



Agency Leon County SO

S/N 80-000957

Date In 03/18/2025 DI Completion Date N/A

☐ Ship ☐ P/U ☐ H/D ☒ CMI ☐ EE

## Calibration Adjustment

By \_\_\_\_\_

## ❑ Post Calibration Adjustment Stability Checks

## Department Inspection

By PN

## Attachments

- ☐ Instrument Complies with Chapter 11D-8, FAC
- ☒ Instrument Does Not Comply with Chapter 11D-8, FAC

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- ☐ Return to/Place into Evidentiary Use
- ☒ Remain Out of Evidentiary Use

☐ **Conduct an Agency Inspection Before Evidentiary Use**

Shayla Platt  
Date: 2025.06.03  
12:40:13 -04'00'

Tech Review / Date

Admin Review / Date

Technical Review: Corrected name and email address  
on Form 51. PN 6/3/2025

LEON COUNTY SO  
Intoxilyzer - Alcohol Analyzer  
Model 8000 SN 80-000957  
05/19/2025  
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	15:53
Control Test	0.050	15:54
Air Blank	0.000	15:54
Control Test	0.049	15:55
Air Blank	0.000	15:55
Control Test	0.049	15:56
Air Blank	0.000	15:57
Control Test Stats		
Average	0.0493	
Std Dev	0.0006	
Rel Std Dev(%)	1.1703	

  
Operator Signature

LEON COUNTY SO  
Intoxilyzer - Alcohol Analyzer  
Model 8000 SN 80-000957  
05/19/2025  
Software: 8100.27

Test	g/210L	Time
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Air Blank	0.000	16:00
Control Test	0.080	16:01
Air Blank	0.000	16:02
Control Test	0.080	16:02
Air Blank	0.000	16:03
Control Test	0.079	16:03
Air Blank	0.000	16:04
Control Test Stats		
Average	0.0797	
Std Dev	0.0006	
Rel Std Dev(%)	0.7247	

  
Operator's Signature

LEON COUNTY SO  
Intoxilyzer - Alcohol Analyzer  
Model 8000 SN 80-000957  
05/19/2025  
Software: 8100.27

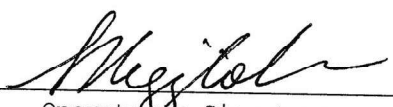
DGS

Test	g/210L	Time
Air Blank	0.000	16:13
Control Test	0.078	16:13
Air Blank	0.000	16:14
Control Test	0.079	16:14
Air Blank	0.000	16:15
Control Test	0.078	16:15
Air Blank	0.000	16:16
Control Test Stats		
Average	0.0783	
Std Dev	0.0006	
Rel Std Dev(%)	0.7370	

  
Operator's Signature

LEON COUNTY SO  
Intoxilyzer - Alcohol Analyzer  
Model 8000 SN 80-000957  
05/19/2025  
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	16:07
Control Test	0.200	16:08
Air Blank	0.000	16:09
Control Test	0.198	16:09
Air Blank	0.000	16:10
Control Test	0.199	16:10
Air Blank	0.000	16:11
Control Test Stats		
Average	0.1990	
Std Dev	0.0010	
Rel Std Dev(%)	0.5025	

  
Operator's Signature

# Florida Department of Law Enforcement Alcohol Testing Program

## AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: LEON COUNTY SO  
Time of Inspection: 10:45

Date of Inspection: 04/08/2025

Serial Number: 80-000957  
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:

BYPASS AI TO OPERATE INSTRUMENT COMPLIANCE UNDETERMINED

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.

*LEANDRA HIGGINBOTHAM*  
Signed 6/2/25

LEANDRA HIGGINBOTHAM

Signature and Printed Name

04/08/2025

Date

# Florida Department of Law Enforcement Alcohol Testing Program

## AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: LEON COUNTY SO  
Time of Inspection: 13:28

Date of Inspection: 05/19/2025

Serial Number: 80-000957  
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:

BYPASS AI FOR OPERATION, COMPLIANCE UNDETERMINED

*compliance*

The above instrument complies ( *N/A* ) 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]*

LEANDRA HIGGINBOTHAM

Signature and Printed Name

05/19/2025  
Date



# Florida Department of Law Enforcement Alcohol Testing Program

## AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: LEON COUNTY SO  
Time of Inspection: 10:27

Date of Inspection: 05/30/2025

Serial Number: 80-000957  
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:_____

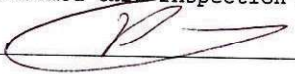
Number of Simulators Used: \_\_\_\_\_

**Remarks:**

BYPASSED AI TO OPERATE INSTRUMENT. COMPLIANCE NOT DETERMINED

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.

  
 PHIL NICODEMO  
 Signature and Printed Name

05/30/2025  
Date



# Florida Department of Law Enforcement Alcohol Testing Program

## DEPARTMENT INSPECTION REPORT - INTOXILYZER 8000

Agency: LEON COUNTY SO

Time of Inspection: 12:24

Date of Inspection: 05/30/2025

Serial Number: 80-000957

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		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:
0.000 / 0.000				
0.000 / 0.000				
INT / 0.000				
/ INT				

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

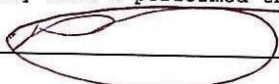
**Remarks:**

00: Interferent Detect, Interferent Detect. Non-compliance: .

*Inspector in training used highly scented hand lotion in room.  
Turned on two fans to ensure room was cleared of scent.  
PN 5/30/2025 WILL REPEAT INSPECTION.*

The above instrument complies ( ) does not comply ( X ) with Chapter 11D-8, FAC.

I certify that I performed this inspection in accordance with the provisions of Chapter 11D-8, FAC.

 \_\_\_\_\_  
Signature and Printed Name

PHIL NICODEMO

05/30/2025  
Date

# Florida Department of Law Enforcement Alcohol Testing Program

## DEPARTMENT INSPECTION REPORT - INTOXILYZER 8000

Agency: LEON COUNTY SO  
Time of Inspection: 13:36

Date of Inspection: 05/30/2025

Serial Number: 80-000957  
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		No

Alcohol Free Test (g/210L)	0.05g/210L Test (g/210L) Lot#:202406K Exp: 06/19/2026	0.08g/210L Test (g/210L) Lot#:202406L Exp: 06/19/2026	0.20g/210L Test (g/210L) Lot#: Exp:	0.08 g/210L Dry Gas Std Test (g/210L) Lot#: Exp:
0.000 / 0.000	0.048	0.080 / 0.079		
0.000 / 0.000	0.049	0.081 / 0.079		
INT / 0.000	0.050	0.082 / 0.079		
/ 0.000	0.050	INT / 0.079		
/ 0.000	0.050	/ INT		
/ 0.000	0.050			
/ 0.000	0.050			
/ 0.000	0.051			
/ 0.000	0.051			
/ 0.000	0.051			

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

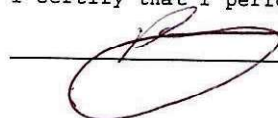
**Remarks:**

00: Interferent Detect. 08: Interferent Detect, Interferent Detect. Non-compliance: .

*Despite having two fans present to clear area of scent,  
this instrument continued to display "INT ~~DETECT~~  
DETECT" MESSAGE. WILL  
SPEAK WITH AGENCY INSPECTOR AND SEND TO REPAIR.  
PN 5/30/2025*

The above instrument complies ( ) does not comply ( X ) with Chapter 11D-8, FAC.

I certify that I performed this inspection in accordance with the provisions of Chapter 11D-8, FAC.

 PHIL NICODEMO  
Signature and Printed Name

05/30/2025  
Date

## **Return Material Authorization**

**Ship to:** ☒ CMI, Inc.

☐ Enforcement Electronics

Shipment to repair facility authorized by: \_\_\_\_\_ on \_\_\_\_\_

**Items Returned:**      Instrument ☒    Supplies ☐    Other ☐ Describe: \_\_\_\_\_

Instrument Model: Intoxilyzer 8000      Serial Number: 80-000957

Bill To Address:

Leon County SO

Ship to Address:

FDLE Off-Site Mail Facility

Florida Department of Law Enforcement

Alcohol Testing Program

813 B Lake Bradford Road

Tallahassee, FL 32304

**Reason for Return:**

Instrument returned from repair and has remained at FDLE until inspector was able to  
process instrument. Upon inspection, inspector observed repeated "Interferent Detect"  
messages across two inspection attempts. Returning to repair for additional evaluation.

**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: Fred Hening

Phone #: 850-445-8001

Email: FredrickHening@flhsmv.gov

ATP Contact Name: Phil Nicodemo      ATP Email: philipnicodemo@fdle.state.fl.us

Nicodemo PN 6/3/2025

fdle PN 6/3/2025