

907  
SP

# Florida Department of Law Enforcement Alcohol Testing Program

## AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: MANATEE COUNTY SO  
Time of Inspection: 10:18

Date of Inspection: 09/25/2018


Serial Number: 80-000907  
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#:201703A Exp: 03/07/2019	0.08g/210L Test (g/210L) Lot#:201611B Exp: 11/15/2018	0.20g/210L Test (g/210L) Lot#:201802G Exp: 02/22/2020	0.08 g/210L Dry Gas Std Test (g/210L) Lot#:840875 Exp: 09/19/2020
0.000	0.049	0.075	0.200	0.084
0.000	0.049	0.076	0.200	0.082
0.000	0.048	0.076	0.200	0.083

Number of Simulators Used: 5

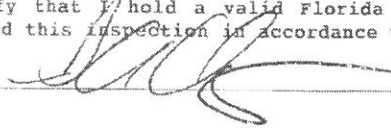
Remarks:

SGT SPURLOCK PRESENT 

RECEIVED  
SEP 24 2018  
FDLE  
Alcohol Testing Program

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.



GLENN CLINE

Signature and Printed Name

09/25/2018  
Date

# Florida Department of Law Enforcement Alcohol Testing Program

## AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: MANATEE COUNTY SO  
Time of Inspection: 15:56

Date of Inspection: 06/27/2018

Serial Number: 80-000907  
Software: 8100.27

Check or Test	YES	NO
Date and/or Time Adjusted		No
Diagnostic Check (Pre-Inspection): OK		No
Alcohol Free Subject Test: 0.000		No
Mouth Alcohol Test: Slope Not Met		No
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: _____

Number of Simulators Used: \_\_\_\_\_

Remarks:  
CHECKING FORMS

N/A COMPLIANCE NOT DETERMINED.

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.

Shayla Platt

SHAYLA D PLATT

Signature and Printed Name

06/27/2018  
Date