

**Return Material Authorization**

**Ship to:**     CMI, Inc.  
                   Enforcement Electronics

Shipment to repair facility authorized by: Joseph Farley on 6/18/2021

Items Returned:    Instrument     Supplies     Other  Describe: \_\_\_\_\_  
Instrument Model: Intoxilyzer 8000                      Serial Number: 80-006765

<b>Bill To Address:</b> <u>Florida Highway Patrol</u> _____ _____ _____ _____	<b>Ship to Address:</b> <u>FDLE - ATP</u> _____ <u>Off-site Mail Facility</u> _____ <u>813B Lake Bradford Road</u> _____ <u>Tallahassee, FL 32304</u> _____ _____
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**Reason for Return:**  
The instrument displays Error 017. Please upload/recover any data prior to clearing the  
memory. The customer believes test data is on the instrument.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please choose one of the following options:**

1. I \_\_\_\_\_, authorize all repairs.

2. I \_\_\_\_\_, authorize repairs up to \$ \_\_\_\_\_.

3. I require an estimate **BEFORE** any repairs will be authorized and/ or conducted.

Please contact: Name: Joseph Farley  
Phone #: 904-860-6050                      Email: josephfarley@flhsmv.gov

ATP Contact Name: Richard Williams                      ATP Email: RichardWilliams@fdle.state.fl.us

# Florida Department of Law Enforcement Alcohol Testing Program

## DEPARTMENT INSPECTION REPORT - INTOXILYZER 8000

Agency: FHP Troop G  
Time of Inspection:

Date of Inspection:

Serial Number: 80-006765  
Software:

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

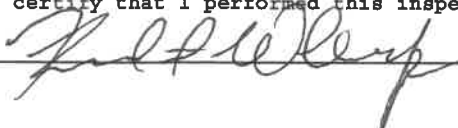
Alcohol Free Test (g/210L)	0.05g/210L Test (g/210L) Lot#: _____ Exp: _____	0.08g/210L Test (g/210L) Lot#: _____ Exp: _____	0.20g/210L Test (g/210L) Lot#: _____ Exp: _____	0.08 g/210L Dry Gas Std Test (g/210L) Lot#: _____ Exp: _____

Standard Deviations				
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Average Standard Deviation of 0.05, 0.08 and 0.20 g/210L Tests: \_\_\_\_\_ Number of Simulators Used: \_\_\_\_\_

**Remarks:**

Instrument did not receive 2021 Department Inspection due to being at repair.

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.  
  
 \_\_\_\_\_  
 Signature and Printed Name  
 \_\_\_\_\_  
 Date