

## DEPARTMENT INSPECTOR FIELD NOTES

Agency: New Smyrna Beach Police Department Instrument Serial Number: n/a				
Department Inspection:		Agency Inspection/Ag	gency Contact:	Records Audit:
	Registration Request for Registration Attached Annual Inspection After Repair Other:	<ul><li>□ Agency Inspection</li><li>☑ Agency Contact</li><li>□ Other</li></ul>		The following records were audited:  ☐ Agency Inspection Reports ☐ Breath Test Instrument Repair/Maintenance Records ☐ Instrument Registration
	Barometric Pressure: Gauge	Date of Notification/C	Analysis	
Con	Instrument Instrument Set Up Verified nments:	Agency Inspector: Billy Helms (Breath Test	Operator)	☐ Other:
Unable to audit records. The Agency Inspector was unavailable.				
$\overline{}$	rument/Area:	Equipment:		Supplies:
	Clean/Dry Secure Limited Access Other:	<ul> <li>☑ Proper Number of Simulators</li> <li>☐ Checked Simulators for Air Leak Resistant Seal and Proper Temperature</li> <li>☑ Class A Glassware</li> </ul>		<ul> <li>☑ Distilled/Deionized Water</li> <li>☑ Mouth Alcohol Solution</li> <li>☑ Acetone Stock Solution</li> <li>☑ Alcohol Reference Solution</li> <li>☑ Dry Gas Standard</li> <li>☑ Mouth Pieces</li> </ul>
Comments:				
Ac	etion:			
	Instrument Complies with Chapter 11D-8, FAC		Comments: Compliant with Chapter 11D-8, FAC	
	Return to/Place into Evidentiary Use Remove from Evidentiary Use			
☐ Conduct an Agency Inspection Before Evidentiary Use				
Taylor Gutschow  Digitally signed by Taylor Gutschow Date: 2021.09.07 13:42:03 -04'00'			9/7/2021	
Signature of Alcohol Testing Program Staff Member Original – FDLE			Copy – Agency	Date