

DEPARTMENT INSPECTOR FIELD NOTES

MARK GARLAND

Agency: 016FCHOBEE CO. SO Instrument Serial Number: 80-001320					
Dep	partment Inspection:	Agency Inspection/Ag	ency Contact:	Records Audit:	
000	Registration Request for Registration Attached Annual Inspection After Repair Other: Other		Notification	The following records were audited: Agency Inspection Reports Breath Test Instrument Repair/Maintenance Records Instrument Registration Dry Gas Standard Certificate(s) of Analysis	
	Barometric Pressure: Gauge	Date of Notification/Contact:			
	Instrument	Agency Inspector:		Other:	
<u></u>	Instrument Set Up Verified				
PLEASE DO NOT ERASE REMARKS GENERATED BY THE INSTRUMENT WHEN A TEST IS REPEATED. YOUR COMMENTS SHOULD FOLLOW THESE REMARKS. (SEE 12/9/14 INSPECTION					
Instrument/Area: Equipment: Supplies:					
		Cimulatora	☐ Distilled/Deionized Water		
1000	Clean/Dry Secure Limited Access Other:	 □ Proper Number of Simulators □ Checked Simulators for Air Leak Resistant Seal and Proper Temperature □ Class A Glassware 		☐ Mouth Alcohol Solution ☐ Acetone Stock Solution ☐ Alcohol Reference Solution ☐ Dry Gas Standard ☐ Mouth Pieces	
Comments:					
Action:					
6	Instrument Complies with Chapter 11D-8, FAC		Comments:		
	Return to/Place into Evidentiary Use Remove from Evidentiary Use Remain Out of Evidentiary Use				
Signature of Alcohol Testing Program Staff Member Date					
	Signature of Alcohol resting Frogram Stall Member				