

DEPARTMENT INSPECTOR FIELD NOTES

Agency: Seminole County Sheriff's Office Instrument Serial Number: n/a				
Department Inspection:		Agency Inspection/Ag	gency Contact:	Records Audit:
	Registration Request for Registration Attached Annual Inspection After Repair Other:	at for Registration Attached ☐ Agency Inspection Notification ☐ Agency Contact		The following records were audited: ☐ Agency Inspection Reports ☐ Breath Test Instrument Repair/Maintenance Records ☐ Instrument Registration
	Barometric Pressure: Gauge	Date of Notification/C	ontact:	☑ Dry Gas Standard Certificate(s) of Analysis☑ Other:
_	Instrument Instrument Set Up Verified	Agency Inspector: Keith Betham		Other:
Coi	nments:			
Inst	rument/Area:	Equipment:		Supplies:
	Clean/Dry Secure Limited Access Other:	 ☑ Proper Number of Simulators ☐ Checked Simulators for Air Leak Resistant Seal and Proper Temperature ☑ Class A Glassware 		 □ Distilled/Deionized Water ☑ Mouth Alcohol Solution ☑ Acetone Stock Solution ☑ Alcohol Reference Solution ☑ Dry Gas Standard ☑ Mouth Pieces
Comments: Unable to evaluate the distilled/deionized water since it was kept in a different part of the building.				
Action:				
	☐ Instrument Complies with Chapter 11D-8, FAC		Comments: Discussed current state of COBRA uploads and	
	Return to/Place into Évidentiary Use Remove from Evidentiary Use		best practices. Took two instruments with me for	
			their annual inspection. Compliant with Chapter	
Remain Out of Evidentiary Use Conduct an Agency Inspection Before Evidentiary Use		11D-8, FAC.		
Taylor Gutschow Digitally signed by Taylor Gutschow Date: 2021.09.03 09:49:48 - 04'00'			9/3/2021	
Signature of Alcohol Testing Program Staff Member Original – FDLE			Date Copy – Agency	