

gency: Hardee CSO Instrument Serial Number: 80-001077	
AGENCY INSPECTION DISCREPENCY	
Agency Inspector: Garrett Albritton	Inspection Date: 08/31/2023
 A test was repeated without reason for reported Alcohol Free/Mouth Alcohol Alcohol Free/Mouth Alcohol Alcohol g/210L 0.050 g/210L 0.080 g/210L Agency Inspection not conducted for cale Expired Alcohol Reference Solution or Dr 	hol Free Test Interferent Detect
	200 g/210L 0.080 g/210L Dry Gas
□ Lot Number and/or Expiration Date for Sta □ 0.050 g/210L □ 0.080 g/210L □ 0.	
REQUESTED CORRECTIVE ACTION	

Record hand-written amendments on FDLE/ATP Form 40, initial and date amendments, mark report "AMENDED", and forward copy to Department Inspector

Provide written explanation regarding referenced item(s) to Department Inspector

□ Remove instrument from evidentiary use until otherwise directed by the Department

Other:



Digitally signed by Taylor Gutschow Date: 2023.10.31 13:03:24 -04'00'

10/31/2023

Signature of Alcohol Testing Program Staff Member

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: HARDEE COUNTY SO Time of Inspection: 21:31

Date of Inspection: 08/31/2023

Serial Number: 80-001077 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#:202303J Exp: 03/28/2025	0.08g/210L Test (g/210L) Lot#:202206B Exp: 06/14/2024	0.20g/210L Test (g/210L) Lot#:202206C Exp: 06/15/2024	0.08 g/210L Dry Gas Std Test (g/210L) Lot#:402477283 Exp: 06/24/2025
0.000	0.048	0.077	0.193	0.080
0.000	0.048	0.078	0.195	0.078
0.000	0.048	0.079	0.195	0.079

Number of Simulators Used: 5

Remarks:

SKIPPED MOUTH ALCOHOL

Skipped Initial Month Alcohol test. Caught mysulf, Repeated it and everything was ok and passed.

The above instrument complies (X) does not comply () with

) with Chapter 11D-8, FAC.

GARRETT M ALBRITTON

I certify that I hold a valid Florida Department of Law Enforcement Agency Inspector Permit and that I performed this Anspection in accordance with the provisions of Chapter 11D-8, FAC.

ALL

Signature and Printed Name

08/31/2023

Date

FDLE/ATP Form 40 - March 2004



Agency: Hardee CSO	Instrument Serial Number: 80-001077
AGENCY INSPECTION DISCREPENCY	
Agency Inspector: Gary Cartwright, Jr.	Inspection Date: 02/03/2023
 Agency Inspection not conducted for on Expired Alcohol Reference Solution or 	Alcohol Free Test Interferent Detect 0.200 g/210L 0.080 g/210L Dry Gas calendar month r Dry Gas Standard was used for inspection
_] 0.200 g/210L □ 0.080 g/210L Dry Gas
Lot Number and/or Expiration Date for	0.200 g/210L 0.080 g/210L Dry Gas
Other Electronic Data Review/Comment	its: Include a remark describing the corrective action
that was taken prior to repeating the 0.20 Te	est.
REQUESTED CORRECTIVE ACTION	

Record hand-written amendments on FDLE/ATP Form 40, initial and date amendments, mark report "AMENDED", and forward copy to Department Inspector

Provide written explanation regarding referenced item(s) to Department Inspector

Remove instrument from evidentiary use until otherwise directed by the Department

Other:

Taylor Gutschow Gutschow Date: 2023.05.17 08:51:25 -04'00'

05/17/2023

Signature of Alcohol Testing Program Staff Member

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: HARDEE COUNTY SO Time of Inspection:14:39

Date of Inspection:02/03/2023

Serial Number: 80-001077 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	
Dlagnostic Check (Post-Inspection): OK	Yes	

Alcohol Free Test (g/210L)	0.05g/210L Test (g/210L) Lot#:202112A Exp: 12/07/2023	0.08g/210L Test (g/210L) Lot#:202206B Exp: 06/14/2024	0.20g/210L Test (g/210L) Lot#: 202206C Exp: 06/15/2024	0.08 g/210L Dry Gas Std Test (g/210L) Lot #: 402477283 Exp: 06/24/2025
0.000	0.047	0.080	0.189 / 0.196	0.079
0.000	0.048	0.081	0.192 / 0.198	0.079
0.000	0.048	0.081	0.194 / 0.199	0.079

Number of Simulators Used: 5

Remarks:

Remarks: 20: Control Outside Tolerance. Made Sure all Connections wern Connected and radid test.

The above instrument complies (X) 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.

GARY W CARTWRIGHT JR

Signature and Printed Name

02/03/2023

Date

FDLE/ATP Form 40 -- March 2004

Reprinted From Database



Agency: Hardee CSO	Instrument Serial Number: 80-001077
AGENCY INSPECTION DISCREPENCY	
Agency Inspector: Gary Cartwright, Jr.	Inspection Date: 05/31/2023
	or repeat or the corrective action given Alcohol Free Test Interferent Detect 0.200 g/210L 0.080 g/210L Dry Gas
Agency Inspection not conducted for	calendar month
□ 0.050 g/210L □ 0.080 g/210L □ Lot Number and/or Expiration Date fo	□0.200 g/210L □ 0.080 g/210L Dry Gas
REQUESTED CORRECTIVE ACTION	
	n FDLE/ATP Form 40, initial and date D", and forward copy to Department Inspector g referenced item(s) to Department Inspector
	j referenced item(s) to Department inspector

□ Remove instrument from evidentiary use until otherwise directed by the Department

Other:



Digitally signed by Taylor Gutschow Date: 2023.06.15 14:00:17 -04'00'

06/15/2023

Signature of Alcohol Testing Program Staff Member

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: HARDEE COUNTY SO Time of Inspection: 17:46

Date of Inspection: 05/31/2023

Serial Number: 80-001077 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#:202112A Exp: 12/07/2023	0.08g/210L Test (g/210L) Lot#:202206B Exp: 06/14/2024	0.20g/210L Test (g/210L) Lot#:202206C Exp: 06/15/2024	0.08 g/210L Dry Gas Std Test (g/210L) Lot#:402477283 Exp: 06/24/2025
/ 0.000	0.047	0.079	0.200	0.080
/ 0.000	0.047	0.080	0.202	0.079
/ 0.000	0.048	0.080	0.203	0.080

Number of Simulators Used: 5

Remarks:

arks: 00: Ambient Fail. Chrcls Connicters and Znd test passed

The above instrument complies (X) does not comply (

) with Chapter 11D-8, FAC.

GARY W CARTWRIGHT JR

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.

Signature and Printed Name

05/31/2023 Date



Agency: Hardee CSO	Instrument Serial Number: 80-001077	
AGENCY INSPECTION DISCREPENCY		
Agency Inspector: Gary Cartwright, Jr.	Inspection Date: 06/30/2023	
☐ Alcohol Free/Mouth Alcohol [☐ 0.050 g/210L ☐ 0.080 g/210	for repeat or the corrective action given ☐Alcohol Free Test ☐Interferent Detect DL ☐ 0.200 g/210L ☐ 0.080 g/210L Dry Gas	
Agency Inspection not conducted fo	or calendar month	
Expired Alcohol Reference Solution	or Dry Gas Standard was used for inspection	
□ 0.050 g/210L □ 0.080 g/210L	□ 0.200 g/210L □ 0.080 g/210L Dry Gas	
 Lot Number and/or Expiration Date f 0.050 g/210L 0.080 g/210L 	for Standards entered incorrectly 0.200 g/210L 0.080 g/210L Dry Gas	
Other Electronic Data Review/Comm	nents:	
REQUESTED CORRECTIVE ACTION		
Record hand-written amendments o amendments, mark report "AMENDE	on FDLE/ATP Form 40, initial and date ED", and forward copy to Department Inspector	
Provide written explanation regarding referenced item(s) to Department Inspector		

 \Box Demove instrument from evidentian, use until otherwise directed by the Department

Remove instrument from evidentiary use until otherwise directed by the Department
 Other:

Taylor Gutschow Gutschow

Digitally signed by Taylor Gutschow Date: 2023.09.12 13:50:36 -04'00'

09/12/2023

Signature of Alcohol Testing Program Staff Member

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: HARDEE COUNTY SO Time of Inspection: 09:38

Date of Inspection: 06/30/2023

Serial Number: 80-001077 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#: 20311A_ Exp: 12/07/2023	0.08g/210L Test (g/210L) Lot#:202206B Exp: 06/14/2024	0.20g/210L Test (g/210L) Lot#:202206C Exp: 06/15/2024	0.08 g/210L Dry Gas Std Test (g/210L) Lot#:402477283 Exp: 06/24/2025
0.000	0.047	0.080	0.200	0.079
0.000	0.048	0.080	0.202	0.079
0.000	0.048	0.081	0.202	0.078

Number of Simulators Used: 5

Remarks: 0.05 g/2104 LOT # Should be ZOZIIZA

The above instrument complies (X) does not comply () with Chapter 11D-8, FAC.

that I hold a valid Florida Department of Law Enforcement Agency Inspector Permit and that I this inspection in accordance with the provisions of Chapter 11D-8, FAC. I ceptif perform GARY W CARTWRIGHT JR

Signature and Printed Name

06/30/2023 Date

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: HArdee County Sheriffs Office

Time of Inspection: Date of Inspection:

Serial Number: 80-001077 Software: 8100.27

CHECK OR TEST	YES	NO
Date and/or Time Adjusted		
Diagnostic Check (Pre-Inspection): 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	0.05g/210L Test	0.08g/210L Test		0.08 g/210L
Test	(g/210L)	(g/210L)	(g/210L)	Dry Gas Std Test
(g/210L)	Lot#:	Lot#:	Lot#:	(g/210L)
	Exp:	Exp:	Exp:	Lot#:
	-	-	-	Exp:

Number of Simulators Used: _____

Remarks: The January inspection was not conducted. I conducted it on February 2, 2023.

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.

Gary Cartwrightso Signature and Printed Name 15/2027

FDLE/ATP Form 40 - March 2004 Ref. 11D-8.006