

Florida Department of Law Enforcement

Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: NICEVILLE PD
Time of Inspection: 13:30

Date of Inspection: 02/18/2022

Serial Number: 80-001310
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 | | No |
| Diagnostic Check (Post-Inspection): OK | | No |

| 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:_____ |
|----------------------------|---|---|---|--|
| 0.000 | | | | |
| 0.000 | | | | |
| 0.000 | | | | |

Number of Simulators Used: 5

Remarks:

A F / M A:DID NOT DETECT SLOPE NOT MET. Int Det:SAMPLE WAS NOT DETECTED. Non-compliance:ACETONE SAMP
LE DID NOT READ INTERFERENT DETE.

It was determined lids on simulators were not tight enough.

The above instrument complies () does not comply (X) 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.



SIERRA M EAKINS

Signature and Printed Name

02/18/2022
Date

Florida Department of Law Enforcement

Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: NICEVILLE PD
Time of Inspection: 14:07

Date of Inspection: 02/18/2022

Serial Number: 80-001310
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) Lot#:202106B Exp: 06/22/2023 | 0.08 g/210L Dry Gas Std Test (g/210L) Lot#:1283438 Exp: 02/25/2023 |
|----------------------------|---|---|---|--|
| 0.000 | 0.047 | 0.078 | 0.195 | 0.079 |
| 0.000 | 0.047 | 0.078 | 0.195 | 0.079 |
| 0.000 | 0.048 | 0.078 | 0.196 | 0.079 |

Number of Simulators Used: 5

Remarks:

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.



KELLY D CARRICO
Signature and Printed Name

02/18/2022
Date

Florida Department of Law Enforcement

Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: NICEVILLE PD
Time of Inspection: 17:18

Date of Inspection: 06/27/2022

Serial Number: 80-001310
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#: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#:1283438 Exp: 02/25/2023 |
|----------------------------|---|---|---|--|
| 0.000 | 0.047 | 0.077 | 0.194 | 0.078 |
| 0.000 | 0.047 | 0.077 | 0.194 | 0.078 |
| 0.000 | 0.047 | 0.077 | 0.195 | 0.078 |

Number of Simulators Used: 5

Remarks:

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.



SIERRA M EAKINS

Signature and Printed Name

06/27/2022
Date

Florida Department of Law Enforcement Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: NICEVILLE PD
Time of Inspection: 15:37

Date of Inspection: 06/23/2022

Serial Number: 80-001310
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#: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#:1283438 Exp: 02/25/2023 |
| 0.000 | 0.047 | 0.077 | 0.196 / 0.195 | 0.077 |
| 0.000 | 0.048 | 0.078 | 0.195 / 0.196 | 0.077 |
| 0.000 | 0.048 | 0.077 | RFI / 0.195 | 0.077 |

Number of Simulators Used: 5

Remarks:

20: RFI Detect.

RFI detect from officer's radio

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.



SIERRA M EAKINS
Signature and Printed Name

06/23/2022
Date



Florida Department of
Law Enforcement

AGENCY INSPECTION AND OTHER ELECTRONIC DATA REVIEW

Agency: Niceville Police Department

Instrument Serial Number: 80-001310

AGENCY INSPECTION DATA REVIEW

| | | |
|---|--|----------------------------------|
| Agency Inspector: <u>Sierra Eakins</u> | Date of Inspection: <u>June 23, 2022</u> | Time of Inspection: <u>15:37</u> |
| Agency Inspection Discrepancy: <input type="checkbox"/> Incomplete <input type="checkbox"/> Untimely/Not Received <input type="checkbox"/> Erroneous Information <input checked="" type="checkbox"/> Procedural <input type="checkbox"/> Other _____ | | |
| <input type="checkbox"/> Agency Inspection Not Conducted or Records regarding Agency Inspection have not been uploaded. | | |
| <input type="checkbox"/> Lot Number <input type="checkbox"/> Expiration Date for _____ g/ 210L <input type="checkbox"/> Alcohol Reference Solution <input type="checkbox"/> Dry Gas Standard is <input type="checkbox"/> Incorrect <input type="checkbox"/> Expired. | | |
| <input checked="" type="checkbox"/> 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 <input type="checkbox"/> REASON for repeating the following test(s); OR the <input checked="" type="checkbox"/> Possible Cause and Corrective Action Taken on the following test(s) was not recorded: <input type="checkbox"/> Alcohol Free Subject Test <input type="checkbox"/> Mouth Alcohol Test <input type="checkbox"/> Alcohol Free Test <input type="checkbox"/> Interferent Detect Test <input type="checkbox"/> 0.05 g/210L Test <input type="checkbox"/> 0.08 g/210L Test <input checked="" type="checkbox"/> 0.20 g/210L Test <input type="checkbox"/> 0.08 g/210L Dry Gas Standard Test | | |
| <input type="checkbox"/> 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." <input type="checkbox"/> 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. <input type="checkbox"/> 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. <input type="checkbox"/> 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. | | |
| <input type="checkbox"/> The Agency Inspection is noted as "Complies" when it does not comply with the requirements of Chapter 11D-8, FAC. | | |
| <input type="checkbox"/> Other: _____ | | |

OTHER ELECTRONIC DATA REVIEW

| | |
|--|--------------------|
| <input type="checkbox"/> Login Records Date: _____ | Comments: _____ |
| <input type="checkbox"/> Cylinder Change Records Date: _____ | |
| <input type="checkbox"/> Control Test Records Date: _____ | |
| <input type="checkbox"/> Diagnostic Check Records Date: _____ | |

CORRECTIVE ACTION

| |
|---|
| <input checked="" type="checkbox"/> 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 _____ (Date). |
| <input type="checkbox"/> Provide a written explanation regarding the referenced item(s) to the Department Inspector by _____ (Date). |
| <input type="checkbox"/> Upload the Agency Inspection(s). |
| <input type="checkbox"/> Remove the instrument from evidentiary use until otherwise directed by the Department. |
| <input type="checkbox"/> No action required |
| <input type="checkbox"/> Other: _____ |

Israel Soto

Digitally signed by Israel Soto
Date: 2022.06.28 12:50:00 -04'00'

Signature of Alcohol Testing Program Staff Member

6/28/2022
Date

Florida Department of Law Enforcement

Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: NICEVILLE PD
Time of Inspection: 15:43

Date of Inspection: 07/07/2022

Serial Number: 80-001310
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 | |

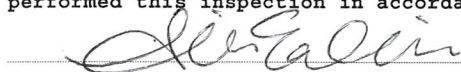
| Alcohol Free Test (g/210L) | 0.05g/210L Test (g/210L) Lot#:202101C Exp: 01/12/2023 | 0.08g/210L Test (g/210L) Lot#:202108D Exp: 08/17/2023 | 0.20g/210L Test (g/210L) Lot#:202106B Exp: 06/22/2023 | 0.08 g/210L Dry Gas Std Test (g/210L) Lot#:1283438 Exp: 02/25/2023 |
|----------------------------|---|---|---|--|
| 0.000 | 0.047 | 0.078 | 0.195 | 0.078 |
| 0.000 | 0.047 | 0.077 | 0.195 | 0.078 |
| 0.000 | 0.048 | 0.077 | 0.196 | 0.078 |

Number of Simulators Used: 5

Remarks:

The above instrument complies (☒) 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.



SIERRA M EAKINS
Signature and Printed Name

07/07/2022
Date

Florida Department of Law Enforcement Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: NICEVILLE PD
Time of Inspection: 15:10

Date of Inspection: 09/28/2022

Serial Number: 80-001310
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#: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#:1283438 Exp: 02/25/2023 |
|----------------------------|---|---|---|--|
| 0.000 | 0.048 | 0.078 | 0.000 / 0.192 | 0.077 / 0.076 |
| 0.000 | 0.049 | 0.078 | 0.000 / 0.193 | 0.077 / 0.076 |
| 0.000 | 0.048 | 0.078 | 0.000 / 0.195 | / 0.075 |

Number of Simulators Used: 5

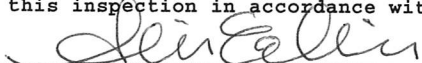
Remarks:

20: Control Outside Tolerance. 08: RFI Detect.

control outside tolerance-lid not sealed properly
RFI detect-officer walked in with radio on

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.



SIERRA M EAKINS

Signature and Printed Name

09/28/2022
Date

Florida Department of Law Enforcement Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: NICEVILLE PD

Time of Inspection: 15:28

Date of Inspection: 10/26/2022

Serial Number: 80-001310

Software: 8100.27

| Check or Test | YES | NO |
|---|-----|----|
| Date and/or Time Adjusted | Yes | |
| 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#: 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#: 1283438 Exp: 02/25/2023 |
|----------------------------|--|--|--|---|
| 0.000 | 0.047 | 0.078 | 0.193 | 0.077 |
| 0.000 | 0.047 | 0.078 | 0.195 | 0.078 |
| 0.000 | 0.047 | 0.078 | 0.195 | 0.078 |

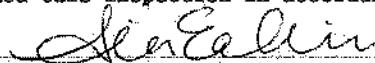
Number of Simulators Used: 5

Remarks:

Time-Date changed.

The above instrument complies (☒) 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.



SIERRA M EAKINS

Signature and Printed Name

10/26/2022
Date

Florida Department of Law Enforcement

Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: NICEVILLE PD
Time of Inspection: 15:26

Date of Inspection: 11/15/2022

Serial Number: 80-001310
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#: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#:1283438 Exp: 02/25/2023 |
|----------------------------|---|---|---|--|
| 0.000 | 0.047 | 0.077 | 0.194 | 0.077 |
| 0.000 | 0.047 | 0.077 | 0.194 | 0.077 |
| 0.000 | 0.046 | 0.077 | 0.195 | 0.077 |

Number of Simulators Used: 5

Remarks:

The above instrument complies (☒) 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.

 SIERRA M EAKINS
Signature and Printed Name

11/15/2022
Date

Florida Department of Law Enforcement Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: NICEVILLE PD

Time of Inspection: 11:04

Date of Inspection: 12/07/2022

Serial Number: 80-001310

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#: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#:1283438 Exp: 02/25/2023 |
|----------------------------|---|---|---|--|
| 0.000 | 0.047 | 0.077 | 0.194 | 0.076 |
| 0.000 | 0.047 | 0.077 | 0.196 | 0.077 |
| 0.000 | 0.048 | 0.077 | 0.196 | 0.076 |

Number of Simulators Used: 5

Remarks:

The above instrument complies (☒) 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.

Sierra M Eakins

SIERRA M EAKINS

Signature and Printed Name

12/07/2022
Date:

Florida Department of Law Enforcement

Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: NICEVILLE PD
Time of Inspection: 10:37

Date of Inspection: 01/04/2023

Serial Number: 80-001310
Software: 8100.27

| Check or Test | YES | NO |
|---|-----|----|
| Date and/or Time Adjusted | Yes | |
| 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#: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#:1283438 Exp: 02/25/2023 |
|----------------------------|---|---|---|--|
| 0.000 | 0.047 | 0.076 | 0.195 | 0.077 |
| 0.000 | 0.047 | 0.077 | 0.196 | 0.076 |
| 0.000 | 0.048 | 0.077 | 0.196 | 0.077 |

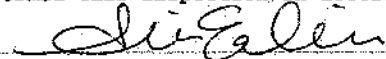
Number of Simulators Used: 5

Remarks:

Time-Date changed.

The above instrument complies (☒) 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.



SIERRA M EAKINS

Signature and Printed Name

01/04/2023
Date