



# INSTRUMENT PROCESSING SHEET

Agency Lee County Sheriff's OfficeS/N 80-001208

Florida Department of Law Enforcement

Date In 01/25/2018DI Completion Date 2/6/18 Ship  P/U  H/D  CMI  EE

<b>Intake</b> Performed By <u>DMB</u>	<b>Quality Checks</b> Performed By <u>SP</u>	<b>Flow Calibration</b> Performed By _____															
<input checked="" type="checkbox"/> Annual <input type="checkbox"/> Registration <input checked="" type="checkbox"/> Return from CMI / EE  Visual Inspection: <input checked="" type="checkbox"/> Case <input checked="" type="checkbox"/> Handle <input checked="" type="checkbox"/> Keyboard <input checked="" type="checkbox"/> Dry Gas Shelf <input checked="" type="checkbox"/> Feet <input checked="" type="checkbox"/> Breath Tube <input checked="" type="checkbox"/> Ports <input checked="" type="checkbox"/> Screws Tight  Other Equipment/ Accessories: <input type="checkbox"/> Power cord <input type="checkbox"/> Printer Cable <input checked="" type="checkbox"/> Static Bag <input type="checkbox"/> 12V DC Cable  Notes: _____ _____ _____	<input checked="" type="checkbox"/> Breath Tube Screen <input type="checkbox"/> Replace External O-Rings <input checked="" type="checkbox"/> Instrument Set Up Verified <input checked="" type="checkbox"/> R-Value <u>207</u> <input checked="" type="checkbox"/> Flow Verification (L/s) Flow Column # <u>ATP102</u> 32 mm <u>.152</u> (.139 - .169) 36 mm <u>.167</u> (.156 - .190) 53 mm <u>.238</u> (.228 - .278) 103 mm <u>.503</u> (.447 - .547) <input checked="" type="checkbox"/> Barometric Pressure Check Gauge ID # <u>28662</u> <input checked="" type="checkbox"/> Stability Checks <table border="1"> <thead> <tr> <th>Simulator</th> <th>Serial #</th> <th>Lot #/Exp</th> </tr> </thead> <tbody> <tr> <td>0.050</td> <td><u>SD3962</u></td> <td>201707D 07/25/2019</td> </tr> <tr> <td>0.080</td> <td><u>SD3964</u></td> <td>201707E 07/25/2019</td> </tr> <tr> <td>0.200</td> <td><u>DR3856</u></td> <td>201707C 07/24/2019</td> </tr> <tr> <td>0.080 DGS</td> <td>N/A</td> <td><u>AG715202</u> <u>6/1/19</u></td> </tr> </tbody> </table>	Simulator	Serial #	Lot #/Exp	0.050	<u>SD3962</u>	201707D 07/25/2019	0.080	<u>SD3964</u>	201707E 07/25/2019	0.200	<u>DR3856</u>	201707C 07/24/2019	0.080 DGS	N/A	<u>AG715202</u> <u>6/1/19</u>	Flow Column # _____ <input type="checkbox"/> 5L/min - 17mm <input type="checkbox"/> 15L/min - 53mm <input type="checkbox"/> 30L/min - 103mm <input type="checkbox"/> R-Value _____ <input type="checkbox"/> Post Calibration Verification (L/s) Flow Column # _____ 32 mm _____ (.139 - .169) 36 mm _____ (.156 - .190) 53 mm _____ (.228 - .278) 103 mm _____ (.447 - .547)
Simulator	Serial #	Lot #/Exp															
0.050	<u>SD3962</u>	201707D 07/25/2019															
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0.080 DGS	N/A	<u>AG715202</u> <u>6/1/19</u>															

**Final Release Date**  
**FDLE**  
**FEB 06 2018**  
**Alcohol Testing Program**

**Maintenance** Performed By \_\_\_\_\_

Battery Replacement  
 Dry Gas Regulator Replacement  
 Breath Tube Replacement  
 Other \_\_\_\_\_

**Temperature Checks** Performed By SP

Lab Temp °C 22.1  
 External Digital Therm. ID#: 300948  
 34°C +/- .2 Serial #: SD3962  
 34°C +/- .2 Serial #: SD3964  
 34°C +/- .2 Serial #: DR3856

**Calibration Adjustment** Performed By \_\_\_\_\_

Barometric Pressure Gauge \_\_\_\_\_ ID # \_\_\_\_\_

Simulator	Serial Number	Lot Number	Expiration
0.000		N/A	N/A
0.040			
0.100			
0.200			
0.300			
0.080 DGS	N/A		

Post Calibration Adjustment Stability Checks

Simulator	Serial Number	Lot Number	Expiration
0.050			
0.080			
0.200			
0.080 DGS	N/A		

**Department Inspection** Performed By SP

Barometric Pressure ID# 28662  
 Gauge 1025 Instrument 1022  
 Mouth Alcohol Solution Lot # 2016-C  
 Acetone Stock Solution Lot # 2017-A

Simulator	Serial Number
0.000	<u>SD1019</u>
Interferent	<u>SD1021</u>
0.050	<u>SD3962</u>
0.080	<u>SD3964</u>
0.200	<u>DR3856</u>

**Attachments**

<input checked="" type="checkbox"/> Form 41	<input type="checkbox"/> Post-Stability Checks
<input checked="" type="checkbox"/> Stability Checks	<input type="checkbox"/> Flow Calibration
<input checked="" type="checkbox"/> Calibration Certificate	<input type="checkbox"/> Form 40
<input type="checkbox"/> Calibration Adjustment	<input type="checkbox"/> Other _____

Notes/Suggested Service: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Instrument Complies with Chapter 11D-8, FAC  
 Instrument Does Not Comply with Chapter 11D-8, FAC  
 Return to/Place into Evidentiary Use  
 Remain Out of Evidentiary Use  
 Conduct an Agency Inspection Before Evidentiary Use

DMB 2/6/18 J. Dahn 2/6/18  
 Tech Review / Date Admin Review / Date

# Florida Department of Law Enforcement Alcohol Testing Program

## DEPARTMENT INSPECTION REPORT - INTOXILYZER 8000

Agency: LEE COUNTY SO  
Time of Inspection: 12:21

Date of Inspection: 02/06/2018

Serial Number: 80-001208  
Software: 8100.27

Check or Test	YES	NO	Check or Test	YES	NO
Diagnostic Check (Pre-Inspection): OK	Yes		Date and/or Time Adjusted		No
Minimum Sample Volume Check: OK	Yes		Barometric Pressure Sensor Check: 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#:201707D Exp: 07/25/2019	0.08g/210L Test (g/210L) Lot#:201707E Exp: 07/25/2019	0.20g/210L Test (g/210L) Lot#:201707C Exp: 07/24/2019	0.08 g/210L Dry Gas Std Test (g/210L) Lot#:AG715202 Exp: 06/01/2019
0.000	0.049	0.080	0.195	0.080
0.000	0.049	0.080	0.196	0.079
0.000	0.050	0.080	0.197	0.079
0.000	0.049	0.080	0.196	0.079
0.000	0.049	0.080	0.196	0.080
0.000	0.050	0.080	0.197	0.079
0.000	0.050	0.080	0.197	0.079
0.000	0.050	0.080	0.197	0.079
0.000	0.050	0.080	0.196	0.080
0.000	0.050	0.080	0.197	0.079
0.000	0.050	0.080	0.197	0.079

Standard Deviations	0.0005	0.0000	0.0006	0.0004
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Average Standard Deviation of 0.05, 0.08 and 0.20 g/210L Tests: 0.0003 Number of Simulators Used: 5

Remarks:

*DB*

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

I certify that I performed this inspection in accordance with the provisions of Chapter 11D-8, FAC.

*Shayla Platt*

SHAYLA D PLATT

Signature and Printed Name

02/06/2018  
Date

*2/6/18  
DB*

# Lee County SO - Stability Checks #80-001208

LEE COUNTY SO  
 Intoxilyzer - Alcohol Analyzer  
 Model 8000 SN 80-001208  
 02/06/2018  
 Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	08:48
Control Test	0.049	08:48
Air Blank	0.000	08:49
Control Test	0.049	08:50
Air Blank	0.000	08:50
Control Test	0.049	08:51
Air Blank	0.000	08:51
Control Test Stats		
Average	0.0490	
Std Dev	0.0000	
Rel Std Dev(%)	0.0000	

SP

Operator's Signature

LEE COUNTY SO  
 Intoxilyzer - Alcohol Analyzer  
 Model 8000 SN 80-001208  
 02/06/2018  
 Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	08:43
Control Test	0.079	08:43
Air Blank	0.000	08:44
Control Test	0.079	08:45
Air Blank	0.000	08:45
Control Test	0.081	08:46
Air Blank	0.000	08:46
Control Test Stats		
Average	0.0797	
Std Dev	0.0012	
Rel Std Dev(%)	1.4494	

SP

Operator's Signature

LEE COUNTY SO  
 Intoxilyzer - Alcohol Analyzer  
 Model 8000 SN 80-001208  
 02/06/2018  
 Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	08:38
Control Test	0.194	08:39
Air Blank	0.000	08:39
Control Test	0.195	08:40
Air Blank	0.000	08:41
Control Test	0.195	08:41
Air Blank	0.000	08:42
Control Test Stats		
Average	0.1947	
Std Dev	0.0006	
Rel Std Dev(%)	0.2966	

SP

Operator's Signature

LEE COUNTY SO  
 Intoxilyzer - Alcohol Analyzer  
 Model 8000 SN 80-001208  
 02/06/2018  
 Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	08:52
Control Test	0.080	08:53
Air Blank	0.000	08:53
Control Test	0.080	08:54
Air Blank	0.000	08:54
Control Test	0.079	08:54
Air Blank	0.000	08:55
Control Test Stats		
Average	0.0797	
Std Dev	0.0006	
Rel Std Dev(%)	0.7247	

PGS

SP

SP

Operator's Signature

2/6/18  
 SP



Florida Department of Law Enforcement  
 Alcohol Testing Program  
 2729 Fort Knox Blvd.  
 Bldg. 2, Suite 1300  
 Tallahassee, FL 32308

# Calibration Certificate

This is to certify the calibration of Intoxilyzer 8000 serial number 80-001208, manufactured by CMI, Inc. was calibrated in accordance with FDLE/ATP Form 36 - Department Inspection Procedures - Intoxilyzer 8000.

Serial Number:	<u>80-001208</u>	UNCERTAINTY* ±	
Owning Agency:	<u>LEE COUNTY SO</u>	0.05 g/ 210 L	0.004
Calibration Date:	<u>02/06/2018</u>	0.08 g/ 210 L	0.005
Calibration Time:	<u>12:21</u>	0.20 g/ 210 L	0.008
		0.080 g/ 210 L Dry Gas Control	0.005

All results are reported in g/ 210 L.  
 Bias is limited by Calibration acceptance criteria. All calibration results must be within ± 0.005 or 5%, whichever is greater, of the Target Alcohol concentration.  
 \*Uncertainty is based on fleet-wide data and is expressed to a 99% level of confidence (k=3).

### TRACEABILITY INFORMATION

This instrument was calibrated using solutions prepared by Alcohol Countermeasure Systems, Inc. (ACS) ACS prepared and certified these CRMs in accordance with ISO 17034 and ISO/ IEC 17025 Standards.

Simulator temperatures are traceable to NIST. Thermometer temperatures are checked with NIST traceable Eutechnics 4400 digital thermometers calibrated by Precision Metrology in accordance with ISO/ IEC 17025 standards.

Dry gas control measurements are traceable to NIST through the uses of CRMs supplied by an accredited CRM supplier. The supplier of dry gas standard controls prepared and certified the CRMs in accordance with ISO Guide 34 and ISO/ IEC 17025 standards.

This document shall not be reproduced except in full, without written approval of the Florida Department of Law Enforcement Alcohol Testing Program.

02/06/2018 Shayla Platt  
 Date Department Inspector

FDLE/ATP Form 69 January 2018  
 Issuing Authority: Alcohol Testing Program

Service • Integrity • Respect • Quality

2/6/18  
 [Signature]

Return Material Authorization form

**SHIP TO:**

CMI, Inc.

Enforcement Electronics

Shipment to repair facility authorized by: David Claflin on 9/26/17

**Items Returned:**

Instrument  Supplies  other  Please Describe: \_\_\_\_\_

Instrument Model: INTOXILYZER 8000 Serial Number 80-001208

Bill To Address:  
Lee County Sheriff's Office

Ship To Address:  
FDLE-ATP

**Reason for Return:**

Instrument will not print to external printer.

**Please choose one of the following options:**

1. I \_\_\_\_\_, authorize all repairs.

2. I \_\_\_\_\_, authorize repairs up to \$ \_\_\_\_\_.

3. I require an estimate **BEFORE** any repairs will be authorized and/or conducted,  
Please contact, Name: David Claflin Phone Number: 239-410-3753  
dclaflin@sherifflee.org

**Notes:**

DCB