Florida Department of Law Enforcement Alcohol Testing Program

## AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: BROWARD COUNTY SO Time of Inspection: 10:20

Date of Inspection: 10/04/2023

Serial Number: 80-007381 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	Уев	
Diagnostic Check (Post-Inspection): OK	Уев	

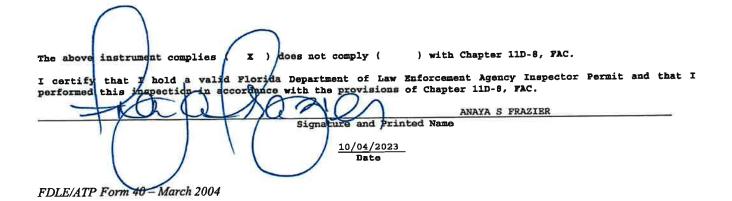
Alcohol Free Test (g/210L)	0.05g/210L Test (g/210L) Lot#:202203J Exp: 03/28/2025	0.00g/210L Test (g/210L) Lot#:202206B Exp: 06/14/2024	0.20g/210L Test (g/210L) Lot#:202206C Exp: 06/15/2024	0.08 g/210L Dry Gas Std Test (g/210L) Lot#:402477283 Exp: 06/24/2025
0.000	0.049	0.078	0.197	0.081
0.000	0.049	0.078	0.197	0.081
0.000	0:049	0.078	0.197	0.081

#### Number of Simulators Used: 5

#### Remarks:

J. GUZMAN IN TRAINING.

() A 1003 D. 059/2102 Test N5/2023 D. 059/2102 Test N5/2023031





## **AGENCY INSPECTION AND OTHER ELECTRONIC DATA REVIEW**

Agency: Broward CSO Instrument Serial Number: 80-007381					
AGENCY INSPECTION DISCREPENCY					
Agency Inspector: Anaya Frazier	Inspection Date: 09/06/2023				
Alcohol Free/Mouth Alcohol	ason for repeat or the corrective action given ☐Alcohol Free Test ☐Interferent Detect g/210L ☐ 0.200 g/210L ☐ 0.080 g/210L Dry Gas				
Agency Inspection not conduct	ed for calendar month				
□ 0.050 g/210L □ 0.080 g/2 ■ Lot Number and/or Expiration D ■ 0.050 g/210L □ 0.080 g/2	ution or Dry Gas Standard was used for inspection   210L 0.200 g/210L 0.080 g/210L Dry Gas   Date for Standards entered incorrectly   210L 0.200 g/210L 0.080 g/210L Dry Gas   210L 0.200 g/210L 0.080 g/210L Dry Gas   210L 0.200 g/210L 0.080 g/210L Dry Gas   comments: The 0.05 ARS lot number is mistyped.				
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 evide	ntiary use until otherwise directed by the Department				

Other:

Taylor Gutschow Gutschow

Date: 2023.10.31 14:35:28 -04'00'

10/31/2023

Signature of Alcohol Testing Program Staff Member

# HILLINALT Florida Department of Law Enforcement Alcohol Testing Program

### AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: BROWARD COUNTY SO Time of Inspection: 12:17

Date of Inspection: 09/06/2023

Serial Number: 80-007381 Software: 8100.27

Check or Test	YES	NO
Date and/or Time Adjusted		1
		No
Diagnostic Check (Pre-Inspection): OK		
	Yes	1
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#: <u>202203J</u> 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	0.049	0.079	0.198	0.081
0.000	0.049	0.078	0.197	0.080
0.000	0.049	0.079	0.197	0.080

Number of Simulators Used: 5

Remarks:

J. GUZMAN IN TRAINING.

0/1/2/200

, 908 D. D5 g/210 L Test LNT #: 202 3033

does not comply ? The above instrument complies ) with Chapter 11D-8, FAC. х I certify that a Department of Law Enforcement Agency Inspector Permit and that I hold val Flor performed this visions of Chapter 11D-8, FAC. specti ANAYA S FRAZIER ture and Printed Name Sig 09/06/2023 Date

FDLE/ATP Form 40 - March 2004



## **AGENCY INSPECTION AND OTHER ELECTRONIC DATA REVIEW**

Agency: Broward CSO Instrument Serial Number: 80-007381	
AGENCY INSPECTION DISCREPEN	СҮ
Agency Inspector: Anaya Frazier	Inspection Date: 02/01/2023
Alcohol Free/Mouth Alcohol	son for repeat or the corrective action given ■Alcohol Free Test  □Interferent Detect /210L ■ 0.200 g/210L □ 0.080 g/210L Dry Gas
Agency Inspection not conducte	ed for calendar month
□ 0.050 g/210L □ 0.080 g/2 ■ Lot Number and/or Expiration D	ution or Dry Gas Standard was used for inspection   10L □ 0.200 g/210L □ 0.080 g/210L Dry Gas   ate for Standards entered incorrectly   10L ■ 0.200 g/210L □ 0.080 g/210L Dry Gas   omments:
REQUESTED CORRECTIVE ACTION	N
amendments, mark report "AME	nts on FDLE/ATP Form 40, initial and date ENDED'', and forward copy to Department Inspector
🗌 🗔 Provide written explanation rega	arding referenced item(s) to Department Inspector

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

Other:

Taylor Gutschow Gutschow Date: 2023.03.20 14:42:46 -04'00'

Digitally signed by Taylor

03/20/2023

Signature of Alcohol Testing Program Staff Member

# AMENDED Florida Department of Law Enforcement Alcohol Testing Program

## AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: BROWARD COUNTY SO Time of Inspection: 14:28

Date of Inspection: 02/01/2023

Serial Number: 80-007381 Software: 8100.27

Check or Tes	st			YES	NO
Date and/or T	ime Adjusted				-
-				No	
Diagnostic Ch	eck (Pre-Inspection	n): OK			
				Yes	
Alcohol Free	Subject Test: 0.000	)			
				Yes	
Mouth Alcohol	Test: Slope Not Me	et			
				Yes	
Interferent D	etect Test: Interfe	erent Detect			
				Yes	
Diagnostic Ch	eck (Post-Inspectio	on): OK			
				Yes	
Markel Breeze				100	
Alcohol Free Test	0.05g/210L Test (g/210L)	0.08g/210L Test (g/210L)	0.20g/210L Test	0.08 g/2	10L

Test (g/210L)	(g/210L) Lot#:202112A Exp: 12/07/2023	(g/210L) Lot#:202206B Exp: 06/14/2024	(g/210L) Lot#:402477203 Exp: 06/24/20250 A	Dry Gas Std Test (g/210L) Lot#:402477283 Exp: 06/24/2025
0.000 / 0.000	0.048	0.078	0.000 / 0.196	0.080
0.000 / 0.000	0.049	0.077	0.000 / 0.195	0.080
INT / 0.000	0.049	0.077	0.000 / 0.194	0.080

### Number of Simulators Used: 5

#### Remarks:

00: Interferent Detect. 20: Control Outside Tolerance.

CONTROL OUTSIDE TOKRANICE: DIO NIOT URELY AHACH. 20 REGERENCE SOLUTION!/ 110 The abo ve in trument complaes ( ) does not compl Chapter 11D-8. FAC. valid florida Department of Law Enforcement Agency Inspector Permit and that I I certify that I hold a this inspection in accordance with the provisions of Chapter 11D-8, FAC. performed ANAYA S FRAZIER ignature and Printed Name 02/01/2023 Date FDLE/ATP Form 40 - March 2004