

Florida Department of Law Enforcement Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: PINELLAS COUNTY SO
Time of Inspection: 19:47

Date of Inspection: 07/08/2021

Serial Number: 80-005290
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#:202007A Exp: 07/21/2022	0.20g/210L Test (g/210L) Lot#:202005A Exp: 05/12/2022	0.08 g/210L Dry Gas Std Test (g/210L) Lot#:AG011102 Exp: 04/20/2022
0.000	0.047	0.078	0.194	0.080
0.000	0.047	0.078	0.195	0.079
0.000	0.047	0.077	0.196	0.079

Number of Simulators Used: 5

Remarks:

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.

M. Deane

M DEANE

Signature and Printed Name

07/08/2021
Date

Florida Department of Law Enforcement Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: PINELLAS COUNTY SO
Time of Inspection: 20:55

Date of Inspection: 08/19/2021

Serial Number: 80-005290
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	

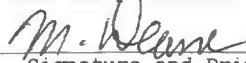
Alcohol Free Test (g/210L)	0.05g/210L Test (g/210L) Lot#:201910D Exp: 10/22/2021	0.08g/210L Test (g/210L) Lot#:202007A Exp: 07/21/2022	0.20g/210L Test (g/210L) Lot#:202005A Exp: 05/12/2022	0.08 g/210L Dry Gas Std Test (g/210L) Lot#:AG011102 Exp: 04/20/2022
0.000	0.048	0.079	0.196	0.081
0.000	0.048	0.079	0.198	0.080
0.000	0.048	0.079	0.199	0.080

Number of Simulators Used: 5

Remarks:

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.



M DEANE

Signature and Printed Name

08/19/2021
Date

Florida Department of Law Enforcement Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: PINELLAS COUNTY SO
Time of Inspection: 21:37

Date of Inspection: 09/23/2021

Serial Number: 80-005290
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#:202005A Exp: 05/12/2022	0.08 g/210L Dry Gas Std Test (g/210L) Lot#:AG011102 Exp: 04/20/2022
0.000	0.047	0.078	0.196	0.080
0.000	0.047	0.079	0.197	0.080
0.000	0.047	0.080	0.197	0.080

Number of Simulators Used: 5

Remarks:

ON PRIOR INSPECTION POWER SURGE FRIED SIM HAD TO RESTART

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.

M. Deane

M DEANE

Signature and Printed Name

09/23/2021
Date



AGENCY INSPECTION AND OTHER ELECTRONIC DATA REVIEW

Agency: Pinellas CSO

Instrument Serial Number: 80-005290

AGENCY INSPECTION DATA REVIEW
Agency Inspector: Malcolm Deane
Date of Inspection: 10/28/2021
Time of Inspection: 22:26:11
Agency Inspection Discrepancy: [X] Erroneous Information
[] Agency Inspection Not Conducted or Records regarding Agency Inspection have not been uploaded.
[X] Lot Number [X] Expiration Date for 0.20 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 and expiration date for the 0.20 g/10 L Alcohol Reference Solution was mistyped. Please see below for corrective action.

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 01/05/2022.
[] 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 Gutschow Digitally signed by Taylor Gutschow
Date: 2021.11.27 12:15:30 -05'00'
Signature of Alcohol Testing Program Staff Member

11/27/2021
Date

Florida Department of Law Enforcement Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: PINELLAS COUNTY SO
Time of Inspection: 22:26

Date of Inspection: 10/28/2021

Serial Number: 80-005290
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) <i>6B MD</i> Lot#:202105B Exp: 05 22/2023 <i>06 MD</i>	0.08 g/210L Dry Gas Std Test (g/210L) Lot#:AG011102 Exp: 04/20/2022
0.000	0.049	0.078	0.197	0.080
0.000	0.049	0.079	0.198	0.080
0.000	0.049	0.079	0.198	0.080

Number of Simulators Used: 5

Remarks: *AMENDED : HUMAN TYPO ERROR (0.20 LOT + DATE)
ON
12-15-2021*

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.

M. Deane M DEANE
Signature and Printed Name

10/28/2021
Date

Florida Department of Law Enforcement Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: PINELLAS COUNTY SO
Time of Inspection: 20:17

Date of Inspection: 11/24/2021

Serial Number: 80-005290
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) <i>WB MD</i> Lot#:202105B Exp: 05 22/2023 <i>06 MD</i>	0.08 g/210L Dry Gas Std Test (g/210L) Lot#:AG011102 Exp: 04/20/2022
0.000	0.049	0.078	0.196	0.081
0.000	0.049	0.079	0.198	0.081
0.000	0.049	0.079	0.197	0.081

Number of Simulators Used: 5

Remarks:

*AMENDED: HUMAN TYPO ERROR (+20 LOT + DATE)
ON
12-15-2021*

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.

M. Deane

M DEANE

Signature and Printed Name

11/24/2021
Date

Florida Department of Law Enforcement Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: PINELLAS COUNTY SO
Time of Inspection: 21:35

Date of Inspection: 12/09/2021

Serial Number: 80-005290
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) <i>0B MD</i> Lot#:202105B Exp: 05 22/2023 <i>06 MD</i>	0.08 g/210L Dry Gas Std Test (g/210L) Lot#:AG011102 Exp: 04/20/2022
0.000	0.048	0.078	0.195	0.082
0.000	0.048	0.079	0.197	0.081
0.000	0.049	0.079	0.197	0.081

Number of Simulators Used: 5

Remarks: *AMENDED : HUMAN TYPO ERROR (.20 LOT + DATE)
DN
12-15-2021*

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.

M. Deane
M DEANE
Signature and Printed Name

12/09/2021
Date