



INSTRUMENT PROCESSING SHEET

Agency Citrus County SOS/N 80-000819Florida Department of
Law EnforcementDate In 12/27/2023 DI Completion Date 12/27/2023☐ Ship ☐ P/U ☐ H/D ☒ CMI ☐ EE

Intake	By BS	Quality Checks	By BS	Date <u>12/27/2023</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>203</u> ☒ Flow Verification (L/s) Flow Column # <u>ATP105</u> 32 mm <u>0.164</u> (.139 - .169) 36 mm <u>0.179</u> (.156 - .190) 53 mm <u>0.250</u> (.228 - .278) 103 mm <u>0.523</u> (.447 - .547) ☒ Barometric Pressure Check Gauge ID # <u>28427</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 BS _____																																									
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Notes/Suggested Service: <u>Modem plug is broken off or otherwise missing. Send to repair. (BS 12/27/2023)</u> _____ _____ _____ _____ _____ _____ _____					☒ 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																																												
		Taylor Gutschow Digitally signed by Taylor Gutschow Date: 2024.01.12 09:26:53 -05'00'			Phil Nicodemo Digitally signed by Phil Nicodemo Date: 2024.01.24 13:27:52 -05'00'																																												
		Tech Review / Date _____			Admin Review / Date _____																																												

Florida Department of Law Enforcement Alcohol Testing Program

DEPARTMENT INSPECTION REPORT - INTOXILYZER 8000

Agency: CITRUS COUNTY SO
Time of Inspection: 12:24

Date of Inspection: 12/27/2023

Serial Number: 80-000819
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#:202303K Exp: 03/29/2025	0.08g/210L Test (g/210L) Lot#:202303L Exp: 03/29/2025	0.20g/210L Test (g/210L) Lot#:202304C Exp: 04/05/2025	0.08 g/210L Dry Gas Std Test (g/210L) Lot#:AG325603 Exp: 09/13/2025
0.000	0.051	0.079	0.197	0.081
0.000	0.050	0.079	0.198	0.081
0.000	0.050	0.079	0.198	0.082
0.000	0.050	0.079	0.198	0.082
0.000	0.049	0.079	0.198	0.081
0.000	0.050	0.079	0.197	0.081
0.000	0.050	0.079	0.198	0.082
0.000	0.050	0.079	0.197	0.081
0.000	0.049	0.079	0.198	0.081
0.000	0.049	0.079	0.197	0.081

Standard Deviations	0.0006	0.0000	0.0005	0.0004
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Average Standard Deviation of 0.05, 0.08 and 0.20 g/210L Tests: 0.0003 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.

Benjamin W. Siddoway BENJAMIN W SIDDOWAY
Signature and Printed Name

12/27/2023
Date

Stability Checks

CITRUS COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-000819
12/27/2023
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	10:15
Control Test	0.049	10:16
Air Blank	0.000	10:16
Control Test	0.050	10:17
Air Blank	0.000	10:17
Control Test	0.049	10:18
Air Blank	0.000	10:19
Control Test Stats		
Average	0.0493	
Std Dev	0.0006	
Rel Std Dev(%)	1.1703	

Benjamin Siedberg
Operator's Signature

CITRUS COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-000819
12/27/2023
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	09:51
Control Test	0.079	09:51
Air Blank	0.000	09:52
Control Test	0.079	09:53
Air Blank	0.000	09:53
Control Test	0.079	09:54
Air Blank	0.000	09:54
Control Test Stats		
Average	0.0790	
Std Dev	0.0000	
Rel Std Dev(%)	0.0000	

Benjamin Siedberg
Operator's Signature

CITRUS COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-000819
12/27/2023
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	09:57
Control Test	0.198	09:58
Air Blank	0.000	09:58
Control Test	0.198	09:59
Air Blank	0.000	10:00
Control Test	0.198	10:00
Air Blank	0.000	10:01
Control Test Stats		
Average	0.1980	
Std Dev	0.0000	
Rel Std Dev(%)	0.0000	

Benjamin Siedberg
Operator's Signature

CITRUS COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-000819
12/27/2023
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	10:05
Control Test	0.082	10:05
Air Blank	0.000	10:06
Control Test	0.082	10:06
Air Blank	0.000	10:07
Control Test	0.082	10:07
Air Blank	0.000	10:07
Control Test Stats		
Average	0.0820	
Std Dev	0.0000	
Rel Std Dev(%)	0.0000	

DGS

Benjamin Siedberg
Operator's Signature



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 80-000819, manufactured by CMI, Inc. was calibrated in accordance with FDLE/ATP Form 36 - Department Inspection Procedures - Intoxilyzer 8000.

Serial Number:	<u>80-000819</u>	UNCERTAINTY* $\pm$	
Owning Agency:	<u>CITRUS COUNTY SO</u>	0.050 g/ 210 L	0.004
Calibration Date:	<u>12/27/2023</u>	0.080 g/ 210 L	0.004
Calibration Time:	<u>12:24</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.

Benjamin Siddoway
Digitally signed by Benjamin Siddoway
Date: 2024.01.05 15:07:12 -05'00'

Date
12/27/2023
BENJAMIN W SIDDOWAY,
Department Inspector

FDLE/ATP Form 69 March 2022
Issuing Authority: Alcohol Testing Program

Service • Integrity • Respect • Quality

Return Material Authorization

Ship to: ☒ CMI, Inc.

☐ Enforcement Electronics

Shipment to repair facility authorized by: Jeffery Brown on 1/5/2024

Items Returned: Instrument ☒ Supplies ☐ Other ☐ Describe: _____

Instrument Model: Intoxilyzer 8000 Serial Number: 80-000819

Bill To Address:

Jeffery Brown

Citrus County SO

Ship to Address:

FDLE Off-Site Mail Facility

c/o Florida Dept of Law Enforcement

Alcohol Testing Program

813 B Lake Bradford Road

Tallahassee, FL 32304

Reason for Return:

Modem line plug is missing or broken.

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: Jeffery Brown

Phone #: 352-249-1377

Email: Jeffery.Brown@corecivic.com

ATP Contact Name: Benjamin Siddoway

ATP Email: BenjaminSiddoway@fdle.state.fl.us