



INSTRUMENT PROCESSING SHEET

Agency Hialeah Police DepartmentS/N 80-000876

Florida Department of Law Enforcement

Date In 1/13/2023DI Completion Date 1/17/2023 Ship P/U H/D CMI EE

Intake	By DERR	Quality Checks	By DERR	Date <u>1/17/2023</u>	Flow Calibration	By	Date													
<input checked="" type="checkbox"/> Annual <input type="checkbox"/> Registration <input type="checkbox"/> Return from CMI / EE Visual Inspection: <input checked="" type="checkbox"/> Case <input checked="" type="checkbox"/> Handle <input checked="" type="checkbox"/> Keyboard <input checked="" type="checkbox"/> Dry Gas Shelf <input checked="" type="checkbox"/> Feet <input checked="" type="checkbox"/> Breath Tube <input checked="" type="checkbox"/> Ports <input checked="" type="checkbox"/> Screws Tight Other Equipment/ Accessories: <input type="checkbox"/> Power cord <input type="checkbox"/> Printer Cable <input checked="" type="checkbox"/> Static Bag <input type="checkbox"/> 12V DC Cable Notes: <u>Broken exhaust box DERR</u>		<input checked="" type="checkbox"/> Breath Tube Screen <input checked="" type="checkbox"/> Replace External O-Rings <input checked="" type="checkbox"/> Instrument Set Up Verified <input checked="" type="checkbox"/> R-Value <u>130</u> <input checked="" type="checkbox"/> Flow Verification (L/s) Flow Column # <u>ATP101</u> 32 mm <u>0.144</u> (.139 - .169) 36 mm <u>0.160</u> (.156 - .190) 53 mm <u>0.230</u> (.228 - .278) 103 mm <u>0.515</u> (.447 - .547) <input checked="" type="checkbox"/> Barometric Pressure Check Gauge ID # <u>28199</u> <input checked="" type="checkbox"/> Stability Checks			Flow Column # _____ <input type="checkbox"/> 5L/min – 17mm <input type="checkbox"/> 15L/min – 53mm <input type="checkbox"/> 30L/min – 103mm <input type="checkbox"/> R-Value _____ <input type="checkbox"/> Post Calibration Verification (L/s) Flow Column # _____ 32 mm _____ (.139 - .169) 36 mm _____ (.156 - .190) 53 mm _____ (.228 - .278) 103 mm _____ (.447 - .547)															
		<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Simulator</th> <th>Serial #</th> <th>Lot #/Exp</th> </tr> </thead> <tbody> <tr> <td>0.050</td> <td rowspan="2">MP6286</td> <td>202201C 01/11/2024</td> </tr> <tr> <td>0.080</td> <td>202201D 01/18/2024</td> </tr> <tr> <td>0.200</td> <td rowspan="2">MP6288</td> <td>202201E 01/18/2024</td> </tr> <tr> <td>0.080 DGS</td> <td>N/A 00521080A2 02/05/2023</td> </tr> </tbody> </table>			Simulator	Serial #	Lot #/Exp	0.050	MP6286	202201C 01/11/2024	0.080	202201D 01/18/2024	0.200	MP6288	202201E 01/18/2024	0.080 DGS	N/A 00521080A2 02/05/2023	Maintenance By DERR _____ <input type="checkbox"/> Battery Replacement <input type="checkbox"/> Dry Gas Regulator Replacement <input type="checkbox"/> Breath Tube Replacement <input checked="" type="checkbox"/> Other <u>Replaced exhaust box</u>		
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Calibration Adjustment	Department Inspection																																																												
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Attachments <input checked="" type="checkbox"/> Form 41 <input type="checkbox"/> Post-Stability Checks <input checked="" type="checkbox"/> Stability Checks <input type="checkbox"/> Flow Calibration <input checked="" type="checkbox"/> Calibration Certificate <input type="checkbox"/> Form 40 <input type="checkbox"/> Calibration Adjustment <input checked="" type="checkbox"/> Other <u>Extra stabilities</u>																																																													

Notes/Suggested Service: <u>Accidentally tipped the 0.20 simulator as I was connecting it to the instrument for the stabilities test. The first stabilities test was outside the acceptable range. To verify that it was due to the simulator tipping over, I ran an additional 20 tests. QC manager was satisfied and told me to run an additional 0.20 stability test. The instrument was in the acceptable range. DGS was not connected, repeated. DERR</u>	<input checked="" type="checkbox"/> Instrument Complies with Chapter 11D-8, FAC <input type="checkbox"/> Instrument Does Not Comply with Chapter 11D-8, FAC <input checked="" type="checkbox"/> Return to/Place into Evidentiary Use <input type="checkbox"/> Remain Out of Evidentiary Use <input checked="" type="checkbox"/> Conduct an Agency Inspection Before Evidentiary Use
Israel Soto <small>Digitally signed by Israel Soto Date: 2023.01.17 15:30:21 -05'00'</small> Tech Review / Date _____	Phil Nicodemo <small>Digitally signed by Phil Nicodemo Date: 2023.01.23 10:14:23 -05'00'</small> Admin Review / Date _____



Calibration Certificate

Florida Department of Law Enforcement
Alcohol Testing Program
4700 Terminal Drive, Suite 1
Ft. Myers, FL 33907

This is to certify the calibration of Intoxilyzer 8000 serial number 80-000876, manufactured by CMI, Inc. was calibrated in accordance with FDLE/ATP Form 36 - Department Inspection Procedures - Intoxilyzer 8000.

Serial Number:	<u>80-000876</u>	UNCERTAINTY* ±
Owning Agency:	<u>HIALEAH PD</u>	0.050 g/ 210 L
Calibration Date:	<u>01/17/2023</u>	0.080 g/ 210 L
Calibration Time:	<u>12:50</u>	0.200 g/ 210 L
		0.080 g/ 210 L Dry Gas Control
		0.004
		0.004
		0.007
		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.

01/17/2023

Date


DAVID E REYES-RIVERA,
Department Inspector

FDLE/ATP Form 69 December 2021

Issuing Authority: Alcohol Testing Program

Service • Integrity • Respect • Quality

Florida Department of Law Enforcement Alcohol Testing Program

DEPARTMENT INSPECTION REPORT - INTOXILYZER 8000

Agency: HIALEAH PD
Time of Inspection: 12:50

Date of Inspection: 01/17/2023

Serial Number: 80-000876
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#:00521080A2 Exp: 02/05/2023
0.000	0.052	0.081	0.206	0.000 / 0.082
0.000	0.051	0.082	0.206	0.000 / 0.081
0.000	0.052	0.082	0.207	0.000 / 0.082
0.000	0.052	0.081	0.207	0.000 / 0.082
0.000	0.053	0.082	0.206	0.081 / 0.081
0.000	0.053	0.082	0.207	0.081 / 0.081
0.000	0.053	0.082	0.208	0.081 / 0.081
0.000	0.053	0.083	0.208	0.081 / 0.082
0.000	0.053	0.082	0.207	0.082 / 0.082
0.000	0.052	0.081	0.205	0.082 / 0.081

Standard Deviations	0.0006	0.0006	0.0009	0.0420 / 0.0005
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Average Standard Deviation of 0.05, 0.08 and 0.20 g/210L Tests: 0.0006 Number of Simulators Used: 5

Remarks:

08: Control Outside TolerancedGS NOT CONNECTED..

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.



DAVID E REYES-RIVERA

Signature and Printed Name

01/17/2023
Date

Type of Test	Serial Number	Agency	Date	Performed By
Stabilities verification	80-000876	Hialeah Police Department	01/17/2023	DERR 

0.05g/210L	0.08g/210L	0.20g/210L	DGS 0.08g/210L																																				
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>																																				
0.047 to 0.053	0.077 to 0.083	0.194 to 0.206	0.077 to 0.083																																				
<p>HIALEAH PD Intoxilizer - Alcohol Analyzer Model: 8000 SN: 80-000876 01/17/2023 Software: 8100.27</p> <table border="1"> <thead> <tr> <th>Test</th> <th>g/210L</th> <th>Time</th> </tr> </thead> <tbody> <tr> <td>Air Blank</td> <td>0.000</td> <td>10:41</td> </tr> <tr> <td>Control Test</td> <td>0.205</td> <td>10:41</td> </tr> <tr> <td>Air Blank</td> <td>0.000</td> <td>10:42</td> </tr> <tr> <td>Control Test</td> <td>0.203</td> <td>10:43</td> </tr> <tr> <td>Air Blank</td> <td>0.000</td> <td>10:43</td> </tr> <tr> <td>Control Test</td> <td>0.202</td> <td>10:44</td> </tr> <tr> <td>Air Blank</td> <td>0.000</td> <td>10:45</td> </tr> <tr> <td>Control Test Stats</td> <td></td> <td></td> </tr> <tr> <td>Average</td> <td>0.2033</td> <td></td> </tr> <tr> <td>Std Dev</td> <td>0.0015</td> <td></td> </tr> <tr> <td>Rel Std Dev(%)</td> <td>0.7512</td> <td></td> </tr> </tbody> </table> <p style="text-align: right;"> Operator's Signature</p>				Test	g/210L	Time	Air Blank	0.000	10:41	Control Test	0.205	10:41	Air Blank	0.000	10:42	Control Test	0.203	10:43	Air Blank	0.000	10:43	Control Test	0.202	10:44	Air Blank	0.000	10:45	Control Test Stats			Average	0.2033		Std Dev	0.0015		Rel Std Dev(%)	0.7512	
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HIALEAH PD
 Intoxilyzer - Alcohol Analyzer
 Model 8000 SN 80-000876
 01/17/2023
 Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	10:08
Control Test	0.206	10:09
Air Blank	0.000	10:10
Control Test	0.202	10:10
Air Blank	0.000	10:11
Control Test	0.203	10:12
Air Blank	0.000	10:12
Control Test	0.203	10:13
Air Blank	0.000	10:14
Control Test	0.202	10:14
Air Blank	0.000	10:15
Control Test	0.202	10:16
Air Blank	0.000	10:16
Control Test	0.202	10:17
Air Blank	0.000	10:18
Control Test	0.201	10:18
Air Blank	0.000	10:19
Control Test	0.201	10:20
Air Blank	0.000	10:21
Control Test	0.202	10:21
Air Blank	0.000	10:22
Control Test	0.202	10:23
Air Blank	0.000	10:23
Control Test	0.202	10:24
Air Blank	0.000	10:25
Control Test	0.202	10:25
Air Blank	0.000	10:26
Control Test	0.203	10:27
Air Blank	0.000	10:27
Control Test	0.203	10:28
Air Blank	0.000	10:29
Control Test	0.202	10:29
Air Blank	0.000	10:30
Control Test	0.203	10:31
Air Blank	0.000	10:31
Control Test	0.204	10:32
Air Blank	0.000	10:33
Control Test	0.203	10:33
Air Blank	0.000	10:34
Control Test	0.203	10:35
Air Blank	0.000	10:35

Control Test Stats
 Average 0.2025
 Std Dev 0.0011
 Rel Std Dev(%) 0.5426

Stabilities Check	
SN:	80-000876
Agency:	Hialeah Police Department
Date:	1/17/2023
By:	DERR <i>[Signature]</i>


 Operator's Signature

Type of Test	Serial Number	Agency	Date	Performed By
Stabilities	80-000876	Hialeah Police Department	01/17/2023	DERR 

0.05g/210L 0.047 to 0.053 <input checked="" type="checkbox"/>	0.08g/210L 0.077 to 0.083 <input checked="" type="checkbox"/>	0.20g/210L 0.194 to 0.206 <input checked="" type="checkbox"/>	DGS 0.08g/210L 0.077 to 0.083 <input checked="" type="checkbox"/>																																																																																																																																																
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INSTRUMENT PROCESSING SHEET

Agency Hialeah PD

S/N 80-000876

Florida Department of Law Enforcement

Date In 12/19/2023

DI Completion Date _____

Ship P/U H/D CMI EE

Intake By <u>TDG</u> <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Registration <input type="checkbox"/> Return from CMI / EE Visual Inspection: <input checked="" type="checkbox"/> Case <input checked="" type="checkbox"/> Handle <input checked="" type="checkbox"/> Keyboard <input checked="" type="checkbox"/> Dry Gas Shelf <input checked="" type="checkbox"/> Feet <input checked="" type="checkbox"/> Breath Tube <input checked="" type="checkbox"/> Ports <input checked="" type="checkbox"/> Screws Tight Other Equipment/ Accessories: <input checked="" type="checkbox"/> Power cord <input type="checkbox"/> Printer Cable <input checked="" type="checkbox"/> Static Bag <input type="checkbox"/> 12V DC Cable Notes: <u>AI reports the instrument has power-up issues.</u> _____ _____ _____ _____ _____ _____ _____ _____ _____ _____	Quality Checks By _____ Date _____ <input type="checkbox"/> Breath Tube Screen <input type="checkbox"/> Replace External O-Rings <input type="checkbox"/> Instrument Set Up Verified <input type="checkbox"/> R-Value _____ <input type="checkbox"/> Flow Verification (L/s) Flow Column # _____ 32 mm _____ (.139 - .169) 36 mm _____ (.156 - .190) 53 mm _____ (.228 - .278) 103 mm _____ (.447 - .547) <input type="checkbox"/> Barometric Pressure Check Gauge ID # _____ <input type="checkbox"/> Stability Checks <table border="1" style="width: 100%;"> <thead> <tr> <th>Simulator</th> <th>Serial #</th> <th>Lot #/Exp</th> </tr> </thead> <tbody> <tr> <td>0.050</td> <td></td> <td></td> </tr> <tr> <td>0.080</td> <td></td> <td></td> </tr> <tr> <td>0.200</td> <td></td> <td></td> </tr> <tr> <td>0.080 DGS</td> <td>N/A</td> <td></td> </tr> </tbody> </table>	Simulator	Serial #	Lot #/Exp	0.050			0.080			0.200			0.080 DGS	N/A		Flow Calibration By _____ Date _____ Flow Column # _____ <input type="checkbox"/> 5L/min – 17mm <input type="checkbox"/> 15L/min – 53mm <input type="checkbox"/> 30L/min – 103mm <input type="checkbox"/> R-Value _____ <input type="checkbox"/> Post Calibration Verification (L/s) Flow Column # _____ 32 mm _____ (.139 - .169) 36 mm _____ (.156 - .190) 53 mm _____ (.228 - .278) 103 mm _____ (.447 - .547) Maintenance By _____ <input type="checkbox"/> Battery Replacement <input type="checkbox"/> Dry Gas Regulator Replacement <input type="checkbox"/> Breath Tube Replacement <input type="checkbox"/> Other _____ _____ _____ _____ _____ _____
Simulator	Serial #	Lot #/Exp															
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Return Material Authorization

Ship to: CMI, Inc.

Enforcement Electronics

Shipment to repair facility authorized by: Jose Montero, Jr. on 12/21/2023

Items Returned: Instrument Supplies Other Describe: _____

Instrument Model: Intoxilyzer 8000 Serial Number: 80-000876

Bill To Address:
Hialeah PD
Attn: Jose Montero, Jr.

Ship to Address:
Florida Department of Law Enforcement
Fort Myers Regional Operations Center
Attn: Taylor Gutschow
4700 Terminal Drive, Suite 1
Fort Myers, FL 33907

Reason for Return:

Instrument will not power on. May have records that need to be uploaded.

Please 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: Jose Montero, Jr
Phone #: 786-378-4002 Email: jmontero@hialeahfl.gov

ATP Contact Name: Taylor Gutschow ATP Email: TaylorGutschow@fdle.state.fl.us

12/15/2023

Good morning FDLE Inspector Taylor Gutschow,

The instrument does not power on, once the green start button is pressed.

Thank you

Jose Montero Jr #1763

Detective Jose Montero Jr

Hialeah Police Department

Criminal Investigation Division

Traffic Homicide Unit

Office: (305) 953-5256

Cell: (786) 378-4002

E-Mail: jmontero@hialeahfl.gov