

# Florida Department of Law Enforcement Alcohol Testing Program

1043  
SP

## AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: HIGHLANDS COUNTY SO  
Time of Inspection: 09:03

Date of Inspection: 12/30/2017

Serial Number: 80-001043  
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#:201603D Exp: 03/08/2018	0.08g/210L Test (g/210L) Lot#:201611B Exp: 11/15/2018	0.20g/210L Test (g/210L) Lot#:201702B Exp: 02/23/2019	0.08 g/210L Dry Gas Std Test (g/210L) Lot#:32316080A3 Exp: 01/05/2019
0.000	0.047	0.077	0.200	0.078
0.000	0.048	0.077	0.200	0.078
0.000	0.048	0.077	0.200	0.078

Number of Simulators Used: 5

Remarks:

A TRUE COPY  
PAUL BLACKMAN, SHERIFF  
HIGHLANDS COUNTY, FLORIDA  
BY Shon W. Abeln 2184 D.S.

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.

*Shon W. Abeln* 2184

SHON W ABELN

Signature and Printed Name

12/30/2017  
Date

1043  
8P

# Florida Department of Law Enforcement **RECEIVED** Alcohol Testing Program

DEC 04 2017

## AGENCY INSPECTION REPORT - INTOXILYZER 8000 **FDLE** Alcohol Testing Program

Agency: HIGHLANDS COUNTY SO  
Time of Inspection: 08:51

Date of Inspection: 11/28/2017

Serial Number: 30-001045  
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#: 201603D Exp: 03/08/2018	0.08g/210L Test (g/210L) Lot#: 201611B Exp: 11/15/2018	0.20g/210L Test (g/210L) Lot#: 201702R Exp: 02/23/2019	0.08 g/210L Dry Gas Std Test (g/210L) Lot#: 323150R0A3 Exp: 01/05/2019
0.000	0.048	0.077	0.199	0.077
0.000	0.048	0.077	0.199	0.077
0.000	0.048	0.077	0.199	0.078

Number of Simulators Used: 5

Remarks:

**A TRUE COPY**  
**PAUL BLACKMAN, SHERIFF**  
**HIGHLANDS COUNTY, FLORIDA**  
BY Shon W. Abeln 2184 **D.S.**

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.

Shon W. Abeln 2184

SHON W ABELN

Signature and Printed Name

11/28/2017  
Date

1043 SP

RECEIVED

# Florida Department of Law Enforcement Alcohol Testing Program

OCT 25 2017

FDLE  
Alcohol Testing Program

## AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: HIGHLANDS COUNTY SO  
Time of Inspection: 10:58

Date of Inspection: 10/21/2017

Serial Number: 80-001043  
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#: 201603D Exp: 03/08/2018	0.08g/210L Test (g/210L) Lot#: 201611B Exp: 11/15/2018	0.20g/210L Test (g/210L) Lot#: 201702B Exp: 02/23/2019	0.08 g/210L Dry Gas Std Test (g/210L) Lot#: 32316080A3 Exp: 01/05/2019
0.000	0.048	0.078	0.199	0.077
0.000	0.048	0.077	0.199	0.078
0.000	0.048	0.077	0.198	0.077

Number of Simulators Used: 5

Remarks:

**A TRUE COPY**  
**PAUL BLACKMAN, SHERIFF**  
**HIGHLANDS COUNTY, FLORIDA**  
 BY Shon W. Abeln 2184 D.S.

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.

Shon W. Abeln 2184  
 Signature and Printed Name

SHON W ABELN

10/21/2017  
Date





Florida Department of Law Enforcement

# AGENCY INSPECTION AND OTHER ELECTRONIC DATA REVIEW

Agency: Highlands County SO \_\_\_\_\_

Instrument Serial Number: **80-001043**

<b>AGENCY INSPECTION DATA REVIEW</b>		
Agency Inspector: Gregory Glasco	Date of Inspection: 9/20/17	14:01
Agency Inspection Discrepancy: <input checked="" type="checkbox"/> Incomplete <input type="checkbox"/> Untimely/Not Received <input type="checkbox"/> Erroneous Information <input 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 checked="" type="checkbox"/> REASON for repeating the following test(s); OR the <input type="checkbox"/> Possible Cause and Corrective Action Taken on the following test(s) was not recorded: <input type="checkbox"/> Alcohol Free Subject Test <input checked="" type="checkbox"/> Mouth Alcohol Test <input checked="" 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 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: _____		

<b>OTHER ELECTRONIC DATA REVIEW</b>	
<input type="checkbox"/> Login Records Date: _____	Comments: <i>Please remember to make notes when a test must be repeated.</i>
<input type="checkbox"/> Cylinder Change Records Date: _____	
<input type="checkbox"/> Control Test Records Date: _____	
<input type="checkbox"/> Diagnostic Check Records Date: _____	

<b>CORRECTIVE ACTION</b>	
<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 <u>10/31</u> (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: _____	

*Shayla Platt*  
Signature of Alcohol Testing Program Staff Member

10/19/2017  
Date

# Florida Department of Law Enforcement

## Alcohol Testing Program

### Inspection Test Electronic Data

CMI, Inc. Intoxilyzer 8000 Serial Number: 80-001043

Agency HIGHLANDS COUNTY SO	Date 09/20/2017	Type Agency Inspection	
Inspector GLASCO,GREGORY,S	Time 14:01:26	Software 8100.27	
0.05 Lot # 201603D	0.08 Lot # 201611B	0.20 Lot # 201702B	0.08 Gas Lot # 32316080A3
Expiration 03/08/2018	Expiration 11/15/2018	Expiration 02/23/2019	Expiration 01/05/2019

Number of Simulators 5 Compliance Yes

Check or Test	Result	Test	Result
Diagnostic Check (Pre-Inspection): OK	Yes	Alcohol Free Test # 1	0.000
Date and/or Time Adjusted	No	0.05 g/210L Test # 1	0.046
Minimum Sample Volume Check: OK		0.08 g/210L Test # 1	0.075
Barometric Pressure Sensor Check: OK		0.20 g/210L Test # 1	0.191
Alcohol Free Subject Test: 0.000	Yes	0.08 g/210L Dry Gas Std Test # 1	0.078
Mouth Alcohol Test: Slope Not Met	Yes	Interferent Detect Test # 1	INT
Interferent Detect Test: Interferent Detect	Yes	Alcohol Free Test # 2	0.000
Diagnostic Check (Post-Inspection): OK	Yes	0.05 g/210L Test # 2	0.047
Alcohol Free Test: OK	Yes	0.08 g/210L Test # 2	0.076
0.05 g/210L Test: OK	Yes	0.20 g/210L Test # 2	0.192
0.08 g/210L Test: OK	Yes	0.08 g/210L Dry Gas Std Test # 2	0.078
0.20 g/210L Test: OK	Yes	Interferent Detect Test # 2	INT
0.08 g/210L Dry Gas Std Test: OK	Yes	Alcohol Free Test # 3	0.000
		0.05 g/210L Test # 3	0.047
		0.08 g/210L Test # 3	0.077
		0.20 g/210L Test # 3	0.193
		0.08 g/210L Dry Gas Std Test # 3	0.078
		Interferent Detect Test # 3	INT

**Remarks:**

A F / M A : .

Data Download Date/Time 09/20/2017 14:49



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# Florida Department of Law Enforcement Alcohol Testing Program

OCT 20 2017

FDLE

Alcohol Testing Program

## AGENCY INSPECTION REPORT - INTOXILYZE 8000

Agency: HIGHLANDS COUNTY SO  
Time of Inspection: 14:01

Date of Inspection: 09/20/2017

Serial Number: 80-001043  
Software: 8100.27

Check or Test
Date and/or Time Adjusted
Diagnostic Check (Pre-Inspection): OK
Alcohol Free Subject Test: 0.000
Mouth Alcohol Test: Slope Not Met
Interferent Detect Test: Interferent Detect
Diagnostic Check (Post-Inspection): OK

YES	NO
	No
Yes	
Yes	
Yes	
Yes	
Yes	

Alcohol Free Test (g/210L)	0.05g/210L Test (g/210L) Lot#: 201603D Exp: 03/08/2018	0.08g/210L Test (g/210L) Lot#: 201611B Exp: 11/15/2018	0.20g/210L Test (g/210L) Lot#: 201702B Exp: 02/23/2019
0.000	0.046	0.075	0.191
0.000	0.047	0.076	0.192
0.000	0.047	0.077	0.193

0.08 g/210L Dry Gas Std Test (g/210L) Lot#: 33316080A3 Exp: 01/05/2019
0.078
0.078
0.078

Number of Simulators Used: 5

Remarks:

A F / M A :

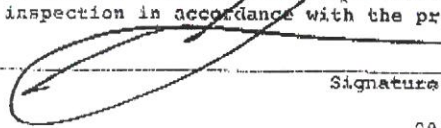
Repeated A F test. D.D not have enough alcohol solution in mouth first time. Second time done correctly.

Report same! This was written on the original.

Amended  
written  
Sgt JASW  
10-20-17

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

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, F.S.



GREGORY S. GLASS  
Signature and Printed Name

09/20/2017  
Date

1043  
8P



Florida Department of Law Enforcement

### AGENCY INSPECTION AND OTHER ELECTRONIC DATA REVIEW

Agency: Highlands County SO

Instrument Serial Number: 8040013

#### AGENCY INSPECTION DATA REVIEW

Agency Inspector: Gregory Glasco Date of Inspection: 9/20/17 14:01

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 \_\_\_ 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 in the Remarks section of FDLE/ATP Form 40 Agency Inspection Report - Intoxilyzer 8000. The REASON for the 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  Interference 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 instrument 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:

Please remember to make notes when a test must be repeated.

#### 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 10/31 (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: \_\_\_

*Shayla Platt*  
Signature of Alcohol Testing Program Staff Member

10/19/2017  
Date



# Alcohol Testing Program

## Inspection Test Electronic Data

1043  
SP

CMI, Inc. Intoxilyzer 8000 Serial Number: 80-001043

Agency HIGHLANDS COUNTY SO	Date 09/20/2017	Type	Agency Inspect
Inspector GLASCO,GREGORY,S	Time 14:01:26	Software	8100.27
0.05 Lot # 201603D	0.08 Lot # 201611B	0.20 Lot # 201702B	0.08 Gas Lot # 32316080A3
Expiration 03/08/2018	Expiration 11/15/2018	Expiration 02/23/2019	Expiration 01/05/2019

Number of Simulators 5

Compliance: Yes

Check or Test	Result	Test	Result
Diagnostic Check (Pre-Inspection): OK	Yes	Alcohol Free Test # 1	0.000
Date and/or Time Adjusted	No	0.05 g/210L Test # 1	0.046
Minimum Sample Volume Check: OK		0.08 g/210L Test # 1	0.075
Barometric Pressure Sensor Check: OK		0.20 g/210L Test # 1	0.191
Alcohol Free Subject Test: 0.000	Yes	0.08 g/210L Dry Gas Std Test # 1	0.078
Mouth Alcohol Test: Slope Not Met	Yes	Interferent Detect Test # 1	INT
Interferent Detect Test: Interferent Detect	Yes	Alcohol Free Test # 2	0.000
Diagnostic Check (Post-Inspection): OK	Yes	0.05 g/210L Test # 2	0.047
Alcohol Free Test: OK	Yes	0.08 g/210L Test # 2	0.076
0.05 g/210L Test: OK	Yes	0.20 g/210L Test # 2	0.192
0.08 g/210L Test: OK	Yes	0.08 g/210L Dry Gas Std Test # 2	0.078
0.20 g/210L Test: OK	Yes	Interferent Detect Test # 2	INT
0.08 g/210L Dry Gas Std Test: OK	Yes	Alcohol Free Test # 3	0.000
		0.05 g/210L Test # 3	0.047
		0.08 g/210L Test # 3	0.077
		0.20 g/210L Test # 3	0.193
		0.08 g/210L Dry Gas Std Test # 3	0.078
		Interferent Detect Test # 3	INT

Remarks:

AF/MAR
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Data Download Date/Time 09/20/2017 14:49



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# Florida Department of Law Enforcement Alcohol Testing Program

SEP 25 2017

FDLE

Alcohol Testing Program

## AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: HIGHLANDS COUNTY SO  
Time of Inspection: 14:01

Date of Inspection: 09/20/2017

Serial Number: 80-001043  
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#:201603D Exp: 03/08/2018	0.08g/210L Test (g/210L) Lot#:201611B Exp: 11/15/2018	0.20g/210L Test (g/210L) Lot#:201702B Exp: 02/23/2019	0.08 g/210L Dry Gas Std Test (g/210L) Lot#:32316080A3 Exp: 01/05/2019
0.000	0.046	0.075	0.191	0.078
0.000	0.047	0.076	0.192	0.078
0.000	0.047	0.077	0.193	0.078

Number of Simulators Used: 5

Remarks:

A F / M A:

Repeated AF test. Did not have enough alcohol solution in mouth first time. Second time done correctly.

A TRUE COPY  
PAUL BLACKMAN, SHERIFF  
HIGHLANDS COUNTY, FLORIDA  
BY \_\_\_\_\_ D.S.

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.

GREGORY S. GLASCO  
Signature and Printed Name

09/20/2017  
Date

# Florida Department of Law Enforcement Alcohol Testing Program

**RECEIVED**

AUG 29 2017

1043  
SR

## AGENCY INSPECTION REPORT - INTOXILYZER 8000

**FDLE  
Alcohol Testing Progra**

Agency: HIGHLANDS COUNTY SO  
Time of Inspection: 13:31

Date of Inspection: 08/24/2017

Serial Number: 80-001043  
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#:201603D Exp: 03/08/2018	0.08g/210L Test (g/210L) Lot#:201611B Exp: 11/15/2018	0.20g/210L Test (g/210L) Lot#:201604C Exp: 04/05/2018	0.08 g/210L Dry Gas Std Test (g/210L) Lot#:24515080A3 Exp: 10/05/2017
0.000	0.046	0.076	0.194	0.077
0.000	0.047	0.077	0.196	0.077
0.000	0.047	0.077	0.196	0.077

Number of Simulators Used: 5

Remarks:

**A TRUE COPY  
PAUL BLACKMAN, SHERIFF  
HIGHLANDS COUNTY, FLORIDA  
BY D.S.**

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.

\_\_\_\_\_  
Signature and Printed Name GREGORY S GLASCO

08/24/2017  
Date



# Florida Department of Law Enforcement Alcohol Testing Program

**RECEIVED**

JUL 27 2017

1043  
SP

**FDLE**

## AGENCY INSPECTION REPORT - INTOXILYZER 8000 Alcohol Testing Program

Agency: HIGHLANDS COUNTY SO  
Time of Inspection: 15:03

Date of Inspection: 07/24/2017

Serial Number: 80-001043  
Software: 8100.27

Check or Test	YES	NO
Date and/or Time Adjusted		
Diagnostic Check (Pre-Inspection): OK		No
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	
	Yes	

Alcohol Free Test (g/210L)	0.05g/210L Test (g/210L) Lot#: 201603D Exp: 03/08/2018	0.08g/210L Test (g/210L) Lot#: 201611B Exp: 11/15/2018	0.20g/210L Test (g/210L) Lot#: 201604C Exp: 04/05/2018	0.08 g/210L Dry Gas Std Test (g/210L) Lot#: 24515080A3 Exp: 10/05/2017
0.000	0.046	0.076	0.193	0.078
0.000	0.046	0.077	0.195	0.078
0.000	0.047	0.077	0.195	0.078

Number of Simulators Used: 5

Remarks:

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PAUL BLACKMAN, SHERIFF  
HIGHLANDS COUNTY, FLORIDA  
BY \_\_\_\_\_ D.S.**

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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.

\_\_\_\_\_  
Signature and Printed Name

GREGORY S GLASCO

07/24/2017  
Date

1043 SP

RECEIVED

# Florida Department of Law Enforcement JUN 01 2017 Alcohol Testing Program

FDLE  
Alcohol Testing Program

## AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: HIGHLANDS COUNTY SO  
Time of Inspection: 08:51

Date of Inspection: 05/28/2017

Serial Number: 80-001043  
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#:201603D Exp: 03/08/2018	0.08g/210L Test (g/210L) Lot#:201611B Exp: 11/15/2018	0.20g/210L Test (g/210L) Lot#:201604C Exp: 04/05/2018	0.08 g/210L Dry Gas Std Test (g/210L) Lot#:12716080A6 Exp: 06/05/2018
0.000	0.049	0.077	0.196	0.077
0.000	0.048	0.078	0.197	0.077
0.000	0.048	0.077	0.197	0.077

Number of Simulators Used: 5

Remarks:

A TRUE COPY  
PAUL BLACKMAN, SHERIFF  
HIGHLANDS COUNTY FLORIDA  
BY Shon W. Abeln 2184 D.S.

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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.

Shon W. Abeln 2184

SHON W ABELN

Signature and Printed Name

05/28/2017  
Date



1043 SP  
**RECEIVED**  
 MAY 04 2017  
 FDLE  
 Alcohol Testing Program

# Florida Department of Law Enforcement Alcohol Testing Program

## AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: **HIGHLANDS COUNTY SO**      Date of Inspection: **04/23/2017**      Serial Number: **80-001043**  
 Time of Inspection: **11:03**      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#:201603D Exp: 03/08/2018	0.08g/210L Test (g/210L) Lot#:201611B Exp: 11/15/2018	0.20g/210L Test (g/210L) Lot#:201604C Exp: 04/05/2018	0.08 g/210L Dry Gas Std Test (g/210L) Lot#:12716090A6 Exp: 06/05/2018
0.000	0.049	0.079	0.200	0.076
0.000	0.049	0.079	0.199	0.076
0.000	0.049	0.078	0.199	0.077

Number of Simulators Used: 5

Remarks:

**A TRUE COPY**  
**PAUL BLACKMAN, SHERIFF**  
**HIGHLANDS COUNTY, FLORIDA**  
 BY Shon W. Abeln **D.S.**

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.

Shon W. Abeln      **2184**      SHON W ABELN  
 Signature and Printed Name  
 04/23/2017  
 Date