



INSTRUMENT PROCESSING SHEET

Agency Hialeah PDS/N 80-002464

Florida Department of Law Enforcement

Date In 06/09/2020 DI Completion Date 06/12/2020 Ship P/U H/D CMI EE

Intake Performed By <u>TDG</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: _____ _____ Final Release Date <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;">JUN 29 2020</div> <div style="text-align: center; font-weight: bold;">Alcohol Testing Program</div>	Quality Checks Performed By <u>TDG</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>ATP104</u> 32 mm <u>0.156</u> (.139 - .169) 36 mm <u>0.167</u> (.156 - .190) 53 mm <u>0.238</u> (.228 - .278) 103 mm <u>0.507</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>MP5092</td> <td>201905A 05/14/2021</td> </tr> <tr> <td>0.080</td> <td>MP5093</td> <td>201905B 05/14/2021</td> </tr> <tr> <td>0.200</td> <td>MP5094</td> <td>201904D 04/30/2021</td> </tr> <tr> <td>0.080 DGS</td> <td>N/A</td> <td>AG003005 01/30/2022</td> </tr> </tbody> </table>	Simulator	Serial #	Lot #/Exp	0.050	MP5092	201905A 05/14/2021	0.080	MP5093	201905B 05/14/2021	0.200	MP5094	201904D 04/30/2021	0.080 DGS	N/A	AG003005 01/30/2022	Flow Calibration 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) Maintenance Performed By _____ <input type="checkbox"/> Battery Replacement <input type="checkbox"/> Dry Gas Regulator Replacement <input type="checkbox"/> Breath Tube Replacement <input type="checkbox"/> Other _____ Temperature Checks Performed By <u>MH</u> <input checked="" type="checkbox"/> Lab Temp °C <u>22.38</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>Emailed</u> <div style="font-size: 1.5em; font-weight: bold; color: red; text-align: center;"> <input checked="" type="checkbox"/> APPROVED <u>6/15/2020</u> </div>	<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="font-size: 1.2em; font-weight: bold; color: blue; text-align: center;"> <u>SP 6/28/20</u> <u>Brett Kirkland 6/29/2020</u> </div>																																																												
	Tech Review / Date _____ Admin Review / Date _____																																																												

Florida Department of Law Enforcement Alcohol Testing Program

DEPARTMENT INSPECTION REPORT - INTOXILYZER 8000

Agency: HIALEAH PD

Time of Inspection: 13:46

Date of Inspection: 06/12/2020

Serial Number: 80-002464

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#:AG003005 Exp: 01/30/2022
0.000	0.048	0.077	0.196	0.079
0.000	0.048	0.077	0.196	0.079
0.000	0.048	0.078	0.196	0.079
0.000	0.048	0.077	0.196	0.079
0.000	0.048	0.078	0.196	0.078
0.000	0.048	0.078	0.196	0.079
0.000	0.048	0.078	0.196	0.078
0.000	0.048	0.078	0.197	0.079
0.000	0.048	0.078	0.196	0.078
0.000	0.048	0.078	0.197	0.078

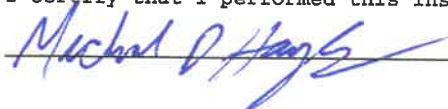
Standard Deviations	0.0000	0.0004	0.0004	0.0005
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Average Standard Deviation of 0.05, 0.08 and 0.20 g/210L Tests: 0.0003 Number of Simulators Used: 5

Remarks:

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
Signature and Printed Name

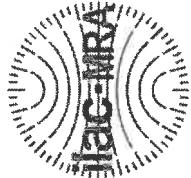
06/12/2020
Date

SP
BK
6/29/2020

TYPE OF TEST	SERIAL NUMBER	AGENCY	DATE	PERFORMED BY
Stabilities	80-0024074	Hialeah PD	6/10/2020	MC

0.05g/210L 0.047 to 0.053 <input checked="" type="checkbox"/>	0.08g/210L 0.077 to 0.083 <input checked="" type="checkbox"/>	0.20g/210L 0.194 to 0.206 <input checked="" type="checkbox"/>	0.08g/210L 0.077 to 0.083 <input checked="" type="checkbox"/>	0.20g/210L 0.194 to 0.206 <input checked="" type="checkbox"/>	0.08g/210L 0.077 to 0.083 <input checked="" type="checkbox"/>	0.08g/210L 0.077 to 0.083 <input checked="" type="checkbox"/>																																																																																																																																																																																							
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Air Blank	0.000	12:32																																																																																																																																																																																											
Control Test	0.080	12:33																																																																																																																																																																																											
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<p style="text-align: center;">Operator's Signature</p> <p style="text-align: center;"><i>Joseph Quinter</i></p>		<p style="text-align: center;">Operator's Signature</p> <p style="text-align: center;"><i>Joseph Quinter</i></p>		<p style="text-align: center;">Operator's Signature</p> <p style="text-align: center;"><i>Joseph Quinter</i></p>		<p style="text-align: center;">Operator's Signature</p> <p style="text-align: center;"><i>Joseph Quinter</i></p>		<p style="text-align: center;">Operator's Signature</p> <p style="text-align: center;"><i>Joseph Quinter</i></p>																																																																																																																																																																																					

SR
BSK
6/29/2020



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 80-002464, manufactured by CMI, Inc. was calibrated in accordance with FDLE/ATP Form 36 - Department Inspection Procedures - Intoxilyzer 8000.

Serial Number:	<u>80-002464</u>	UNCERTAINTY* ±
Owning Agency:	<u>HIALEAH PD</u>	0.050 g/ 210 L
Calibration Date:	<u>06/12/2020</u>	0.080 g/ 210 L
Calibration Time:	<u>13:46</u>	0.200 g/ 210 L
		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).

The instrument results before and after any adjustment are found in the associated pre and post stability checks.

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.

Michael Haughey 06/12/2020
MICHAEL D HAUGHEY, Department Inspector

SP

FDLE/ATP Form 69 April 2020
Issuing Authority: Alcohol Testing Program

Service • Integrity • Respect • Quality

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BSK
6/29/2020

Florida Department of Law Enforcement Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: HIALEAH PD

Serial Number: 80-002464

Time of Inspection: 11:32

Date of Inspection: 06/10/2020

Software: 8100.27

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

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

Number of Simulators Used: _____

Remarks:

AI BYPASSED. COMPLIANCE NOT DETERMINED.

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.



TAYLOR D GUTSCHOW

Signature and Printed Name

06/10/2020

Date

SP
YBK
6/29/20i

Forgot to print before
uploading DI MK