FDLE
Florida Department of Law Enforcement

AGENCY INSPECTION AND OTHER
ELECTRONIC DATA REVIEW

Agency: Lakeland Police Department   **Instrument Serial Number: 80-001057**

AGENCY INSPECTION DATA REVIEW

Agency Inspector: Camilo Almeida | **Date of Inspection: 06/27/2022** | **Time of Inspection: 13:02:25**

Agency Inspection Discrepancy: ☐ Incomplete ☐ Untimely/Not Received ☒ Erroneous Information
☐ Procedural ☐ Other _____

☐ **Agency Inspection Not Conducted or Records regarding Agency Inspection have not been uploaded.**

☒ **Lot Number** ☐Expiration Date for **0.50 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 ☐REASON for repeating the following test(s); OR the ☐ Possible Cause and Corrective Action Taken on the following test(s) was not recorded:
  ☐ Alcohol Free Subject Test ☐ 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

☐ **Login Records**
   Date: _____

☐ **Cylinder Change Records**
   Date: _____

☐ **Control Test Records**
   Date: _____

☐ **Diagnostic Check Records**
   Date: _____

Comments:
The lot number for the 0.50 ARS was mistyped.

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 08/20/2022 (Date).**

☐ 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: _____

Taylor Gutschow
_____   7/20/2022
Signature of Alcohol Testing Program Staff Member   **Date**

Florida Department of Law Enforcement
Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: LAKELAND PD
Time of Inspection: 13:02   Date of Inspection: 06/27/2022

Serial Number: 80-001057
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	

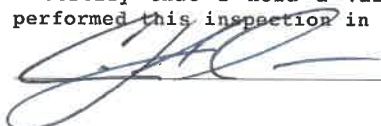| Alcohol Free Test (g/210L)	0.05g/210L Test (g/210L) Lot#:2021112A Exp: 12/07/2023	0.08g/210L Test (g/210L) Lot#:202108D Exp: 08/17/2023	0.20g/210L Test (g/210L) Lot#:202106B Exp: 06/22/2023	0.08 g/210L Dry Gas Std Test (g/210L) Lot#:11821080A2 Exp: 06/05/2023
0.000	0.050	0.080	0.198	0.077
0.000	0.050	0.080	0.199	0.077
0.000	0.051	0.081	0.199	0.077

Number of Simulators Used: 5

Remarks:

*AMENDMENT - LOT NUMBER FOR .05 SOLUTION WAS ENTERED INCORRECTLY. CORRECT LOT NUMBER IS 202112A. AMENDED CA 7-27-2022

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.

_____   CAMILO J ALMEIDA
                                        Signature and Printed Name

06/27/2022
Date