FDLE
Florida Department of Law Enforcement

INSTRUMENT PROCESSING SHEET

Agency Osceola County SO S/N 80-000966

Date In 06/18/2019 DI Completion Date 06/18/2019 ☑Ship ☐P/U ☐H/D ☐CMI ☐EE

Intake Performed By JD

- ☑ Annual
- ☐ Registration
- ☐ Return from CMI / EE

Visual Inspection:

☑ Case	☑ Handle
☑ Keyboard	☑ Dry Gas Shelf
☑ Feet	☑ Breath Tube
☑ Ports	☑ Screws Tight

Other Equipment/ Accessories:

☐ Power cord	☐ Printer Cable
☑ Static Bag	☐ 12V DC Cable

Notes: _____

Final Release Date

FDLE

JUN 19 2019

Alcohol Testing Program

Quality Checks Performed By JD

- ☑ Breath Tube Screen
- ☑ Replace External O-Rings
- ☑ Instrument Set Up Verified
- ☑ R-Value 174
- ☑ Flow Verification (L/s)

Flow Column # ATP-103

32 mm	.164	(.139 - .169)
36 mm	.179	(.156 - .190)
53 mm	.246	(.228 - .278)
103 mm	.515	(.447 - .547)

- ☑ Barometric Pressure Check

Gauge ID # 26932

- ☑ Stability Checks

Simulator	Serial #	Lot #/Exp
0.050	SD1012	201707D
		07/25/2019
0.080	DR1279	201707E
		07/25/2019
0.200	SD1013	201707C
		07/24/2019
0.080 DGS	N/A	AG831804
		11/14/2020

Flow Calibration Performed By _____

Flow Column # _____

- ☐ 5L/min – 17mm
- ☐ 15L/min – 53mm
- ☐ 30L/min – 103mm
- ☐ R-Value _____
- ☐ Post Calibration Verification (L/s)

Flow Column # _____

32 mm		(.139 - .169)
36 mm		(.156 - .190)
53 mm		(.228 - .278)
103 mm		(.447 - .547)

Maintenance Performed By JD

- ☐ Battery Replacement
- ☐ Dry Gas Regulator Replacement
- ☑ Breath Tube Replacement
- ☐ Other _____

Temperature Checks Performed By JD

- ☑ Lab Temp °C 20.9

External Digital Therm. ID#: 300505

- ☑ 34°C +-.2 Serial #: SD1012
- ☑ 34°C +-.2 Serial #: DR1279
- ☑ 34°C +-.2 Serial #: SD1013

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 JD

Barometric Pressure ID# 30793

Gauge 1013 Instrument 1013

Mouth Alcohol Solution Lot # 2018-B

Acetone Stock Solution Lot # 2019-A

Simulator	Serial Number
0.000	G2408
Interferent	G2882
0.050	SD1012
0.080	DR1279
0.200	SD1013

Attachments

☑ Form 41	☐ Post-Stability Checks
☑ Stability Checks	☐ Flow Calibration
☑ Calibration Certificate	☐ Form 40
☐ Calibration Adjustment	☐ Other _____

Notes/Suggested Service: Please change the level 2 password to something unique. JD

Replaced breath tube. AI reported instrument would not enter "Ready Mode". He reported Diagnostic Fail for temp reg test. Breath tube was not heating upon arrival to ATP. JD

- ☑ **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**

SP 6/18/19 Britt Kirkland 6/19/19

Tech Review / Date Admin Review / Date

Florida Department of Law Enforcement
Alcohol Testing Program

DEPARTMENT INSPECTION REPORT - INTOXILYZER 8000

Agency: OSCEOLA COUNTY SO
Time of Inspection: 14:10
Date of Inspection: 06/18/2019
Serial Number: 80-000966
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#:AG831804 Exp: 11/14/2020
0.000	0.050	0.081	0.199	0.078
0.000	0.050	0.080	0.199	0.078
0.000	0.050	0.081	0.200	0.078
0.000	0.050	0.080	0.199	0.078
0.000	0.050	0.080	0.199	0.077
0.000	0.050	0.081	0.199	0.078
0.000	0.051	0.080	0.200	0.078
0.000	0.050	0.080	0.199	0.078
0.000	0.050	0.080	0.199	0.078
0.000	0.050	0.081	0.199	0.077

Standard Deviations	0.0003	0.0005	0.0004	0.0004

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

Remarks:

SP BK 6/19/19

The above instrument complies (X) 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.

THOMAS J GRAHAM
Signature and Printed Name

06/18/2019
Date

FDLE/ATP Form 41 –Revised August 2005

80-000966
6/18/19
JD

OSCEOLA COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-000966
06/18/2019
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	12:18
Control Test	0.050	12:18
Air Blank	0.000	12:19
Control Test	0.049	12:20
Air Blank	0.000	12:20
Control Test	0.049	12:21
Air Blank	0.000	12:21
Control Test Stats		
Average	0.0493	
Std Dev	0.0006	
Rel Std Dev(%)	1.1703	

JD
Operator's Signature

OSCEOLA COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-000966
06/18/2019
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	12:28
Control Test	0.081	12:28
Air Blank	0.000	12:29
Control Test	0.080	12:30
Air Blank	0.000	12:30
Control Test	0.080	12:31
Air Blank	0.000	12:31
Control Test Stats		
Average	0.0803	
Std Dev	0.0006	
Rel Std Dev(%)	0.7187	

JD
Operator's Signature

OSCEOLA COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-000966
06/18/2019
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	12:23
Control Test	0.196	12:24
Air Blank	0.000	12:24
Control Test	0.197	12:25
Air Blank	0.000	12:25
Control Test	0.198	12:26
Air Blank	0.000	12:27
Control Test Stats		
Average	0.1970	
Std Dev	0.0010	
Rel Std Dev(%)	0.5076	

6/18/19 JD ~~JD~~ JD
Operator's Signature

OSCEOLA COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-000966
06/18/2019
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	12:32
Control Test	0.079	12:33
Air Blank	0.000	12:33
Control Test	0.078	12:34
Air Blank	0.000	12:34
Control Test	0.078	12:34
Air Blank	0.000	12:35
Control Test Stats		
Average	0.0783	
Std Dev	0.0006	DGS
Rel Std Dev(%)	0.7370	

SP
RK
6/19/19

JD
Operator's Signature

Calibration Certificate

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

This is to certify the calibration of Intoxilyzer 8000 serial number 80-000966 , manufactured by CMI, Inc. was calibrated in accordance with FDLE/ATP Form 36 - Department Inspection Procedures - Intoxilyzer 8000.

Serial Number:	80-000966
Owning Agency:	OSCEOLA COUNTY SO
Calibration Date:	06/18/2019
Calibration Time:	14:10

	UNCERTAINTY* ±
0.050 g/ 210 L	0.004
0.080 g/ 210 L	0.004
0.200 g/ 210 L	0.007
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 99.73% 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.

06/18/2019
Date

THOMAS J GRAHAM,
Department Inspector

SP BK 6/19/19

FDLE
Florida Department of Law Enforcement

INSTRUMENT PROCESSING SHEET

Agency Osceola County SO S/N 80-000966

Date In 05/07/2019 DI Completion Date 05/08/2019 ☑Ship ☐P/U ☐H/D ☐CMI ☐EE

Intake Performed By JD

- ☑ Annual
- ☐ Registration
- ☑ Return from CMI / EE

Visual Inspection:

- ☑ Case ☑ Handle
- ☑ Keyboard ☑ Dry Gas Shelf
- ☑ Feet ☑ Breath Tube
- ☑ Ports ☑ Screws Tight

Other Equipment/ Accessories:

- ☐ Power cord ☐ Printer Cable
- ☑ Static Bag ☐ 12V DC Cable

Notes: _____

Final Release Date

FDLE

MAY 09 2019

Alcohol Testing Program

Quality Checks Performed By JD

- ☑ Breath Tube Screen
- ☑ Replace External O-Rings
- ☑ Instrument Set Up Verified
- ☑ R-Value 175
- ☑ Flow Verification (L/s)

Flow Column # ATP-105

32 mm .167 (.139 - .169)
36 mm .187 (.156 - .190)
53 mm .257 (.228 - .278)
103 mm .535 (.447 - .547)

- ☑ Barometric Pressure Check

Gauge ID # 28427

- ☑ Stability Checks

Simulator	Serial #	Lot #/Exp
0.050	SD1018	201707D
		07/25/2019
0.080	SD3962	201707E
		07/25/2019
0.200	G2078	201707C
		07/24/2019
0.080 DGS	N/A	AG831804
		11/14/2020

Flow Calibration Performed By _____

Flow Column # _____

- ☐ 5L/min – 17mm
- ☐ 15L/min – 53mm
- ☐ 30L/min – 103mm
- ☐ R-Value _____
- ☐ Post Calibration Verification (L/s)

Flow Column # _____

32 mm _____ (.139 - .169)
36 mm _____ (.156 - .190)
53 mm _____ (.228 - .278)
103 mm _____ (.447 - .547)

Maintenance Performed By _____

- ☐ Battery Replacement
- ☐ Dry Gas Regulator Replacement
- ☐ Breath Tube Replacement
- ☐ Other _____

Temperature Checks Performed By JD

- ☑ Lab Temp °C 21.7

External Digital Therm. ID#: 300503

- ☑ 34°C +-.2 Serial #: SD1018
- ☑ 34°C +-.2 Serial #: SD3962
- ☑ 34°C +-.2 Serial #: G2078

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 JD

Barometric Pressure ID# 28662

Gauge 1016 Instrument 1015

Mouth Alcohol Solution Lot # 2018-B

Acetone Stock Solution Lot # 2018-A

Simulator	Serial Number
0.000	G4444
Interferent	G6621
0.050	SD1018
0.080	SD3962
0.200	G2078

Attachments

- ☑ Form 41
- ☑ Stability Checks
- ☑ Calibration Certificate
- ☐ Calibration Adjustment
- ☐ Post-Stability Checks
- ☐ Flow Calibration
- ☐ Form 40
- ☐ Other _____

Notes/Suggested Service: Please change the level 2 password to something unique. JD

- ☑ **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**

JDM 5/8/19 Brett Kirkland 5/9/19

Tech Review / Date Admin Review / Date

Florida Department of Law Enforcement
Alcohol Testing Program

DEPARTMENT INSPECTION REPORT - INTOXILYZER 8000

Agency: OSCEOLA COUNTY SO
Time of Inspection: 09:40
Date of Inspection: 05/08/2019
Serial Number: 80-000966
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#:AG831804 Exp: 11/14/2020
0.000	0.050	0.082	0.200	0.079
0.000	0.050	0.082	0.200	0.078
0.000	0.051	0.082	0.200	0.079
0.000	0.050	0.082	0.200	0.079
0.000	0.051	0.082	0.200	0.079
0.000	0.051	0.082	0.200	0.079
0.000	0.050	0.081	0.200	0.079
0.000	0.051	0.082	0.200	0.079
0.000	0.051	0.081	0.199	0.079
0.000	0.051	0.081	0.200	0.078

Standard Deviations	0.0005	0.0004	0.0003	0.0004

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

Remarks:

BK
5/9/19

The above instrument complies (X) 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.

TJ Graham — THOMAS J GRAHAM
Signature and Printed Name

05/08/2019
Date

FDLE/ATP Form 41 –Revised August 2005

80-000966
5/8/19
JD

OSCEOLA COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-000966
05/08/2019
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	07:41
Control Test	0.050	07:41
Air Blank	0.000	07:42
Control Test	0.049	07:43
Air Blank	0.000	07:43
Control Test	0.049	07:44
Air Blank	0.000	07:44
Control Test Stats		
Average	0.0493	
Std Dev	0.0006	
Rel Std Dev(%)	1.1703	

JD
Operator's Signature

OSCEOLA COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-000966
05/08/2019
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	07:31
Control Test	0.082	07:32
Air Blank	0.000	07:32
Control Test	0.080	07:33
Air Blank	0.000	07:33
Control Test	0.080	07:34
Air Blank	0.000	07:35
Control Test Stats		
Average	0.0807	
Std Dev	0.0012	
Rel Std Dev(%)	1.4314	

JD
Operator's Signature

OSCEOLA COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-000966
05/08/2019
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	07:36
Control Test	0.200	07:37
Air Blank	0.000	07:37
Control Test	0.198	07:38
Air Blank	0.000	07:38
Control Test	0.198	07:39
Air Blank	0.000	07:40
Control Test Stats		
Average	0.1987	
Std Dev	0.0012	
Rel Std Dev(%)	0.5812	

JD
Operator's Signature

OSCEOLA COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-000966
05/08/2019
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	07:51
Control Test	0.079	07:52
Air Blank	0.000	07:52
Control Test	0.078	07:53
Air Blank	0.000	07:53
Control Test	0.078	07:53
Air Blank	0.000	07:54
Control Test Stats		
Average	0.0783	
Std Dev	0.0006	
Rel Std Dev(%)	0.7370	

DGS

JD
Operator's Signature

Agm
BK 5/9/19

Calibration Certificate

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

This is to certify the calibration of Intoxilyzer 8000 serial number 80-000966 , manufactured by CMI, Inc. was calibrated in accordance with FDLE/ATP Form 36 - Department Inspection Procedures - Intoxilyzer 8000.

Serial Number:	80-000966
Owning Agency:	OSCEOLA COUNTY SO
Calibration Date:	05/08/2019
Calibration Time:	09:40

	UNCERTAINTY* ±
0.050 g/ 210 L	0.004
0.080 g/ 210 L	0.004
0.200 g/ 210 L	0.007
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 99.73% 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.

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05/08/2019
Date

THOMAS J GRAHAM,
Department Inspector

BK 5/9/19

Return Material Authorization

Ship to: ☑ CMI, Inc.

☐ Enforcement Electronics

Shipment to repair facility authorized by: Dan Lyons on 2/14/2019

Items Returned: Instrument ☑ Supplies ☐ Other ☐ Describe: _____

Instrument Model: Intoxilyzer 8000 Serial Number: 80-000966

Bill To Address:	Ship to Address:
Osceola County Sheriff's Office	FDLE Off-site Facility
Attn: Dan Lyons	Attn: Alcohol Testing Program
2601 Irlo Bronson Memorial Hwy.	813B Lake Bradford Rd.
Kissimmee, FL 34744	Tallahassee, FL 32304

Reason for Return:

Intoxilyzer will not power on when connected to outlet.

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: Dan Lyons

Phone #: (407)709-0010 Email: Dlyo@osceola.org

ATP Contact Name: TJ Graham ATP Email: thomasgraham@fdle.state.fl.us

FDLE
Florida Department of Law Enforcement

INSTRUMENT PROCESSING SHEET

Agency Osceola Corrections S/N 80-000966

Date In 2/13/19 DI Completion Date _____ ☐Ship ☐P/U ☐H/D ☑CMI ☐EE

Intake Performed By BK

☑ Annual
☐ Registration
☐ Return from CMI / EE

Visual Inspection:
☑ Case ☑ Handle
☑ Keyboard ☑ Dry Gas Shelf
☑ Feet ☑ Breath Tube
☑ Ports ☑ Screws Tight

Other Equipment/ Accessories:
☐ Power cord ☐ Printer Cable
☑ Static Bag ☐ 12V DC Cable

Notes: _____

Final Release Date

Quality Checks Performed By _____

☐ Breath Tube Screen
☐ Replace External O-Rings
☐ Instrument Set Up Verified
☐ R-Value _____
☐ Flow Verification (L/s)
Flow Column # _____
32 mm _____ (.139 - .169)
36 mm _____ (.156 - .190)
53 mm _____ (.228 - .278)
103 mm _____ (.447 - .547)
☐ Barometric Pressure Check
Gauge ID # _____
☐ Stability Checks

Simulator	Serial #	Lot #/Exp
0.050		
0.080		
0.200		
0.080 DGS	N/A	

Flow Calibration Performed By _____

Flow Column # _____
☐ 5L/min – 17mm
☐ 15L/min – 53mm
☐ 30L/min – 103mm
☐ R-Value _____
☐ Post Calibration Verification (L/s)
Flow Column # _____
32 mm _____ (.139 - .169)
36 mm _____ (.156 - .190)
53 mm _____ (.228 - .278)
103 mm _____ (.447 - .547)

Maintenance Performed By _____

☐ Battery Replacement
☐ Dry Gas Regulator Replacement
☐ Breath Tube Replacement
☐ Other _____

Temperature Checks Performed By ____

☐ Lab Temp °C _____
External Digital Therm. ID#: _____
☐ 34°C +-.2 Serial #: _____
☐ 34°C +-.2 Serial #: _____
☐ 34°C +-.2 Serial #: _____

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 _____

Barometric Pressure ID# _____
Gauge _____ Instrument _____
Mouth Alcohol Solution Lot # _____
Acetone Stock Solution Lot # _____

Simulator	Serial Number
0.000	
Interferent	
0.050	
0.080	
0.200	

Attachments

☐ Form 41
☐ Stability Checks
☐ Calibration Certificate
☐ Calibration Adjustment
☐ Post-Stability Checks
☐ Flow Calibration
☐ Form 40
☐ Other _____

Notes/Suggested Service: Instrument will not power on upon arrival. Sending to repair facility.

☐ **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**

Tech Review / Date _____ Admin Review / Date _____