

Florida Department of Law Enforcement Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: LAKELAND PD
Time of Inspection: 14:47

Date of Inspection: 03/22/2021

Serial Number: 80-003945
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#: 201908B Exp: 08/07/2021	0.20g/210L Test (g/210L) Lot#: 202005A Exp: 05/12/2022	0.08 g/210L Dry Gas Std Test (g/210L) Lot#: 17919080A1 Exp: 08/05/2021
0.000	0.046	0.077	0.195	0.082
0.000	0.048	0.078	0.197	0.082
0.000	0.048	0.078	0.198	0.082

Number of Simulators Used: 5

Remarks:

AMEND REPORT - THE LOT NUMBER OF THE 0.08g/210L TEST WAS MISTYPED. THE CORRECT LOT NUMBER ~~201908B~~ ^{CA} 201908B.
- CA 5-7-21

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.



CAMILO J ALMEIDA

Signature and Printed Name

03/22/2021

Date



AGENCY INSPECTION AND OTHER ELECTRONIC DATA REVIEW

Agency: Lakeland PD

Instrument Serial Number: 80-003945

AGENCY INSPECTION DATA REVIEW		
Agency Inspector: Camilo Almeida	Date of Inspection: 03/22/2021	Time of Inspection: 14:47:50
Agency Inspection Discrepancy: <input type="checkbox"/> Incomplete <input type="checkbox"/> Untimely/Not Received <input checked="" type="checkbox"/> Erroneous Information <input type="checkbox"/> Procedural <input type="checkbox"/> Other _____		
<input type="checkbox"/> Agency Inspection Not Conducted or Records regarding Agency Inspection have not been uploaded.		
<input checked="" type="checkbox"/> Lot Number <input type="checkbox"/> Expiration Date for 0.08 g/ 210L <input checked="" type="checkbox"/> Alcohol Reference Solution <input type="checkbox"/> Dry Gas Standard is <input checked="" type="checkbox"/> Incorrect <input type="checkbox"/> Expired.		
<input type="checkbox"/> 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 <input type="checkbox"/> REASON for repeating the following test(s); OR the <input type="checkbox"/> Possible Cause and Corrective Action Taken on the following test(s) was not recorded: <input type="checkbox"/> Alcohol Free Subject Test <input type="checkbox"/> Mouth Alcohol Test <input type="checkbox"/> Alcohol Free Test <input type="checkbox"/> Interferent Detect Test <input type="checkbox"/> 0.05 g/210L Test <input type="checkbox"/> 0.08 g/210L Test <input type="checkbox"/> 0.20 g/210L Test <input type="checkbox"/> 0.08 g/210L Dry Gas Standard Test		
<input type="checkbox"/> 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." <input type="checkbox"/> 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. <input type="checkbox"/> 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. <input type="checkbox"/> 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.		
<input type="checkbox"/> The Agency Inspection is noted as "Complies" when it does not comply with the requirements of Chapter 11D-8, FAC.		
<input type="checkbox"/> Other: _____		

OTHER ELECTRONIC DATA REVIEW	
<input type="checkbox"/> Login Records Date: _____	Comments: The lot number of the 0.08 g/210 L Test was mistyped. Please see below for the required corrective action.
<input type="checkbox"/> Cylinder Change Records Date: _____	
<input type="checkbox"/> Control Test Records Date: _____	
<input type="checkbox"/> Diagnostic Check Records Date: _____	

CORRECTIVE ACTION
<input checked="" type="checkbox"/> 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 5/30/2021 (Date).
<input type="checkbox"/> Provide a written explanation regarding the referenced item(s) to the Department Inspector by _____ (Date).
<input type="checkbox"/> Upload the Agency Inspection(s).
<input type="checkbox"/> Remove the instrument from evidentiary use until otherwise directed by the Department.
<input type="checkbox"/> No action required
<input type="checkbox"/> Other: _____

Taylor Gutschow Digitally signed by Taylor Gutschow Date: 2021.04.30 13:31:07 -04'00'
Signature of Alcohol Testing Program Staff Member

4/30/2021
Date

Florida Department of Law Enforcement Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: LAKELAND PD

Time of Inspection: 09:55

Date of Inspection: 05/07/2021

Serial Number: 80-003945

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		No

Alcohol Free Test (g/210L)	0.05g/210L Test (g/210L) Lot#: 201910D Exp: 10/22/2021	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:
0.000	0.044 / 0.045			
0.000	0.045 / 0.045			
0.000	0.045 / 0.044			

Number of Simulators Used: 4

Remarks:

05: Control Outside Tolerance, Control Outside Tolerance. Non-compliance: .

SIMULATORS NOT AT TEMP, NEEDED MORE TIME. CA 9/14/21

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.

CAMILO J ALMEIDA
Signature and Printed Name

05/07/2021
Date

Florida Department of Law Enforcement Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: LAKELAND PD

Time of Inspection: 09:09

Date of Inspection: 05/07/2021

Serial Number: 80-003945

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		No

Alcohol Free Test (g/210L)	0.05g/210L Test (g/210L) Lot#: 201910D Exp: 10/22/2021	0.08g/210L Test (g/210L) Lot#: 201908B Exp: 08/07/2021	0.20g/210L Test (g/210L) Lot#: Exp:	0.08 g/210L Dry Gas Std Test (g/210L) Lot#: Exp:
0.000	0.045	0.074 / 0.073		
0.000	0.046	0.074 / 0.073		
0.000	0.046	0.075 / 0.073		

Number of Simulators Used: 5

Remarks:

08: Control Outside Tolerance, Control Outside Tolerance. Non-compliance: .

SIMULATORS NOT AT TEMP, NEEDED MORE TIME. CA 9/14/21

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.

CAMILO J ALMEIDA

Signature and Printed Name

05/07/2021
Date

Florida Department of Law Enforcement Alcohol Testing Program

AGENCY INSPECTION REPORT – INTOXILYZER 8000

Agency: LAKELAND PD

Time of Inspection: 15:19

Date of Inspection: 05/20/2021

Serial Number: 80-003945

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		No

Alcohol Free Test (g/210L)	0.05g/210L Test (g/210L) Lot#:201910D Exp: 10/22/2021	0.08g/210L Test (g/210L) Lot#:201908B Exp: 08/07/2021	0.20g/210L Test (g/210L) Lot#:_____ Exp:_____	0.08 g/210L Dry Gas Std Test (g/210L) Lot#:_____ Exp:_____
0.000	0.045	0.069 / 0.073		
0.000	0.047	0.070 / 0.072		
0.000	0.047	0.072 / 0.072		

Number of Simulators Used: 3

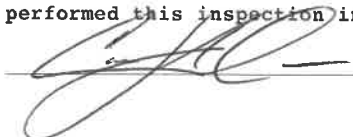
Remarks:

08: Control Outside Tolerance, Control Outside Tolerance. Non-compliance: .

SIMULATORS NOT AT TEMP, NEEDED MORE TIME. CA 9/14/21

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.



CAMILO J ALMEIDA

Signature and Printed Name

05/20/2021
Date

Florida Department of Law Enforcement Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: LAKELAND PD
Time of Inspection: 15:19

Date of Inspection: 05/20/2021

Serial Number: 80-003945
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		No

Alcohol Free Test (g/210L)	0.05g/210L Test (g/210L) Lot#:201910D Exp: 10/22/2021	0.08g/210L Test (g/210L) Lot#:201908B Exp: 08/07/2021	0.20g/210L Test (g/210L) Lot#: Exp:	0.08 g/210L Dry Gas Std Test (g/210L) Lot#: Exp:
0.000	0.045	0.069 / 0.073		
0.000	0.047	0.070 / 0.072		
0.000	0.047	0.072 / 0.072		

Number of Simulators Used: 3

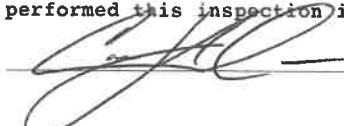
Remarks:

08: Control Outside Tolerance, Control Outside Tolerance. Non-compliance: .

SIMULATORS NOT AT TEMP, NEEDED MORE TIME. 9/14/21 CA

The above instrument complies () does not comply (X) 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.



Signature and Printed Name

CAMILO J ALMEIDA

05/20/2021
Date