Florida Department of Law Enforcement Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: ESCAMBIA COUNTY SO

Serial Number: 80-000751

Time of Inspection:17:26

Date of Inspection:11/10/2021

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#:202101C Exp: 01/12/2023	0.08g/210L Test (g/210L) Lot#:202007A Exp: 07/21/2022	0.20g/210L Test (g/210L) Lot#: 202106B Exp: 06/22/2023	0.08 g/210L Dry Gas Std Test (g/210L) Lot #: 1045940 Exp: 11/13/2021
0.010 / 0.000	0.047	0.076	0.195 / 0.197	0.083
0.000 / 0.000	0.048	0.077	0.198 / 0.198	0.083
0.000 / 0.000	0.048	0.078	0.197 / 0.197	0.083

Number of	Simulat	ors Used	: <u>5</u>								
Remarks: TIGHTENED	SEALS.	20: RFI	Detect.	lf#	H.4 D	CEIL	PHONE	IN 1260 K	By	141270	WE (SLS
The above instrument complies (X) 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.											
that I pe	A A A A A A A A A A A A A A A A A A A	firs ins	183	s		SAMU	EL L SHEL	LEY	110-6	, FAC.	
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FDLE/ATP Form 40 -- March 2004

Reprinted From Database



AGENCY INSPECTION AND OTHER ELECTRONIC DATA REVIEW

Agency: Escambia County SO Instrument Serial Number: 80-000751

۸GE	NCY INSPECTION DATA REVIEW			
	ncy Inspector: Samuel Shelley Date of Inspection: 11-10-2021 Time of Inspection: 17:26			
Age	ncy Inspection Discrepancy: Incomplete Untimely/Not Received Erroneous Information Procedural Other			
	Agency Inspection Not Conducted or Records regarding Agency Inspection have not been uploaded.			
	Lot Number □Expiration Date forg/ 210L □Alcohol Reference Solution □Dry Gas Standard is □Incorrect □Expired.			
X	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 Reason 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 0.08 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:			
ОТН	ER ELECTRONIC DATA REVIEW			
	Login Records Date: Comments:			
	Cylinder Change Records Date:			
	Control Test Records Date:			
	Diagnostic Check Records Date:			
	RECTIVE 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 (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:			
Israel Soto Digitally signed by Israel Soto Date: 2021.11.18 08:18:26 -05'00'				
	ignature of Alcohol Testing Program Staff Member Date 11/18/2021 Date			