-8, FAC. Other: OTHER ELECTRONIC DATA REVIEW Comments: **Login Records** Date: **Cylinder Change Records Control Test Records** Date: **Diagnostic Check Records** Date: **CORRECTIVE ACTION** Record hand-written amendments on the FDLE/ATP Form 40, Agency Inspection Report, initial and date the amendments, mark the report "AMENDED", and forward a copy to the Department Inspector by \_\_\_ Provide a written explanation regarding the referenced item(s) to the Department Inspector by (Date). Upload the Agency Inspection(s). Remove the instrument from evidentiary use until otherwise directed by the Department. No action required Other: Israel Soto Digitally signed by Israel Soto

Signature of Alcohol Testing Program Staff Member

Date: 2021.11.15 10:57:32 -05'00'

11/15/2021

Date