## Return Material Authorization

| Ship to:   |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|
| Enforcement Electronics  |  |  |  |  |  |  |  |
| Shipment to repair facility authorized by: Captain Strickland on 1/10/2022   |  |  |  |  |  |  |  |
| <u>Items Returned:</u> Instrument ⊠ Supplies □ Other □ Describe:   |  |  |  |  |  |  |  |
| Instrument Model: Intoxilyzerv 8000 Serial Number: 80-006763   |  |  |  |  |  |  |  |
| Bill to Address: Florida Highway Patrol Troop L  ATTN: Captain Strickland  Lake Worth Svc. Plz. MM94  Law Enforcement Bldg. #9330  Lake Worth, FL 33467  |  |  |  |  |  |  |  |
| Reason for Return: I received 80-006763 (Florida Highway Patrol Troop L). The instrument is not working properly. During the stabilities testing the instrument had test exemptions (interferent detect, ambient fail) on all of the values. DVM also shows a great spike on the 3 filter, as high as S: 54. |  |  |  |  |  |  |  |
| Please choose one of the following options:  |  |  |  |  |  |  |  |
| 1. I, authorize all repairs.   |  |  |  |  |  |  |  |
| 2. I, authorize repairs up to \$   |  |  |  |  |  |  |  |
| ☑ 3. I require an estimate <u>BEFORE</u> any repairs will be authorized and/ or conducted.   |  |  |  |  |  |  |  |
| Please contact: Name: Captain Strickland   |  |  |  |  |  |  |  |
| Phone #: 561-357-4040 Email: kevinstrickland@flhsmv.gov  |  |  |  |  |  |  |  |
| ATP Contact Name: <u>David Reyes</u> ATP Email: <u>davidreyes@fdle.state.fl.us</u>   |  |  |  |  |  |  |  |

## Florida Department of Law Enforcement **Alcohol Testing Program**

## DEPARTMENT INSPECTION REPORT - INTOXILYZER 8000

| Agency: Florida Highwa<br>Time of Inspection:                      |   | Dat          | ce of Insp                              | ection: 202                | 22  |             | Number: 80-<br>re: 8100.27                      | 006763 |
|--|---|--------------|---|----------------------------|---|-------------|---|--------|
| Check or Test  |   | YES          | NO                                      | Check or Test              |   | YES         | NO  |        |
| Diagnostic Check   |   |              | 1                                       | Date and/or Time Adjusted  |   | diusted     | 1   |        |
| (Pre-Inspection): OK   |   |              |   | Date and, or time Adjusted |   |             |   |        |
| Minimum Sample Volume  |   |              |   | Barometric Pressure Sensor |   | ,           |   |        |
| Check: OK  |   |              |   | Check: OK                  |   |             | `   |        |
| Alcohol Free Subject   |   |              |   | Mouth Alcohol Test:        |   |             |   |        |
| Test: 0.000  |   |              |   | Slope Not Met              |   |             |   |        |
| Interferent Detect Test:   |   |              |   | Diagnostic Check           |   |             |   |        |
| Interferent Detect lest.   |   |              |   | (Post-Inspection): OK      |   |             |   |        |
| Interretent Deter  |   |              |   | (FOSC III                  | spection,.                                | OR          |   |        |
| Alcohol Free 0.05g/210L<br>Test (g/210L)<br>(g/210L) Lot#:<br>Exp: |   | <b>Test</b>  | 0.08g/210L<br>(g/210L)<br>Lot#:<br>Exp: | Test                       | 0.20g/210L 1<br>(g/210L)<br>Lot#:<br>Exp: |             | 0.08 g/210L<br>Dry Gas Std<br>(g/210L)<br>Lot#: |        |
|  | _   |              | -                                       |                            | •   | I           | Exp:  |        |
|  |   |              |   |                            |   |             |   |        |
|  |   |              |   |                            |   |             |   |        |
|  |   |              |   |                            |   |             |   |        |
|  |   |              |   |                            |   |             |   |        |
|  |   |              |   |                            |   |             |   |        |
|  |   |              |   |                            |   |             |   |        |
|  |   |              |   |                            |   |             |   |        |
|  |   |              |   |                            |   |             |   |        |
|  |   |              |   |                            |   |             |   |        |
| Glassia da Barria di Santa   |   |              |   |                            |   |             |   |        |
| Standard Deviations  |   |              |   |                            |   |             |   |        |
| Average Standard Devia   | ation of 0.05   | , 0.08 and   | i 0.20 g/210                            | OL Tests: _                | Numbe                                     | er of Simu  | lators Used:                                    |        |
| Remarks:   |   |              |   |                            |   |             |   |        |
| Instrument did not receiv the calendar year.                       | e a Department  | t Inspection | for 2022. It                            | was sent to r              | epair in Januar                           | y 2022 and  | did not return                                  | within |
|  |   |              |   |                            |   |             |   |        |
|  |   |              |   |                            |   |             |   |        |
|  |   |              |   |                            |   |             |   |        |
|  |   |              |   |                            |   |             |   |        |
|  |   | <b>-</b>     |   |                            |   |             |   |        |
| The above instrument o   |   |              | not comply                              | ш                          | vith Chapter :                            |             |   |        |
| I certify that I perfo   |   | <del>-</del> | in accordan                             | ce with the                | provisions                                | of Chapter  | 11D-8, FAC.                                     |        |
| Taylor Gutschow  | Digitally signed by Taylor<br>Date: 2022.12.29 15:04:39 | 9 -05'00'    | i anatuma an                            |                            |   | Taylor D. C | utschow   |        |

12/29/2022