



## INSTRUMENT PROCESSING SHEET

Agency Hendry County SOS/N 80-001207Florida Department of  
Law EnforcementDate In 01/29/2020 DI Completion Date 01/29/2020☐ Ship ☒ P/U ☐ H/D ☐ CMI ☐ EE

<b>Intake</b> Performed By <u>mx</u> <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Registration <input 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 checked="" type="checkbox"/> Power cord <input type="checkbox"/> Printer Cable <input checked="" type="checkbox"/> Static Bag <input type="checkbox"/> 12V DC Cable Notes: _____ _____ _____ <b>Final Release Date</b> <div style="text-align: center; font-weight: bold; font-size: 1.2em;">FDLE</div> <div style="text-align: center; font-weight: bold; font-size: 1.2em;">FEB 17 2020</div> <div style="text-align: center; font-weight: bold; font-size: 1.2em;">Alcohol Testing</div> <div style="text-align: center; font-weight: bold; font-size: 1.2em;">Program</div>	<b>Quality Checks</b> Performed By <u>mx</u> <input checked="" type="checkbox"/> Breath Tube Screen <input checked="" type="checkbox"/> Replace External O-Rings <input checked="" type="checkbox"/> Instrument Set Up Verified <input checked="" type="checkbox"/> R-Value <u>184</u> <input checked="" type="checkbox"/> Flow Verification (L/s) Flow Column # <u>ATP 101</u> 32 mm <u>0.156</u> (.139 - .169) 36 mm <u>0.167</u> (.156 - .190) 53 mm <u>0.246</u> (.228 - .278) 103 mm <u>0.496</u> (.447 - .547) <input checked="" type="checkbox"/> Barometric Pressure Check Gauge ID # <u>68639</u> <input checked="" type="checkbox"/> Stability Checks <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Simulator</th> <th>Serial #</th> <th>Lot #/Exp</th> </tr> </thead> <tbody> <tr> <td>0.050</td> <td>MP4863</td> <td>201905A 05/14/2021</td> </tr> <tr> <td>0.080</td> <td>MP4864</td> <td>201905B 05/14/2021</td> </tr> <tr> <td>0.200</td> <td>MP5097</td> <td>201904D 04/30/2021</td> </tr> <tr> <td>0.080 DGS</td> <td>N/A</td> <td>AG916501 06/14/2021</td> </tr> </tbody> </table>	Simulator	Serial #	Lot #/Exp	0.050	MP4863	201905A 05/14/2021	0.080	MP4864	201905B 05/14/2021	0.200	MP5097	201904D 04/30/2021	0.080 DGS	N/A	AG916501 06/14/2021	<b>Flow Calibration</b> Performed By _____ 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) <b>Maintenance</b> Performed By _____ <input type="checkbox"/> Battery Replacement <input type="checkbox"/> Dry Gas Regulator Replacement <input type="checkbox"/> Breath Tube Replacement <input type="checkbox"/> Other _____ <b>Temperature Checks</b> Performed By <u>mx</u> <input checked="" type="checkbox"/> Lab Temp °C <u>22.52</u> External Digital Therm. ID#: <u>300504</u> <input checked="" type="checkbox"/> 34°C +/- .2 Serial #: <u>MP4863</u> <input checked="" type="checkbox"/> 34°C +/- .2 Serial #: <u>MP4864</u> <input checked="" type="checkbox"/> 34°C +/- .2 Serial #: <u>MP5097</u>																																												
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Notes/Suggested Service: <u>E-mailed</u> <div style="border: 1px solid blue; padding: 5px; display: inline-block; font-weight: bold; color: blue;">APPROVED</div> <u>01/31/2020</u> _____ _____ _____ _____	<input checked="" type="checkbox"/> Instrument Complies with Chapter 11D-8, FAC <input type="checkbox"/> Instrument Does Not Comply with Chapter 11D-8, FAC <input checked="" type="checkbox"/> Return to/Place into Evidentiary Use <input type="checkbox"/> Remain Out of Evidentiary Use <input checked="" type="checkbox"/> Conduct an Agency Inspection Before Evidentiary Use <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div> <u>SP 2/13/2020</u>              Tech Review / Date           </div> <div> <u>Butt/Kirkland 2/14/2020</u>              Admin Review / Date           </div> </div>																																																												

# Florida Department of Law Enforcement Alcohol Testing Program

## DEPARTMENT INSPECTION REPORT - INTOXILYZER 8000

Agency: HENDRY COUNTY S.O.  
Time of Inspection: 13:07

Date of Inspection: 01/29/2020

Serial Number: 80-001207  
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#:201905A Exp: 05/14/2021	0.08g/210L Test (g/210L) Lot#:201905B Exp: 05/14/2021	0.20g/210L Test (g/210L) Lot#:201904D Exp: 04/30/2021	0.08 g/210L Dry Gas Std Test (g/210L) Lot#:AG916501 Exp: 06/14/2021
0.000	0.049	0.080	0.199	0.079
0.000	0.049	0.080	0.200	0.079
0.000	0.049	0.080	0.200	0.079
0.000	0.049	0.080	0.200	0.080
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0.000	0.049	0.080	0.200	0.079
0.000	0.049	0.080	0.200	0.079
0.000	0.049	0.080	0.200	0.080
0.000	0.049	0.079	0.200	0.079
0.000	0.049	0.080	0.199	0.080

Standard Deviations	0.0000	0.0003	0.0004	0.0005
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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:

SP  
BK  
2/14/2020

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.

Michael D Haughey

MICHAEL D HAUGHEY

Signature and Printed Name

01/29/2020  
Date



TYPE OF TEST	SERIAL NUMBER	AGENCY	DATE	PERFORMED BY
Stabilities	80-001207	Hendry County SC	01/29/2020	MMK

0.05g/210L	0.08g/210L	0.20g/210L	DGS 0.08g/210L
0.047 to 0.053 <input checked="" type="checkbox"/>	0.077 to 0.083 <input checked="" type="checkbox"/>	0.194 to 0.206 <input checked="" type="checkbox"/>	0.077 to 0.083 <input checked="" type="checkbox"/>

HENDRY COUNTY S.O.  
Intoxilizer - Alcotest Analyzer  
Model 8000  
01/29/2020  
SN 80-001207  
Software: 8100.27

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DGS

Test	g/210L	Time
Air Blank	0.000	11:00
Control Test	0.050	11:00
Air Blank	0.000	11:01
Control Test	0.050	11:02
Air Blank	0.000	11:02
Control Test	0.049	11:03
Air Blank	0.000	11:03
Control Test	0.000	11:03
Average	0.0497	
Std Dev	0.0006	
Rel Std Dev(%)	1.1625	

Test	g/210L	Time
Air Blank	0.000	11:05
Control Test	0.081	11:06
Air Blank	0.000	11:06
Control Test	0.080	11:07
Air Blank	0.000	11:08
Control Test	0.079	11:08
Air Blank	0.000	11:09
Control Test	0.000	11:09
Average	0.0800	
Std Dev	0.0010	
Rel Std Dev(%)	1.2500	

Test	g/210L	Time
Air Blank	0.000	11:10
Control Test	0.201	11:11
Air Blank	0.000	11:11
Control Test	0.198	11:12
Air Blank	0.000	11:13
Control Test	0.198	11:13
Air Blank	0.000	11:14
Control Test	0.000	11:14
Average	0.1990	
Std Dev	0.0017	
Rel Std Dev(%)	0.8704	

Test	g/210L	Time
Air Blank	0.000	11:15
Control Test	0.080	11:15
Air Blank	0.000	11:16
Control Test	0.080	11:16
Air Blank	0.000	11:17
Control Test	0.080	11:17
Air Blank	0.000	11:18
Control Test	0.000	11:18
Average	0.0800	
Std Dev	0.0000	
Rel Std Dev(%)	0.0000	

MMK

MMK

MMK

MMK

2/4/2020



# Calibration Certificate

Florida Department of Law Enforcement  
Alcohol Testing Program  
4700 Terminal Drive, Suite 1  
Ft. Myers, FL 33907

This is to certify the calibration of Intoxilyzer 8000 serial number 80-001207, manufactured by CML, Inc. was calibrated in accordance with FDLE/ATP Form 36 - Department Inspection Procedures - Intoxilyzer 8000.

Serial Number:	<u>80-001207</u>	UNCERTAINTY * $\pm$
Owning Agency:	<u>HENDRY COUNTY S.O.</u>	0.050 g/ 210 L 0.004
Calibration Date:	<u>01/29/2020</u>	0.080 g/ 210 L 0.005
Calibration Time:	<u>13:07</u>	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  $\pm 0.005$  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.

01/29/2020

Date

MICHAEL D HAUGHEY,  
Department Inspector

FDLE/ATP Form 69 July 2018

Issuing Authority: Alcohol Testing Program

Service • Integrity • Respect • Quality

2/14/2020  
13K