



AGENCY INSPECTION AND OTHER ELECTRONIC DATA REVIEW

Agency: Hialeah Police Department

Instrument Serial Number: 80-002463

AGENCY INSPECTION DATA REVIEW
Agency Inspector: Richard Wylie
Date of Inspection: 08/12/2020
Time of Inspection: 09:25:23
Agency Inspection Discrepancy: [] Incomplete [] Untimely/Not Received [x] Erroneous Information
[] Agency Inspection Not Conducted or Records regarding Agency Inspection have not been uploaded.
[x] Lot Number [] Expiration Date for 0.08 g/ 210L [x] Alcohol Reference Solution [] Dry Gas Standard is [x] Incorrect [] Expired.
[] FDLE/ATP Form 39 states in part, "If a test must be repeated, the REASON must be entered when prompted and recorded in the Remarks section of FDLE/ATP Form 40 Agency Inspection Report - Intoxilyzer 8000. The [] REASON for repeating the following test(s); OR the [] Possible Cause and Corrective Action Taken on the following test(s) was not recorded:
[] Alcohol Free Subject Test [] Mouth Alcohol Test [] Alcohol Free Test [] Interferent Detect Test
[] 0.05 g/210L Test [] 0.08 g/210L Test [] 0.20 g/210L Test [] 0.08 g/210L Dry Gas Standard Test
[] FDLE/ATP Form 39 states in part, "If the instrument does not comply with the requirements of Chapter 11D-8, FAC, remove the instrument from service and notify the Department Inspector."
[] The Department Inspector was not notified. However, the issue was satisfactorily corrected and the repeated Agency Inspection complies with the requirements of Chapter 11D-8, FAC.
[] The Department Inspector was not notified. However, the repeated Agency Inspection does not comply with the requirements of Chapter 11D-8, FAC and the instrument was correctly removed from evidentiary use.
[] The Department Inspector was not notified. The repeated Agency Inspection does not comply with the requirements of Chapter 11D-8, FAC and the instrument was not removed from evidentiary use.
[] The Agency Inspection is noted as "Complies" when it does not comply with the requirements of Chapter 11D-8, FAC.
[] Other: _____

OTHER ELECTRONIC DATA REVIEW
[] Login Records
Date: _____
[] Cylinder Change Records
Date: _____
[] Control Test Records
Date: _____
[] Diagnostic Check Records
Date: _____
Comments:
The lot number for the 0.08 g/210 L Alcohol Reference Solution is incorrect (missing a number). Please see below for the required corrective action and return the amended Form 40 to your Department Inspector by 10/18/2020.

CORRECTIVE ACTION
[x] Record hand-written amendments on the FDLE/ATP Form 40, Agency Inspection Report, initial and date the amendments, mark the report "AMENDED", and forward a copy to the Department Inspector by 10/18/2020 (Date).
[] Provide a written explanation regarding the referenced item(s) to the Department Inspector by _____ (Date).
[] Upload the Agency Inspection(s).
[] Remove the instrument from evidentiary use until otherwise directed by the Department.
[] No action required
[] Other: _____

Taylor Guadalupe

Signature of Alcohol Testing Program Staff Member

9/18/2020

Date

AMENDED
Florida Department of Law Enforcement
Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: HIALEAH PD
 Time of Inspection: 09:25

Date of Inspection: 08/12/2020

Serial Number: 80-002463
 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#:201910D Exp: 10/22/2021	0.08g/210L Test (g/210L) Lot#:20198B Exp: 08/07/2021	0.20g/210L Test (g/210L) Lot#:201902C Exp: 02/20/2021	0.08 g/210L Dry Gas Std Test (g/210L) Lot#:1224982 Exp: 10/31/2022
0.000	0.048	0.077	0.196	0.080
0.000	0.049	0.078	0.198	0.080
0.000	0.049	0.079	0.198	0.080

Number of Simulators Used: 5

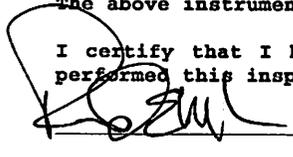
Remarks:

THE lot # for 0.08g/210L section was entered incorrectly. The correct lot # is 201908B

RWL 04-1512
 10/28/2020

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.

 Richard E. Wylie 04-1512 RICHARD E WYLIE
 Signature and Printed Name

08/12/2020
 Date



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[] Other: _____

Taylor Gutshnow
Signature of Alcohol Testing Program Staff Member

9/18/2020
Date