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

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: HOLMES BEACH PD Time of Inspection: 08:48

Date of Inspection: 07/13/2023

Serial Number: 80-006692 Software: 8100.27

Yes

| 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 | |

| 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#:40241964 7420 - Exp: 04/14/2025 |
|----------------------------------|--|--|--|---|
| 0.000 | 0.048 | 0.079 | 0.198 | 0.078 |
| 0.000 | 0.048 | 0.078 | 0.198 | 0.078 |
| 0.000 | 0.049 | 0.079 | 0.199 | 0.078 |

| Number | οf | Simulators | Used: | 5 |
|--------|----|------------|--------------|---|
| | | | | |

Diagnostic Check (Post-Inspection): OK

Remarks:

INSTRUMENT WAS INSPECTED FOR DAMAGES. NONE WERE OBSERVED.

DRY GAS LOT # MISSING LAST DIGHT 10/14/23

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

07/13/2023 Date

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

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: HOLMES BEACH PD Time of Inspection: 10:34

Date of Inspection: 08/15/2023

Serial Number: 80-006692

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#:40241964 7 Exp: 04/14/2025 |
|----------------------------------|--|--|--|---|
| 0.000 | 0.048 | 0.077 | 0.196 | 0.078 |
| 0.000 | 0.048 | 0.078 | 0.196 | 0.078 |
| 0.000 | 0.048 | 0.077 | 0.197 | 0.078 |

| Number | οf | Simul | ators | Used: | 5 |
|--------|----|-------|-------|-------|---|

Remarks:

INSTRUMENT WAS CHECKED AND NO DAMAGES WERE OBSERVED.

DRY GAS LOT # MISSING CAST DIGIT 10/14/23

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

08/15/2023

Florida Department of Law Enforcement Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: HOLMES BEACH PD Time of Inspection: 18:16

Date of Inspection: 09/11/2023

Serial Number: 80-006692 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#:40241964 7 Ago Exp: 04/14/2025 |
|----------------------------------|--|--|--|---|
| 0.000 | 0.048 | 0.078 | 0.198 | 0.077 |
| 0.000 | 0.048 | 0.078 | 0.199 | 0.077 |
| 0.000 | 0.048 | 0.079 | 0.199 | 0.078 |

| Number | οf | Simu | lators | ∏sed∙ | 5 | |
|--------|----|------|--------|-------|---|--|

Remarks:

INSTRUMENT INSPECTED AND WAS FREE OF DAMAGE

* 2st inspection aborded due to incorrect sequince with simulators # DRY GAS COT# MISSING LAST DIGIT 10/03/03

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 thims inspection in accordance with the provisions of Chapter 11D-8, FAC.

or all Hunt

ALEXANDER C HURT

Signature and Printed Name

09/11/2023 Date



AGENCY INSPECTION AND OTHER ELECTRONIC DATA REVIEW

Instrument Serial Number: 80-006692 Agency: Holmes Beach PD AGENCY INSPECTION DISCREPENCY Inspection Date: 02/14/2023 **Agency Inspector:** Alexander Hurt ☐ A test was repeated without reason for repeat or the corrective action given Alcohol Free/Mouth Alcohol ☐Alcohol Free Test Interferent Detect □ 0.080 g/210L □ 0.200 g/210L ☐ 0.080 g/210L Dry Gas □ 0.050 g/210L ☐ Agency Inspection not conducted for calendar month ☐ 0.080 g/210L Dry Gas □ 0.080 g/210L □ 0.200 g/210L □ 0.050 g/210L ☐ Lot Number and/or Expiration Date for Standards entered incorrectly □ 0.050 g/210L □0.080 g/210L □0.200 g/210L □ 0.080 g/210L Dry Gas ■ Other Electronic Data Review/Comments: The inspection was not completed. Compliance should not be marked "yes". 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 Taylor Gutschow Gutschow Date: 2023.05.17 11:05:29 -04'00' 05/17/2023 Signature of Alcohol Testing Program Staff Member **Date**

Amended

Florida Department of Law Enforcement Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: HOLMES BEACH PD Time of Inspection: 15:10

Date of Inspection: 02/14/2023

Serial Number: 80-006692 Software: 8100.27

| Check or Test | YES | МО | |
|---|-----|----|--|
| 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 | | | |
| | | No | |
| Diagnostic Check (Post-Inspection): OK | | | |
| | | No | |

| Alcohol Free Test (g/210L) | 0.05g/210L Test (g/210L) Lot#: Exp: | 0.08g/210L Test (g/210L) Lot#: Exp: | 0.20g/210L Test (g/210L) Lot#: Exp: | 0.08 g/210L Dry Gas Std Test (g/210L) Lot#: Exp: |
|----------------------------------|--|--|--|--|
| 0.000 | | | | |
| | | | | |
| | | | | |

| Number | o£ | Simulators | Used: | 5 |
|---------|------------|------------|-------|---|
| Remarks | 3 : | | | |

00:INCORRECT SIMULATOR ATTACHED.

05/17/2023 AH

| The | above | instrument | complies | (|) | does no | t c | omply | (| Х |) 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.

OFC. Olle Hurt #337

ALEXANDER C HURT

Signature and Printed Name

02/14/2023 Date