

Florida Department of Law Enforcement Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: Broward County SO

Time of Inspection:

Serial Number: 80-007373

Date of Inspection: December 2024

Software: 8100.27

CHECK OR TEST	YES	NO
Date and/or Time Adjusted		
Diagnostic Check (Pre-Inspection): OK		
Alcohol Free Subject Test: 0.000		
Mouth Alcohol Test: Slope Not Met		
Interferent Detect Test: Interferent Detect		
Diagnostic Check (Post-Inspection): OK		

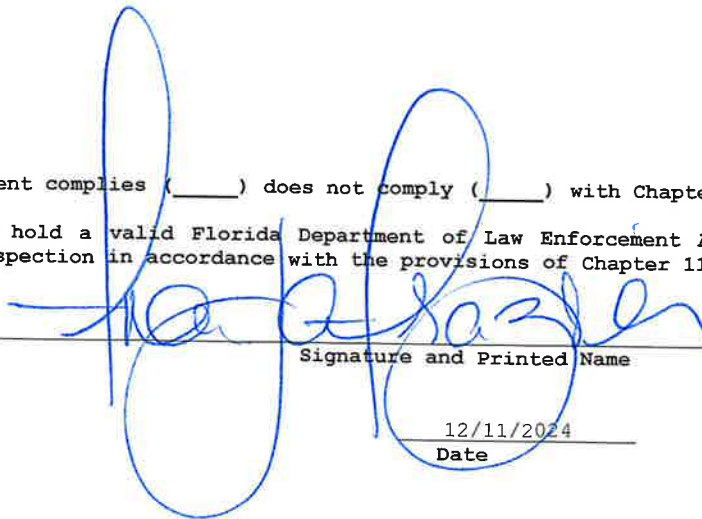
Alcohol Free Test (g/210L)	0.05g/210L Test (g/210L) Lot#: Exp:	0.08g/210L Test (g/210L) Lot#: Exp:	0.20g/210L Test (g/210L) Lot#: Exp:	0.08 g/210L Dry Gas Std Test (g/210L) Lot#: Exp:

Number of Simulators Used: _____

Remarks: Inspection was not conducted as the instrument was sent to FDLE for evaluation.

The above instrument complies (____) 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.



Anaya Frazier

Signature and Printed Name

12/11/2024
Date

Florida Department of Law Enforcement Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: Broward County SO
Time of Inspection:

Serial Number: 80-007373
Date of Inspection: November 2024

Software: 8100.27

CHECK OR TEST	YES	NO
Date and/or Time Adjusted		
Diagnostic Check (Pre-Inspection): OK		
Alcohol Free Subject Test: 0.000		
Mouth Alcohol Test: Slope Not Met		
Interferent Detect Test: Interferent Detect		
Diagnostic Check (Post-Inspection): OK		

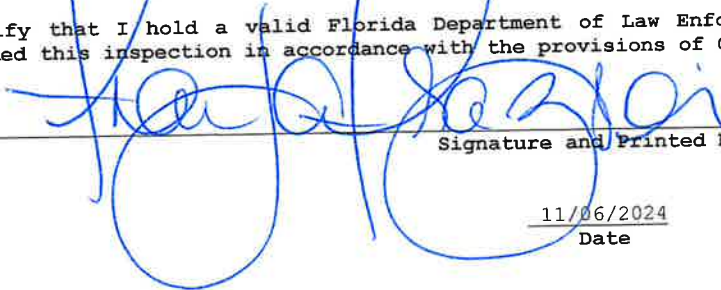
Alcohol Free Test (g/210L)	0.05g/210L Test (g/210L) Lot#: Exp:	0.08g/210L Test (g/210L) Lot#: Exp:	0.20g/210L Test (g/210L) Lot#: Exp:	0.08 g/210L Dry Gas Std Test (g/210L) Lot#: Exp:

Number of Simulators Used: _____

Remarks: Inspection was not conducted as the instrument was sent to CMI, Inc for repairs.

The above instrument complies (____) 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.



Anaya Frazier

Signature and Printed Name

11/06/2024
Date

Florida Department of Law Enforcement Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: Broward County SO

Serial Number: 80-007373

Time of Inspection:

Date of Inspection: October 2024

Software: 8100.27

CHECK OR TEST	YES	NO
Date and/or Time Adjusted		
Diagnostic Check (Pre-Inspection): OK		
Alcohol Free Subject Test: 0.000		
Mouth Alcohol Test: Slope Not Met		
Interferent Detect Test: Interferent Detect		
Diagnostic Check (Post-Inspection): OK		

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: Inspection was not conducted as the instrument was sent to CMI, Inc for repairs.

The above instrument complies (____) 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.

Anaya Frazier

Signature and Printed Name

10/23/2024
Date

Florida Department of Law Enforcement Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: Broward County SO

Serial Number: 80-007373

Time of Inspection:

Date of Inspection: September 2024

Software: 8100.27

CHECK OR TEST	YES	NO
Date and/or Time Adjusted		
Diagnostic Check (Pre-Inspection): OK		
Alcohol Free Subject Test: 0.000		
Mouth Alcohol Test: Slope Not Met		
Interferent Detect Test: Interferent Detect		
Diagnostic Check (Post-Inspection): OK		

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: Inspection was not conducted as the instrument was sent to CMI, Inc for repairs.

The above instrument complies (____) 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.

Anaya Frazier

Signature and Printed Name

09/04/2024

Date

AMENDMENT
Florida Department of Law Enforcement
Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: BROWARD COUNTY SO
Time of Inspection: 11:06

Date of Inspection: 07/23/2024 ⁰⁹⁰⁴

Serial Number: 80-007373
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#:202307C Exp: 07/12/2025	0.08 g/210L Dry Gas Std Test (g/210L) Lot#:402783528 Exp: 06/27/2026
0.000	0.048	0.077	0.199	0.081
0.000	0.048	0.078	0.199	0.080
0.000	0.048	0.078	0.198	0.080

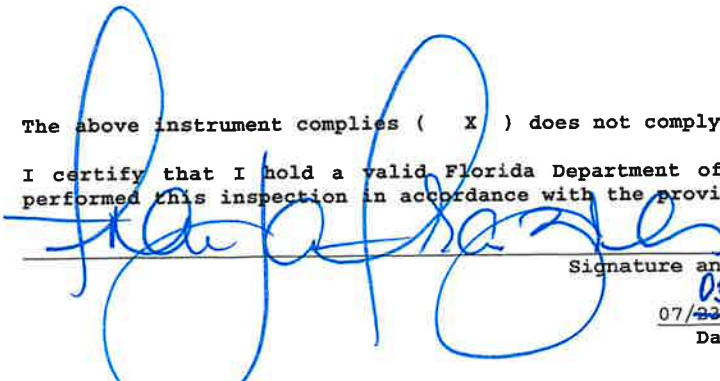
Number of Simulators Used: 5

Remarks:
J. GUZMAN IN TRAINING.

DATE INCORRECT. The CORRECT date is 07/03/2024. Department Inspector Notified

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 ANAYA S FRAZIER

^{09 04}
07/23/2024
Date

AMENDMENT

Florida Department of Law Enforcement Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: BROWARD COUNTY SO
Time of Inspection: 09:27

Date of Inspection: 06/25/2024

Serial Number: 80-007373
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#:202307C Exp: 07/12/2025	0.08 g/210L Dry Gas Std Test (g/210L) Lot#:402783528 Exp: 06/27/2026
0.000	0.048	0.078	0.198	0.081
0.000	0.048	0.078	0.198	0.081
0.000	0.049	0.079	0.198	0.082

Number of Simulators Used: 5

Remarks:

DATE INCORRECT. THE CORRECT DATE IS 06/05/2024. DEPARTMENT INSPECTOR NOTIFIED 04

The above instrument complies (☒) 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

ANAYA S FRAZIER

06/25/2024
Date