

1420
SP

Florida Department of Law Enforcement Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: Orange County Sheriff's Office

Serial Number: 80-001420

Time of Inspection: N/A

Date of Inspection: 05/22/2019

Software:

CHECK OR TEST	YES	NO
Date and/or Time Adjusted	N/A	N/A
Diagnostic Check (Pre-Inspection): OK	N/A	N/A
Alcohol Free Subject Test: 0.000	N/A	N/A
Mouth Alcohol Test: Slope Not Met	N/A	N/A
Interferent Detect Test: Interferent Detect	N/A	N/A
Diagnostic Check (Post-Inspection): OK	N/A	N/A

Alcohol Free Test (g/210L)	0.05g/210L Test (g/210L) Lot#: N/A Exp: N/A	0.08g/210L Test (g/210L) Lot#: N/A Exp: N/A	0.20g/210L Test (g/210L) Lot#: N/A Exp: N/A	0.08 g/210L Dry Gas Std Test (g/210L) Lot#: N/A Exp: N/A
N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A	N/A

Number of Simulators Used: N/A

Remarks: Not able to perform an Agency Inspection due to the instrument being unable to clear "DISABLED MODE MEMORY FULL" message, despite an upload of the instrument's data. I notified Department Inspector Shayla Platt via telephone of this issue. I am sending the instrument to CMI for analysis.

(All of the information entered on this Agency Inspection Report was hand-typed by Agency Inspector K. Melville)

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

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 M. Melville

Signature and Printed Name

05/22/2019
Date