

INSTRUMENT PROCESSING SHEET

Agency Pinellas County SO

S/N 80-001003

Date In 01-05-2024 DI Completion Date 01-23-2024

☒ Ship ☐ P/U ☐ H/D ☐ CMI ☐ EE

Intake	By ALL	Quality Checks	By BS																			
☐ 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>146</u> ☒ Flow Verification (L/s) Flow Column # <u>ATP102</u> 32 mm <u>0.160</u> (.139 - .169) 36 mm <u>0.175</u> (.156 - .190) 53 mm <u>0.250</u> (.228 - .278) 103 mm <u>0.500</u> (.447 - .547) ☒ Barometric Pressure Check Gauge ID # <u>28421</u> ☒ Stability Checks	Date <u>1/8/2024</u> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th>Simulator</th><th>Serial #</th><th>Lot #/Exp</th></tr> </thead> <tbody> <tr> <td rowspan="2">0.050</td><td rowspan="2">MP5088</td><td>202303K</td></tr> <tr> <td>3/29/2025</td></tr> <tr> <td rowspan="2">0.080</td><td rowspan="2">MP5089</td><td>202303L</td></tr> <tr> <td>3/29/2025</td></tr> <tr> <td rowspan="2">0.200</td><td rowspan="2">MP5090</td><td>202304C</td></tr> <tr> <td>4/5/2025</td></tr> <tr> <td rowspan="2">0.080 DGS</td><td rowspan="2">N/A</td><td>AG325603</td></tr> <tr> <td>9/13/2025</td></tr> </tbody> </table>	Simulator	Serial #	Lot #/Exp	0.050	MP5088	202303K	3/29/2025	0.080	MP5089	202303L	3/29/2025	0.200	MP5090	202304C	4/5/2025	0.080 DGS	N/A	AG325603	9/13/2025
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Flow Calibration By	Date
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)	

Maintenance	By
☐ Battery Replacement ☐ Dry Gas Regulator Replacement ☐ Breath Tube Replacement ☐ Other _____ _____ _____ _____ _____	

Calibration Adjustment	By																																																
Barometric Pressure Gauge _____ ID # _____ <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Simulator</th><th>Serial #</th><th>Lot #</th><th>Expiration</th></tr> </thead> <tbody> <tr> <td>0.000</td><td></td><td>N/A</td><td>N/A</td></tr> <tr> <td>0.040</td><td></td><td></td><td></td></tr> <tr> <td>0.100</td><td></td><td></td><td></td></tr> <tr> <td>0.200</td><td></td><td></td><td></td></tr> <tr> <td>0.300</td><td></td><td></td><td></td></tr> <tr> <td>0.080 DGS</td><td>N/A</td><td></td><td></td></tr> </tbody> </table> ☐ Post Calibration Adjustment Stability Checks <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Simulator</th><th>Serial #</th><th>Lot #</th><th>Expiration</th></tr> </thead> <tbody> <tr> <td>0.050</td><td></td><td></td><td></td></tr> <tr> <td>0.080</td><td></td><td></td><td></td></tr> <tr> <td>0.200</td><td></td><td></td><td></td></tr> <tr> <td>0.080 DGS</td><td>N/A</td><td></td><td></td></tr> </tbody> </table>	Simulator	Serial #	Lot #	Expiration	0.000		N/A	N/A	0.040				0.100				0.200				0.300				0.080 DGS	N/A			Simulator	Serial #	Lot #	Expiration	0.050				0.080				0.200				0.080 DGS	N/A			
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Department Inspection	By IS												
Barometric Pressure ID# <u>28663</u> Gauge <u>1025</u> Instrument <u>1022</u> Mouth Alcohol Solution Lot # <u>2023-A</u> Acetone Stock Solution Lot # <u>2022-B</u> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Simulator</th><th>Serial Number</th></tr> </thead> <tbody> <tr> <td>0.000</td><td>MP6289</td></tr> <tr> <td>Interferent</td><td>MP6290</td></tr> <tr> <td>0.050</td><td>MP6291</td></tr> <tr> <td>0.080</td><td>MP6292</td></tr> <tr> <td>0.200</td><td>MP6293</td></tr> </tbody> </table>	Simulator	Serial Number	0.000	MP6289	Interferent	MP6290	0.050	MP6291	0.080	MP6292	0.200	MP6293	
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0.050	MP6291												
0.080	MP6292												
0.200	MP6293												

Attachments
☒ Form 41 ☒ Stability Checks ☒ Calibration Certificate ☐ Calibration Adjustment ☐ Post-Stability Checks ☐ Flow Calibration ☒ Form 40 ☐ Other _____

☒ 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: 2024.01.24 09:47:16 -05'00'	Shayla Platt Platt Date: 2024.01.24 14:43:22 -05'00'
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Tech Review / Date	Admin Review / Date
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Florida Department of Law Enforcement Alcohol Testing Program

DEPARTMENT INSPECTION REPORT - INTOXILYZER 8000

Agency: PINELLAS COUNTY SO
Time of Inspection: 11:14

Date of Inspection: 01/23/2024

Serial Number: 80-001003
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#:AG229803 Exp: 10/25/2024
0.000	0.050	0.079	0.199	0.081
0.000	0.050	0.079	0.198	0.081
0.000	0.050	0.079	0.198	0.081
0.000	0.051	0.079	0.199	0.081
0.000	0.050	0.079	0.198	0.081
0.000	0.051	0.079	0.198	0.081
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0.000	0.050	0.080	0.198	0.081
0.000	0.050	0.080	0.198	0.081

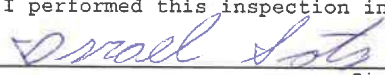
Standard Deviations	0.0004	0.0004	0.0004	0.0000
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Average Standard Deviation of 0.05, 0.08 and 0.20 g/210L Tests: 0.0003 Number of Simulators Used: 5

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.

 ISRAEL SOTO
Signature and Printed Name

01/23/2024
Date

Stability Checks

PINELLAS COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-001003
01/08/2024
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	15:30
Control Test	0.051	15:30
Air Blank	0.000	15:31
Control Test	0.050	15:32
Air Blank	0.000	15:32
Control Test	0.050	15:33
Air Blank	0.000	15:34
Control Test Stats		
Average	0.0503	
Std Dev	0.0006	
Rel Std Dev(%)	1.1471	

Benjamin Siddle
Operator's Signature

PINELLAS COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-001003
01/08/2024
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	15:35
Control Test	0.079	15:36
Air Blank	0.000	15:37
Control Test	0.078	15:37
Air Blank	0.000	15:38
Control Test	0.079	15:39
Air Blank	0.000	15:39
Control Test Stats		
Average	0.0787	
Std Dev	0.0006	
Rel Std Dev(%)	0.7339	

Benjamin Siddle
Operator's Signature

PINELLAS COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-001003
01/08/2024
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	15:42
Control Test	0.197	15:42
Air Blank	0.000	15:43
Control Test	0.196	15:44
Air Blank	0.000	15:44
Control Test	0.195	15:45
Air Blank	0.000	15:45
Control Test Stats		
Average	0.1960	
Std Dev	0.0010	
Rel Std Dev(%)	0.5102	

Benjamin Siddle
Operator's Signature

PINELLAS COUNTY SO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-001003
01/08/2024
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	15:47
Control Test	0.081	15:47
Air Blank	0.000	15:47
Control Test	0.082	15:48
Air Blank	0.000	15:48
Control Test	0.082	15:49
Air Blank	0.000	15:49
Control Test Stats		
Average	0.0817	
Std Dev	0.0006	
Rel Std Dev(%)	0.7070	

DGS

Benjamin Siddle
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 80-001003 , manufactured by CMI, Inc. was calibrated in accordance with FDLE/ATP Form 36 - Department Inspection Procedures - Intoxilyzer 8000.

Serial Number:	<u>80-001003</u>	UNCERTAINTY* $\pm$	
Owning Agency:	<u>PINELLAS COUNTY SO</u>	0.050 g/ 210 L	0.004
Calibration Date:	<u>01/23/2024</u>	0.080 g/ 210 L	0.004
Calibration Time:	<u>11:14</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 $\pm$ 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.

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

01/23/2024

Date

Israel Soto
ISRAEL SOTO,

Department Inspector

Service • Integrity • Respect • Quality

Florida Department of Law Enforcement Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: PINELLAS COUNTY SO
Time of Inspection: 14:27

Date of Inspection: 01/08/2024

Serial Number: 80-001003
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:

COMPLIANCE NOT DETERMINED, BYPASS AI TO OPERATE

N/A compliance not determined
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.

Benjamin Siddoway

BENJAMIN W SIDDOWAY
Signature and Printed Name

01/08/2024
Date