



INSTRUMENT PROCESSING SHEET

Agency Dixie County Sheriff's OfficeS/N 80-000809Florida Department of
Law EnforcementDate In 2/15/2023DI Completion Date 2/21/2023☒ Ship ☐ P/U ☐ H/D ☐ CMI ☐ EE

Intake	By PN	Quality Checks	By PN	Date <u>2/21/2023</u>	Flow Calibration	By	Date																																							
☒ Annual ☐ Registration ☒ Return from CMI / EE Visual Inspection: ☒ Case ☒ Handle ☒ Keyboard ☒ Dry Gas Shelf ☒ Feet ☒ Breath Tube ☒ Ports ☒ Screws Tight Other Equipment/ Accessories: ☒ Power cord ☐ Printer Cable ☒ Static Bag ☐ 12V DC Cable Notes: _____ _____ _____ _____ _____ _____ _____ _____ _____ _____		☒ Breath Tube Screen ☒ Replace External O-Rings ☒ Instrument Set Up Verified ☒ R-Value <u>201</u> ☒ Flow Verification (L/s) Flow Column # <u>ATP 105</u> 32 mm <u>.152</u> (.139 - .169) 36 mm <u>.164</u> (.156 - .190) 53 mm <u>.238</u> (.228 - .278) 103 mm <u>.515</u> (.447 - .547) ☒ Barometric Pressure Check Gauge ID # <u>28421</u> ☒ Stability Checks			Flow Column # _____ ☐ 5L/min - 17mm ☐ 15L/min - 53mm ☐ 30L/min - 103mm ☐ R-Value _____ ☐ Post Calibration Verification (L/s) Flow Column # _____ 32 mm _____ (.139 - .169) 36 mm _____ (.156 - .190) 53 mm _____ (.228 - .278) 103 mm _____ (.447 - .547)																																									
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Calibration Adjustment		By _____		Department Inspection			By PN _____																																							
Barometric Pressure Gauge _____ ID # _____				Barometric Pressure ID# <u>28421</u> Gauge <u>1014</u> Instrument <u>1014</u> Mouth Alcohol Solution Lot # <u>2022-A</u> Acetone Stock Solution Lot # <u>2022-B</u>																																										
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Notes/Suggested Service: _____ _____ _____ _____ _____ _____ _____ _____ _____ _____				☒ Instrument Complies with Chapter 11D-8, FAC ☐ Instrument Does Not Comply with Chapter 11D-8, FAC ☒ Return to/Place into Evidentiary Use ☐ Remain Out of Evidentiary Use ☒ Conduct an Agency Inspection Before Evidentiary Use 2023.02.27 11:57:38 -05'00"																																										
		Israel Soto Digitally signed by Israel Soto Date: 2023.02.24 07:52:42 -05'00'		Tech Review / Date _____ Admin Review / Date _____																																										

STABILITY CHECKS

DIXIE COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000
02/21/2023
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	09:57
Control Test	0.050	09:58
Air Blank	0.000	09:59
Control Test	0.048	09:59
Air Blank	0.000	10:00
Control Test	0.048	10:01
Air Blank	0.000	10:01
Control Test Stats		
Average	0.0487	
Std Dev	0.0012	
Rel Std Dev(%)	2.3727	


Operator's Signature

DIXIE COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000
02/21/2023
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	10:02
Control Test	0.077	10:03
Air Blank	0.000	10:04
Control Test	0.077	10:04
Air Blank	0.000	10:05
Control Test	0.078	10:05
Air Blank	0.000	10:06
Control Test Stats		
Average	0.0773	
Std Dev	0.0006	
Rel Std Dev(%)	0.7456	


Operator's Signature

DIXIE COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000
02/21/2023
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	10:07
Control Test	0.200	10:08
Air Blank	0.000	10:08
Control Test	0.200	10:09
Air Blank	0.000	10:10
Control Test	0.200	10:10
Air Blank	0.000	10:11
Control Test Stats		
Average	0.2000	
Std Dev	0.0000	
Rel Std Dev(%)	0.0000	


Operator's Signature

DIXIE COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000
02/21/2023
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	10:13
Control Test	0.077	10:14
Air Blank	0.000	10:14
Control Test	0.077	10:14
Air Blank	0.000	10:15
Control Test	0.077	10:15
Air Blank	0.000	10:16
Control Test Stats		
Average	0.0770	
Std Dev	0.0000	
Rel Std Dev(%)	0.0000	

DGS


Operator's Signature

Florida Department of Law Enforcement

Alcohol Testing Program

DEPARTMENT INSPECTION REPORT - INTOXILYZER 8000

Agency: DIXIE COUNTY SO
Time of Inspection: 12:07

Date of Inspection: 02/21/2023

Serial Number: 80-000809
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#:202201C Exp: 01/11/2024	0.08g/210L Test (g/210L) Lot#:202201D Exp: 01/18/2024	0.20g/210L Test (g/210L) Lot#:202201E Exp: 01/18/2024	0.08 g/210L Dry Gas Std Test (g/210L) Lot#:AG229803 Exp: 10/25/2024
0.000	0.048	0.077	0.199	0.076
0.000	0.048	0.077	0.200	0.076
0.000	0.048	0.077	0.199	0.076
0.000	0.048	0.077	0.199	0.076
0.000	0.049	0.077	0.200	0.076
0.000	0.048	0.077	0.199	0.076
0.000	0.048	0.077	0.199	0.076
0.000	0.048	0.077	0.199	0.076
0.000	0.048	0.077	0.199	0.076
0.000	0.048	0.077	0.199	0.076

Standard Deviations	0.0003	0.0000	0.0004	0.0000
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Average Standard Deviation of 0.05, 0.08 and 0.20 g/210L Tests: 0.0001 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.



PHIL NICODEMO

Signature and Printed Name

02/21/2023
Date



Calibration Certificate

Florida Department of Law Enforcement
Alcohol Testing Program
2331 Phillips Road.
Suite B1032
Tallahassee, FL 32308

This is to certify the calibration of Intoxilyzer 8000 serial number 80-000809, manufactured by CMI, Inc. was calibrated in accordance with FDLE/ATP Form 36 - Department Inspection Procedures - Intoxilyzer 8000.

Serial Number:	<u>80-000809</u>	UNCERTAINTY* $\pm$	
Owning Agency:	<u>DIXIE COUNTY SO</u>	0.050 g/ 210 L	0.004
Calibration Date:	<u>02/21/2023</u>	0.080 g/ 210 L	0.004
Calibration Time:	<u>12:07</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.

02/21/2023

Date

PHIL NICODEMO,

Department Inspector

FDLE/ATP Form 69 March 2022

Issuing Authority: Alcohol Testing Program

Service • Integrity • Respect • Quality

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Florida Department of Law Enforcement Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: DIXIE COUNTY SO
Time of Inspection: 09:36

Date of Inspection: 02/21/2023

Serial Number: 80-000809
Software: 8100.27

Check or Test	YES	NO
Date and/or Time Adjusted		No
Diagnostic Check (Pre-Inspection): OK		No
Alcohol Free Subject Test: 0.000		No
Mouth Alcohol Test: Slope Not Met		No
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:

Number of Simulators Used: _____

Remarks:

BYPASSED AI TO OPERATE INSTRUMENT. COMPLIANCE NOT DETERMINED

Compliance NOT DETERMINED

The above instrument complies (☒) does not comply (☐) with Chapter 11D-8, FAC. *PN 2/21*

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.



PHIL NICODEMO

Signature and Printed Name

02/21/2023
Date