

AGENCY INSPECTION AND OTHER ELECTRONIC DATA REVIEW

Agency: Pinellas CSO Instrument Serial Number: 80-001273

AGENCY INSPE	CTION DATA REVIE	EW .							
Agency Inspect	or: Malcolm Deane				Date of	Inspection: 1	10/28/20	<mark>21</mark>	Time of Inspection: 19:23:47
Agency Inspect	ion Discrepancy:		complete ocedural		ntimely/No ther	ot Received	×	Erroneou	<mark>is Information</mark>
☐ Agency Inst	spection Not Condu	icted or Re	ecords rega	arding Ag	ency Insp	ection have	not beer	uploaded	l.
☐ Lot Number	er □Expiration Date	for	_g/ 210L □	Alcohol F	Reference	Solution □D	ry Gas	Standard is	s □Incorrect □Expired.
Remarks s test(s); OF ☐ Alc		P Form 40 ause and	Agency Ins Corrective Mouth Al	spection Action Ta cohol Te	Report – li aken on the st □	ntoxilyzer 80	00. The est(s) w Test	□REAS0 as not reco	ompted and recorded in the DN for repeating the following orded: erferent Detect Test 18 g/210L Dry Gas Standard Test
instrumen □ The Ins □ The req □ The	at from service and in the Department Inspection complies were Department Inspection of Chapt	notify the ctor was notify the record the country the	Departmen not notified. quirements not notified. FAC and the notified.	t Inspector However of Chaptor However e instrum The rep	or." er, the issu er 11D-8, F er, the repe nent was c eated Age	e was satisfa AC. ated Agency orrectly remoncy Inspection	actorily / Inspec oved fro on does	corrected tion does om evident	ter 11D-8, FAC, remove the and the repeated Agency not comply with the iary use. ly with the requirements of
☐ The Agend	y Inspection is note	ed as "Cor	mplies" wh	en it does	s not comp	ly with the r	equirem	ents of Cl	napter 11D-8, FAC.
□ Other:									
OTUED EI ECTE	RONIC DATA REVIE	w							
☐ Login Rec		VV	Commen	ts:					
Date:	Jido		The lot no	<mark>umber an</mark>					hol Reference Solution was
☐ Cylinder C	hange Records		<u>mistyped</u>	<u>. Please</u>	see below	for corrective	<u>/e actio</u>	<u>1.</u>	
☐ Control Te	st Records								
☐ Diagnostic	Check Records								
CORRECTIVE A	CTION								
⊠ Record ha								nitial and	date the amendments, mark
☐ Provide a ☐ Upload the	written explanation Agency Inspection e instrument from e required	regarding (s).	the referer	nced item	(s) to the I	Department I	nspecto	or by	_(Date).
	Gutschov			aylor Guts 04:40 -05'0				11/27/202 Date	

Florida Department of Law Enforcement Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: PINELLAS COUNTY SO Time of Inspection: 19:23

Date of Inspection: 10/28/2021

Serial Number: 80-001273

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#:202101C Exp: 01/12/2023	0.08g/210L Test (g/210L) Lot#:202007A Exp: 07/21/2022	0.20g/210L Test (g/210L) 6B MD Lot#:202105D Exp: -05/22/2023	0.08 g/210L Dry Gas Std Test (g/210L) Lot#:AG106803 Exp: 03/09/2023
0.000	0.048	0.078	0.195	0.079
0.000	0.048	0.078	0.195	0.079
0.000	0.048	0.078	0.195	0.079

Number	of	Simula	tors	Used:	5

Remarks:

AMENDED; HUMAN ERROR TYPO (.20 LOT + DATE)

ON

12-15-2021

The	above	instrument	complies	(X)	does	not	comply	()	with	Chapter	11D-8	3,	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.

M. Deane Signature and Printed Name

> 10/28/2021 Date

Florida Department of Law Enforcement Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: PINELLAS COUNTY SO Time of Inspection: 19:30

Date of Inspection: 11/24/2021

Serial Number: 80-001273

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#:202101C Exp: 01/12/2023	0.08g/210L Test (g/210L) Lot#:202007A Exp: 07/21/2022	0.20g/210L Test (g/210L) 6B MD Lot#:202105B Exp: 05/22/2023	0.08 g/210L Dry Gas Std Test (g/210L) Lot#:AG106803 Exp: 03/09/2023
0.000	0.049	0.079	0.195	0.080
0.000	0.049	0.079	0.195	0.079
0.000	0.049	0.079	0.196	0.079

Number of Simulators Used: 5

Remarks:

AMENDED! HUMAN TYPO ERROR (. 20 LOT + DATE)

12-15-2021

The above	instru	ment cor	plies	(X)	does not	comply	() with Ch	apter 11	D-8, FAC.				
								Enforcement of Chapter			Permit	and	that]
					m.	Dear	ne	M nted Name	DEANE					
					Signat	ure and	d Pri	nted Name						

11/24/2021 Date

Florida Department of Law Enforcement Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: PINELLAS COUNTY SO Time of Inspection: 20:57

Date of Inspection: 12/09/2021

Serial Number: 80-001273

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#:202101C Exp: 01/12/2023	0.08g/210L Test (g/210L) Lot#:202007A Exp: 07/21/2022	0.20g/210L Test (g/210L) 6B MD Lot#:202105B Exp: 05/22/2023	0.08 g/210L Dry Gas Std Test (g/210L) Lot#:AG106803 Exp: 03/09/2023
0.000	0.048	0.079	0.196	0.079
0.000	0.049	0.079	0.196	0.079
0.000	0.049	0.079	0.197	0.080

Number of Simulators Used: 5

Remarks: AMENDED; HUMAN TYPO ERROR (= 20 LOT + DATE)

The above instrument complies ($\,$ X $\,$) does not comply ($\,$) with Chapter 11D-8, FAC.

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.

Signature and Printed Name

gill date dita I I I I Cod

12/09/2021 Date