Return Material Authorization

Ship to:	
☐ Enforcement Electronic	s
hipment to repair facility authorized by: <u>Cesar Correa</u> on <u>1/17/2023</u>	
ems Returned: Instrument ⊠ Supplies □ Other □ Describe:	
strument Model: Intoxilyzer 8000 Serial Number: 80-002463	
ill to Address: <u>Hialeah Police Department</u> Ship to address: FDLE FMF	ROC
TTN: Cesar Correa ATTN: David Reyes-Rivera	
555 E 8 th Ave 4700 Terminal Drive Suite 1	
ialeah, FL 33013 Fort Myers, FL 33907	
eason for Return: Instrument does not turn on.	
lease 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: Cesar Correa	
Phone #: 305 953-5215 Email: ccorrea@hialeahfl.gov	
TP Contact Name: <u>David Reyes-Rivera</u> ATP <u>Email:</u> <u>DavidReyes@fdle.state.fl.us</u>	

Florida Department of Law Enforcement Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: HIALEAH PD

Serial Number: 80-002463

Time of Inspection: 10:35

Date of Inspection: 12/14/2023

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#:202307A Exp: 07/11/2025	0.20g/210L Test (g/210L) Lot#:202206C Exp: 06/15/2024	0.08 g/210L Dry Gas Std Test (g/210L) Lot#:402370890 Exp: 05/09/2025
0.000	0.048	0.077	0.000 / 0.198	0.077
0.000	0.048	0.078	0.000 / 0.199	0.077
0.000	0.048	0.078	0.000 / 0.199	0.077

Number of Simulators Used: 5	umber	of Sim	ulators	Used:	5	
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	Remarks	:
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arks:
SPOKE TO FOLE TAYLOR, RINSED SIMULATOR, PUT NEW SOLUTION, Turned on Simulator, waited 30 Minutes, and retested.

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.

Signature and Printed Name

12/14/2023 Date