



INSTRUMENT PROCESSING SHEET

Agency Broward CSOS/N 80-001139Florida Department of
Law EnforcementDate In 02/12/2024 DI Completion Date 02/13/2024☒ Ship ☐ P/U ☐ H/D ☐ CMI ☐ EE

Intake By <u>TDG</u> Date <u>02/13/2024</u>	Quality Checks By <u>TDG</u> Date <u>02/13/2024</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>191</u> ☒ Flow Verification (L/s) Flow Column # <u>ATP106</u> 32 mm <u>0.152</u> (.139 - .169) 36 mm <u>0.164</u> (.156 - .190) 53 mm <u>0.234</u> (.228 - .278) 103 mm <u>0.492</u> (.447 - .547) ☒ Barometric Pressure Check Gauge ID # <u>26932</u> ☒ Stability Checks <table border="1"><thead><tr><th>Simulator</th><th>Serial #</th><th>Lot #/Exp</th></tr></thead><tbody><tr><td>0.050</td><td>MP5094</td><td>202303K 03/29/2025</td></tr><tr><td>0.080</td><td>MP5095</td><td>202303L 03/29/2025</td></tr><tr><td>0.200</td><td>MP5096</td><td>202304C 04/05/2025</td></tr><tr><td>0.080 DGS</td><td>N/A</td><td>01923080A3 02/05/2025</td></tr></tbody></table>	Simulator	Serial #	Lot #/Exp	0.050	MP5094	202303K 03/29/2025	0.080	MP5095	202303L 03/29/2025	0.200	MP5096	202304C 04/05/2025	0.080 DGS	N/A	01923080A3 02/05/2025	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 _____ Date _____ ☐ Battery Replacement ☐ Dry Gas Regulator Replacement ☐ Breath Tube Replacement ☐ Other _____ _____ _____ _____ _____ _____																																												
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Notes/Suggested Service: <u>Added static bag for return to agency. (TDG)</u> _____ _____ _____ _____ _____ _____ _____ _____ _____																																																													

Stability Checks

0.05g/210L	0.08g/210L	0.20g/210L	DGS 0.08g/210L																																																																																																																																				
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Florida Department of Law Enforcement Alcohol Testing Program

DEPARTMENT INSPECTION REPORT - INTOXILYZER 8000

Agency: BROWARD COUNTY SO
Time of Inspection: 11:45

Date of Inspection: 02/13/2024

Serial Number: 80-001139
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#:01923080A3 Exp: 02/05/2025
0.000	0.049	0.079	0.197	0.080
0.000	0.049	0.079	0.198	0.079
0.000	0.049	0.079	0.198	0.080
0.000	0.049	0.079	0.198	0.079
0.000	0.049	0.079	0.198	0.079
0.000	0.049	0.079	0.197	0.079
0.000	0.049	0.079	0.197	0.079
0.000	0.050	0.079	0.198	0.079
0.000	0.050	0.079	0.197	0.079
0.000	0.050	0.079	0.198	0.080

Standard Deviations	0.0004	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.



TAYLOR D GUTSCHOW

Signature and Printed Name

02/13/2024
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 80-001139, manufactured by CMI, Inc. was calibrated in accordance with FDLE/ATP Form 36 - Department Inspection Procedures - Intoxilyzer 8000.

Serial Number:	<u>80-001139</u>	UNCERTAINTY* $\pm$
Owning Agency:	<u>BROWARD COUNTY SO</u>	0.050 g/ 210 L 0.004
Calibration Date:	<u>02/13/2024</u>	0.080 g/ 210 L 0.004
Calibration Time:	<u>11:45</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.

FDLE/ATP Form 69 December 2021

Issuing Authority: Alcohol Testing Program

02/13/2024

Date

Jay D Gutschow

TAYLOR D GUTSCHOW,

Department Inspector

Service • Integrity • Respect • Quality