

	Al	gency He	rnando C	cso	_				S/N 8	0-00081	2	
Florida Dep Law Enforc		ate in <u>4/2</u>	1/2021		Ol Completio	n Date <u>4/23/2</u>	021	Ship	□P/U	□H/D	□смі	<b>□</b> EE
Intake	By	TDG	Qualk	ty Ch	ecks By	DG Date 4/23	/2021	Flow Calib	ration	By_TDG	Date 4/2	3/2021
Annual			<b>■</b> Breat	h Tu	be Screen			Flow Colur				
□ Registrat	ion		Repla	ice E	xternal O-Rin	igs		■ 5L/	min – 1	7mm		
Return fr	om CMI / EE		Instru	ımer	nt Set Up Ver	ified			/min –			
Visual Inspe	ations		R-Val	12			■ 30L/min – 103mm					
Case	Handle		Flow	Verif	ication (L/s)			R-Value 202 Post Calibration Verification (L/s)				
■ Case  Reyboard		Shalf	Flow Co	lumn	# ATP101							
Feet	Breath T		32 mn	n_0.2	214	(.139 -	.169)	Flow Colum				
Ports	Screws T		36 mn	n <u>0.</u> 2	226	(.156 -	.190)	32 mm	0.152		(.139	169)
6557		-	53 mn	n <u>0.</u> 2	292	(.228 -	.278)	36 mm	0.164		(.156	190)
Test to the second seco	ment/ Accessorie		103 mr	n <u>0.</u>	527	(.447547)		53 mm	0.238		(.228	278)
Power co					c Pressure C	heck		103 mm	0.507		(.447	547)
Static Bag	Gauge II	_										
Notes:	Stabil	_				Maintenar			Ву	San San		
			Simulat	or	Serial #	Lot #/Exp	100	☐ Battery				
			0.050			202010	^	Dry Gas				
-			0.030		MP5092	10/05/20		☐ Breath 1	ube Re	placemer	nt	
			0.080	_		202010		Other_	d	N EX COLUMN	0 TO	0
			0.000		MP5093	10/05/20		Di Temp. C	Temp <sup>o</sup>		22.60	
			0.200			202010		External Di				
			5.255		MP5094					Serial #:		
-			0.000 0	CE	21/4	10/06/20:	_			Serial #:		
			0.080 D	65	N/A	AG02670				Serial #:		
					1	09/23/20	22	- 34		Jerioi W.	1711 000-	_
	Adjustment			. 8	Ву	Department			FORUM	1	By TD	)G
	Pressure Gauge _	-	ID#			Barometric Pressure ID# 28663 Gauge 1019 Instrument 1017						
Simulator	Serial #	Lot#		_	piration					t <u>1017</u>		
0.000		N/A	N/A		<u>A</u>	Acetone Stock Solut		ution Lot # 2019-B				
0.040		-									-	
0.100							Simulator		Serial Number SD3963			16 15
0.200						0.000 Interferent		SD3963 SD1017 MP5092			-	
0.300						0.050						
0.080 DGS	N/A				0.080		MP5093					
☐ Post Calib	ration Adjustme	nt Stability	Checks	-1		0.200				MP50	094	
Simulator		Lot#				Attachments		MES RATE	PERSONAL PROPERTY OF THE PROPE			
0.050				1		Form 41		☐ Post-Stability Checks				
0.080				1		Stability 0	Checks		Flow Calibration		- 1	
0.200				1		Calibratio	n Cert	ificate	☐ For	m 40		
0.080 DGS	N/A	1		t		☐ Calibratio	n Adju	stment	Otl	ner		
Notes/Sugg	ested Service:					instrume Instrume						AC
						Return to	/Place	into Eviden	tlary U			
								ncy inspecti				je
						Michael D Hagley 1	021.04.2 1:02:02 -	9 04'00'	8		05.0 19:04	
						Tech Review			Admir	Review		

Time of Tech	Serial Number	Agency		Date Performed By	
Stabilities	21,8000-08	+		202/22/40 TDG TDG	
0.05=/2101		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 🗸 ≤0.003 of Wet	7
				590	
-ERAMOD COUNTY S.D. INTOXILYZET - ALCONO: Gnalyzer Model 8000 24234222: Software: 8110.27	Fer 171 171 5N 80-1016912 170 174	-ERACNOD COUNTY S.D. Intoxilyzen - Alconoi Analyzen Kocei 8028 Potsatzi Sotware: 8188.27	-Eqwayoo couniy s.c.   intoxilyzer	-Equango County S.O. intoxilyzan - Alconol Amelyzen Model 8000 14/23/262: Software: 8191.27	
155.  27.11  21.83-M  2017.01 = 1.052  21.13	다	71- 51-30  71- 51-30	Sec	#1 Blank	
Comments:					

# Flow Calibration 80-000812 716 4/23/2021

891.63\_U<u>672372561</u>

HERNANDO CO NTY S.O.
Intoxijyzer - Alconoi Analyzer
Model 800 SN 80-000812
04/23/2021
Software: 8100.27

Flow Rate Calibration\*\*\*\*\*\*\*\*

1: Rate [Lhers/min] = 5
SOR (Diff) , = 7.000

2: Rate (Liters/min) = 15
SOR (Diff) ) = 11.53]
3: Rate (Liters/min) = 30
SORT(Diff) ) = 20.688
Dependent Data Scale Factor = 10000. L/min
I depende t Lata Scale Factor = 256
Rounded Slope = 703
Rounded intercept = -685353
Correlatio = 0.55698

# Florida Department of Law Enforcement Alcohol Testing Program

## DEPARTMENT INSPECTION REPORT - INTOXILYZER 8000

Agency: HERNANDO COUNTY S.O. Time of Inspection: 13:19

Date of Inspection: 04/23/2021

Serial Number: 80-000812

Software: 8100.27

0.0005

Check or Test	YES	NO	Check or Test	YES	NO
Diagnostic Check			Date and/or Time Adjusted		
(Pre-Inspection): OK	Yes				No
Minimum Sample Volume			Barometric Pressure Sensor		
Check: OK	Yes		Check: OK	Yes	
Alcohol Free Subject			Mouth Alcohol Test:		
Test: 0.000	Yes		Slope Not Met	Yes	
Interferent Detect Test:			Diagnostic Check		
Interferent Detect	Yes		(Post-Inspection): OK	Yes	

Alcohol Free Test (g/210L)	0.05g/210L Test (g/210L) Lot#:202010A Exp: 10/05/2022	0.08g/210L Test (g/210L) Lot#:202010B Exp: 10/05/2022	0.20g/210L Test (g/210L) Lot#:202010D Exp: 10/05/2022	0.08 g/210L Dry Gas Std Test (g/210L) Lot#:AG026705 Exp: 09/23/2022	
0.000	0.050	0.082	0.201	0.080	
0.000	0.052	0.082	0.201	0.079	
0.000	0.051	0.081	0.201	0.080	
0.000	0.051	0.080	0.201	0.079	
0.000	0.051	0.079	0.199	0.079	
0.000	0.051	0.079	0.198	0.080	
0.000	0.051	0.080	0.198	0.080	
0.000	0.051	0.079	0.200	0.079	
0.000	0.051	0.080	0.201	0.080	
0.000	0.051	0.079	0.202	0.080	

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

0.0011

The above instrument complies ( X ) 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.

TAYLOR D GUTSCHOW Signature and Printed Name

0.0013

\_

04/23/2021 Date

Standard Deviations

0.0004



# **Calibration Certificate**

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

This is to certify the calibration of Intoxilyzer 8000 serial number 80-000812, manufactured by CMI, Inc. was calibrated in accordance with FDLE/ATP Form 36 - Department Inspection Procedures - Intoxilyzer 8000.

80-000812	INCERTAINTY* +	
	T I INTERIOR I	
NANDO COUNTY S.O.	$0.050  \mathrm{g}/210  \mathrm{L}$	0.005
04/23/2021	0.080 g/ 210 L	0.004
	0.200 g/210 L	0.007
	0.080 g/210 L Dry Gas Control 0.005	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).

000

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.

Date

04/23/2021

TAYLOR D GUTSCHOW, Department Inspector

Service Integrity Respect - Quality

Issuing Authority: Alcohol Testing Program

FDLE/ATP Form 69 January 2021

Page 1 of 1



### INSTRUMENT PROCESSING SHEET

Agency Hernando County Sheriff's Office S/N 80-000812 Florida Department of Date In 1/26/2021 DI Completion Date 2/1/2021 Ship □P/U □H/D □CMI Law Enforcement Flow Calibration By DERR Date-By DERRDate 2/1/21 Intake By DERR Quality Checks Annual Flow Column # ATP106 2/1/2021 Breath Tube Screen DERR ☐ Registration Replace External O-Rings ■ 5L/min – 17mm ☐ Return from CMI / EE Instrument Set Up Verified 15L/min - 53mm R-Value 185 30L/min - 103mm Visual Inspection: Flow Verification (L/s) R-Value 184 Case Handle Flow Column # ATP104 Post Calibration Verification (L/s) Keyboard Dry Gas Shelf Flow Column # ATP-106-104 DELR 3/1/21 32 mm 0.139 (.139 - .169)Feet Breath Tube 36 mm 0.156 32 mm 0.136/0.152 (.139 - .169)(.156 - .190)Ports Screws Tight 53 mm 0.218 36 mm 0.156/0.175 (.156 - .190)(.228 - .278)Other Equipment/ Accessories: 53 mm 0.230/0.242 103 mm 0.484 (.447 - .547)(.228 - .278)☐ Power cord ☐ Printer Cable ■ Barometric Pressure Check 103 mm 0.523/0.520 (.447 - .547)☐ Static Bag ☐ 12V DC Cable Gauge ID # 28663 Maintenance By Stability Checks Notes: Battery Replacement Simulator Serial # Lot #/Exp ☐ Dry Gas Regulator Replacement 0.050 202010A ☐ Breath Tube Replacement SD3967 10/05/2022 ☐ Other 0.080 202010B By DERR DI Temp. Checks SD3968 10/05/2022 22.87C ■ Lab Temp °C 0.200 202010D External Digital Therm. ID#: 300918 SD3969 ■ 34°C +-.2 Serial #: SD3967 10/06/2022 ■ 34°C +-.2 Serial #: SD3968 0.080 DGS N/A AG003005 ■ 34°C +-.2 Serial #: SD3969 01/30/2022 By DERR **Calibration Adjustment** By Department Inspection Barometric Pressure ID# 68639 Barometric Pressure Gauge ID# Instrument 1010 Simulator Serial # Expiration Gauge 1012 Lot# 0.000 N/A N/A Mouth Alcohol Solution Lot # 2020-A 0.040 Acetone Stock Solution Lot # 2020-A 0.100 Simulator Serial Number 0.000 SD3965 0.200 SD3966 Interferent 0.300 0.050 SD3967 0.080 DGS N/A 0.080 SD3968 0.200 SD3969 Post Calibration Adjustment Stability Checks **Attachments** Simulator Serial # Lot# Expiration 0.050 Form 41 ☐ Post-Stability Checks 0.080 Stability Checks Flow Calibration Calibration Certificate ☐ Form 40 0.200 Calibration Adjustment Other 0.080 DGS Instrument Complies with Chapter 11D-8, FAC Notes/Suggested Service: I had to do two flow calibrations ☐ Instrument Does Not Comply with Chapter 11D-8, FAC to bring the values closer to nominal. The date in the flow calibration box does not fit, it should read 2/1/21. Return to/Place into Evidentiary Use DERR 2/1/21. Corrected the Flow Column Number as Remain Out of Evidentiary Use per Admin Review 2/15/2021 DERR Corrected Conduct an Agency Inspection Before Evidentiary Use flow column # 45 DEC Admin 2021.03. 2021 DER MAR 04

Israel Soto Date: 2021.03.02 16:14:20

Tech Review / Date

15:50:36

Admin Review 90 Date



# **Calibration Certificate**

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

This is to certify the calibration of Intoxilyzer 8000 serial number 80-000812, manufactured by CMI, Inc. was calibrated in accordance with FDLE/ATP Form 36 - Department Inspection Procedures - Intoxilyzer 8000.

Serial Number:	80-00812	UNCERTAINTY* ±
Owning Agency:	HERNANDO COUNTY S.O.	$0.050  \mathrm{g}/210  \mathrm{L}$
Calibration Date:	02/01/2021	0.080 g/ 210 L
Calibration Time:	14:03	0.200 g/ 210 L
		0.080 g/ 210 L Dry Gas Control

0.004 0.005

0.007 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.

# IRACEABILITY 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 MIST. Thermometer temperatures are checked with MIST 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.

72/01/2027 Date

Department Inspector

Service Integrity Respect Ouality

Issuing Authority: Alcohol Testing Program

FDLE/ATP Form 69 January 2021

Page 1 of 1

# Florida Department of Law Enforcement Alcohol Testing Program

## DEPARTMENT INSPECTION REPORT - INTOXILYZER 8000

Agency: HERNANDO COUNTY S.O. Time of Inspection: 14:03

Date of Inspection: 02/01/2021

Serial Number: 80-000812

Software: 8100.27

Check or Test	YES	NO	Check or Test	YES	ИО
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: 10/05/2022	0.08g/210L Test (g/210L) Lot#:202010B Exp: 10/05/2022	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	0.048	0.079	0.198	0.080
0.000	0.050	0.081	0.201	0.081
0.000	0.050	0.081	0.202	0.080
0.000	0.050	0.080	0.201	0.081
0.000	0.051	0.080	0.203	0.081
0.000	0.050	0.081	0.201	0.080
0.000	0.050	0.080	0.201	0.081
0.000	0.050	0.081	0.201	0.080
0.000	0.051	0.082	0.201	0.081
0.000	0.051	0.081	0.201	0.081
				T

0.0012 0.0008 Standard Deviations | 0.0008 Average Standard Deviation of 0.05, 0.08 and 0.20 g/210L Tests: 0.0008 Number of Simulators Used: 5

Remarks:

The above instrument complies (	X ) 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.
I certify that I performed this	Signature and Print	DAVID E	REYES-RIVERA

02/01/2021

Performed By DERR ////	DGS 0.08g/210l.	
Date   2/1/2021	0.20g/210L 0.194 to 0.206	
nber   Agency   Hernando County Sheriff's Office	0.08g/210L 0.077 to 0.083	
Type of Test Serial Number Stabilities 80-000812	0.05g/210L 0.047 to 0.053 [V]	M

Intoxilyzer - A.coho. Ahalyzer Model 8000 -SPACE CLAY S.C. 02/11/2021 Software: 8100.07 SN 83-121812 

Flow Rate Calibrationxxxxxxx

1. Rate (LiterS/Lin) = 5
 SURT(OIFF) > 7.414

2. Rate (LiterS/Min) = 15
 SURT(OIFF) > 11.971

3. Rate (LiterS/Min) = 39
 CORT(OIFF) > 20.516
 Commoder Data Scale Factor = 100000 L/Min
 Independent Data Scale Factor = 256 Rounded Stape = 736 Rounded Intercept = -833587 Constation = 0.99772

Agency: Hernando County Sheriff's Office Flow Calibration 80-000812 2/1/2021 DERR Date: SE By:

Rounded intercept = -57,86 Correlation = 0,99999

## **Return Material Authorization**

<u>S</u>	ship to: ✓ CMI, Inc.
	☐ Enforcement Electronics
Shipment to repair facility authorized by: Brad C	Collito on 11/04/2021
<u>Items Returned:</u> Instrument ☑ Supplies	
Instrument Model: Intoxilyzer 8000	Serial Number: 80-000812
Bill To Address:	Ship to Address:
Hernando County Sheriff's Office	Florida Department of Law Enforcement
Attn: Brad Collito	Fort Myers Regional Operations Center
16425 Springhill Drive	Attn: Taylor Gutschow (Alcohol Testing)
Brooksville, FL 34601	4700 Terminal Drive, Suite 1
	Fort Myers, FL 33907
N. A.	
Reason for Return: Instrument will not power on. Was unable to ev	valuate if there are records remaining on the
instrument and was also unable to attempt uplo	
	3
Please choose one of the following options:	
☐ 1. I, authorize	all repairs.
☐ 2. I, authorize	repairs up to \$
✓ 3. I require an estimate <u>BEFORE</u> any repa	irs will be authorized and/ or conducted.
Please contact: Name: Brad Collito	
Phone #: <u>352-544-2334</u> Er	mail: bc <mark>ollito@hernandosheriff.org</mark>
ATP Contact Name: Taylor Gutschow	ATP Email: TaylorGutschow@fdle.state.fl.us



## INSTRUMENT PROCESSING SHEET

WILL STATE		rnando CSO				s/n <u>80-000812</u>					
lorida Dep aw Enforc		Date In <u>10/</u>	20/2021	DI C	Completi	on Date		■Ship	□P/U □H/D	■СМІ	<b>□</b> EE
Intake		By TDG	Qualit	y Chec	ks By_	D	ate	Flow Calib	oration By	Date	
■ 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: Al Collito reports that the instrument will not power on and			□ Breath Tube Screen □ Replace External O-Ring □ Instrument Set Up Verif □ R-Value □ Flow Verification (L/s) Flow Column #  32 mm 0.  36 mm 0.  53 mm 0.  103 mm 0. □ Barometric Pressure Ch Gauge ID # □ Stability Checks  Simulator Serial #			ings erified ) Check	(.139169) (.156190) (.228278) (.447547)	32 mm(.1392 36 mm(.1562			169) 190) 278) 547)
			Simulat	or S	erial#	Lot #	/Exp		•		
he cannot conduct the monthly inspection. Al filled out a blank Form 40 and submitted with the			0.050		(WEInth				Tube Replacemer		;
instrument	•		0.080					DI Temp.	Checks	Ву	
			0.200 0.080 D	GS	N/A			External D  34 <sup>o</sup> 34 <sup>o</sup>	Temp <sup>o</sup> C igital Therm. ID#: 'C +2 Serial #: _ 'C +2 Serial #: _ 'C +2 Serial #: _		
Callbration				Ву_						Ву	
	Pressure Gauge		ID #				netric Pressure				
Simulator 0.000	Serial #	Lot #			ation	_			strument		
0.040		19/6	N/A			Mouth Alcohol Solution Lot # Acetone Stock Solution Lot #					
0.100				+			lator	IOII LOC#	Serial Number		MISINA
						0.000			Serial Number		
0.200				1		Interf					
0.300						0.050					
0.080 DGS	N/A					0.080					
Post Calib	ration Adjustm	ent Stability	/ Checks			0.200					
Simulator	Serial #	Lot #		Expir	ation	Atta	chments				- V - 0
0.050				771		D Fo	or <mark>m 41</mark>		☐ Post-Stabilit	y Checks	
0.080						11	a <mark>bility Checks</mark>		☐ Flow Calibra	tion	
0.200						11	al <mark>i</mark> bration Cert		Form 40		
0.080 DGS	N/A					<b>u</b> ca	al <mark>i</mark> bration Adju	ıstment	Other		
	ested Service: <u>C</u> end to repair (1		instrume	ent to p	ower	□ R	strument Doo eturn to/Place emain Out of	es Not Comp e into Evide Evidentiary	the later than the la	11D-8, F/	
						Tech	n Review / Da	nte .	Admin Review	/ Date	

# Florida Department of Law Enforcement Alcohol Testing Program

## AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency:	HERNANDO	COUNTY S.O.
---------	----------	-------------

Serial Number: 80-000812

Number of Simulators Used: 0

Time of Inspection: 12:45 Date of Inspection: 10/18/2021

Software: 8100.27

CHECK OR TEST	YES	NO
Date and/or Time Adjusted	100	X
Diagnostic Check (Pre-Inspection): OK		х
Alcohol Free Subject Test: 0.000		х
Mouth Alcohol Test: Slope Not Met		х
Interferent Detect Test: Interferent Detect		x
Diagnostic Check (Post-Inspection): OK		х

Alcohol Free Test (g/210L)	0.05g/210L Test (g/210L) Lot#: Exp:	0.08g/210L Test (g/210L) Lot#: Exp:	0.20g/210L Test (g/210L) Lot#: Exp:	0.08 g/210L Dry Gas Std Test (g/210L) Lot#: Exp:

Remarks:	Instrument will not power on. Agency Inspection was not able to be completed due to being unable to power on
	instrument will not power on. Agency inspection was not able to be completed due to being unable to power on
	Instrument will be shipped to FDLE and then on to CMI, Inc. for diagnosis/ repair.

The above instrument complies () does not comply (	) with Chapter 11D-8, FAC.				
I certify that I hold a valid Florida Department of La performed this inspection in accordance with the provision					
Depu	ty Brad Collito #1193				
Signature and Printed Name					