



Calibration Certificate

Florida Department of Law Enforcement
Alcohol Testing Program
4700 Terminal Drive, Suite 1
Ft. Myers, FL 33907

This is to certify the calibration of Intoxilyzer 8000 serial number 80-007107, manufactured by CMI, Inc. was calibrated in accordance with FDLE/ATP Form 36 - Department Inspection Procedures - Intoxilyzer 8000.

Serial Number:	<u>80-007107</u>	UNCERTAINTY* $\pm$	
Owning Agency:	<u>BROWARD COUNTY S.O.</u>	0.050 g/ 210 L	0.004
Calibration Date:	<u>01/25/2022</u>	0.080 g/ 210 L	0.004
Calibration Time:	<u>11:34</u>	0.200 g/ 210 L	0.007
		0.080 g/ 210 L Dry Gas Control	0.005

All results are reported in g/ 210 L.

Bias is limited by calibration acceptance criteria. All calibration results must be within ± 0.005 or 5%, whichever is greater, of the target alcohol concentration.

*Uncertainty is based on fleet-wide data and is expressed to a 99.73% level of confidence ($k=3$).

The instrument results before and after any adjustment are found in the associated pre and post stability checks.

TRACEABILITY INFORMATION

This instrument was calibrated using solutions prepared by Alcohol Countermeasure Systems, Inc. (ACS). ACS prepared and certified these CRMs in accordance with ISO 17034 and ISO/ IEC 17025 Standards.

Simulator temperatures are traceable to NIST. Simulator temperatures are checked with NIST traceable digital thermometers calibrated by Precision Metrology in accordance with ISO/ IEC 17025 standards.

Dry gas control measurements are traceable to NIST through the use of CRMs supplied by an accredited CRM supplier. The supplier of dry gas standard controls prepared and certified the CRMs in accordance with ISO Guide 34 and ISO/ IEC 17025 standards.
This document shall not be reproduced except in full, without written approval of the Florida Department of Law Enforcement Alcohol Testing Program.

01/25/2022

Date


DAVID E REYES-RIVERA,

Department Inspector

FDLE/ATP Form 69 December 2021

Issuing Authority: Alcohol Testing Program

Service • Integrity • Respect • Quality

Florida Department of Law Enforcement

Alcohol Testing Program

DEPARTMENT INSPECTION REPORT - INTOXILYZER 8000

Agency: BROWARD COUNTY S.O.
Time of Inspection: 11:34

Date of Inspection: 01/25/2022

Serial Number: 80-007107
Software: 8100.27

Check or Test	YES	NO	Check or Test	YES	NO
Diagnostic Check (Pre-Inspection): OK	Yes		Date and/or Time Adjusted		No
Minimum Sample Volume Check: OK	Yes		Barometric Pressure Sensor Check: 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#:202010A Exp: 10/05/2022	0.08g/210L Test (g/210L) Lot#:202010B Exp: 10/05/2022	0.20g/210L Test (g/210L) Lot#:202010D Exp: 10/06/2022	0.08 g/210L Dry Gas Std Test (g/210L) Lot#:AG115904 Exp: 06/08/2023
0.000	0.049	0.080	0.199	0.080
0.000	0.050	0.080	0.199	0.080
0.000	0.050	0.080	0.199	0.080
0.000	0.050	0.080	0.199	0.079
0.000	0.050	0.080	0.198	0.080
0.000	0.049	0.080	0.199	0.080
0.000	0.049	0.080	0.200	0.080
0.000	0.050	0.080	0.199	0.080
0.000	0.050	0.080	0.200	0.080
0.000	0.050	0.080	0.200	0.080

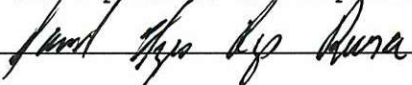
Standard Deviations	0.0004	0.0000	0.0006	0.0003
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Average Standard Deviation of 0.05, 0.08 and 0.20 g/210L Tests: 0.0003 Number of Simulators Used: 5

Remarks:

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

DAVID E REYES-RIVERA

01/25/2022
Date

Type of Test	Serial Number	Agency	Date	Performed By
Stabilities	80-007107	Broward County Sheriff's Office	1/25/2022	DERR <i>[Signature]</i>

0.05g/210L	0.08g/210L	0.20g/210L	DGS 0.08g/210L
0.047 to 0.053 ☒	0.077 to 0.083 ☒	0.194 to 0.206 ☒	0.077 to 0.083 ☒
BROWARD COUNTY S.O. Intoxilyzer - Alcohol Analyzer Model 8000 01/25/2022 Software: 8100.27 SN 80-007107 Test g/210L Time Air Blank 0.000 09:51 Control Test 0.050 09:52 Air Blank 0.000 09:52 Control Test 0.049 09:53 Air Blank 0.000 09:54 Control Test 0.045 09:54 Air Blank 0.000 09:55 Control Test Stats Average 0.0493 Std Dev 0.0006 Rel Std Dev(%) 1.1703	BROWARD COUNTY S.O. Intoxilyzer - Alcohol Analyzer Model 8000 01/25/2022 Software: 8100.27 SN 80-007107 Test g/210L Time Air Blank 0.000 09:56 Control Test 0.079 09:57 Air Blank 0.000 09:57 Control Test 0.079 09:58 Air Blank 0.000 09:58 Control Test 0.079 09:59 Air Blank 0.000 10:00 Control Test Stats Average 0.0790 Std Dev 0.0000 Rel Std Dev(%) 0.0000	BROWARD COUNTY S.O. Intoxilyzer - Alcohol Analyzer Model 8000 01/25/2022 Software: 8100.27 SN 80-007107 Test g/210L Time Air Blank 0.000 10:01 Control Test 0.198 10:01 Air Blank 0.000 10:02 Control Test 0.199 10:03 Air Blank 0.000 10:03 Control Test 0.199 10:04 Air Blank 0.000 10:04 Control Test Stats Average 0.1987 Std Dev 0.0006 Rel Std Dev(%) 0.2906	BROWARD COUNTY S.O. Intoxilyzer - Alcohol Analyzer Model 8000 01/25/2022 Software: 8100.27 SN 80-007107 Test g/210L Time Air Blank 0.000 10:06 Control Test 0.080 10:06 Air Blank 0.000 10:07 Control Test 0.080 10:07 Air Blank 0.000 10:07 Control Test 0.080 10:08 Air Blank 0.000 10:08 Control Test Stats Average 0.0800 Std Dev 0.0000 Rel Std Dev(%) 0.0000
<i>[Signature]</i> Operator's Signature	<i>[Signature]</i> Operator's Signature	<i>[Signature]</i> Operator's Signature	<i>[Signature]</i> Operator's Signature

Return Material Authorization

Ship to:

☒ CMI, Inc.

☐ Enforcement Electronics

Shipment to repair facility authorized by: _____ on _____

Items Returned: Instrument ☒ Supplies ☐ Other ☐ Describe: _____

Instrument Model: Intoxilyzer 8000 Serial Number: 80-007107

Bill To Address:

Broward County Sheriff's Office

Ship to Address:

FDLE FMROC

4700 Terminal Drive Suite 1

Ft. Myers, FL 33907 ers

Reason for Return:

Flow R value at 76

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: Deputy Joshua Sapp _____

Phone #: 954 321-4849 _____ Email: joshua_sapp@sheriff.org _____

ATP Contact Name: David Reyes ATP Email: davidreyes@fdle.state.fl.us

Return Material Authorization

Ship to: ☒ CMI, Inc.

☐ Enforcement Electronics

Shipment to repair facility authorized by: _____ on _____

Items Returned: Instrument ☒ Supplies ☐ Other ☐ Describe: _____

Instrument Model: _____ Intoxilyzer 8000 Serial Number: 80-007107_

Bill To Address:

Broward County Sheriff's Office

Ship to Address:

FDLE FMROC

4700 Terminal Drive Suite 1

Ft. Myers, FL 33907 ers

Reason for Return:

Dry gas leak

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: Deputy Joshua Sapp _____

Phone #: 954 321-4849 _____ Email: joshua_sapp@sheriff.org _____

ATP Contact Name: David Reyes ATP Email: davidreyes@fdle.state.fl.us