



Agency NASSAU COUNTY SO

S/N 80-001053

Date In 7/9/2025DI Completion Date 7/10/25

☒ Ship ☐ P/U ☐ H/D ☐ CMI ☐ EE

Intake By <u>WKP</u> Date <u>7/9/2025</u>	Quality Checks By <u>WKP</u> Date <u>07/10/2025</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>194</u> ☒ Flow Verification (L/s) Flow Column # <u>ATP 102</u> 32 mm <u>0.148</u> (.139 - .169) 36 mm <u>0.167</u> (.156 - .190) 53 mm <u>0.234</u> (.228 - .278) 103 mm <u>0.507</u> (.447 - .547) ☒ Barometric Pressure Check Gauge ID # <u>28662</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)															
	<table border="1"><thead><tr><th>Simulator</th><th>Serial #</th><th>Lot #/Exp</th></tr></thead><tbody><tr><td>0.050</td><td>MP5088</td><td>202406K 06/19/2026</td></tr><tr><td>0.080</td><td>MP5089</td><td>202406L 06/19/2026</td></tr><tr><td>0.200</td><td>MP5090</td><td>202406N 06/20/2026</td></tr><tr><td>0.080 DGS</td><td>N/A</td><td>AG429602 10/22/2026</td></tr></tbody></table>	Simulator	Serial #	Lot #/Exp	0.050	MP5088	202406K 06/19/2026	0.080	MP5089	202406L 06/19/2026	0.200	MP5090	202406N 06/20/2026	0.080 DGS	N/A	AG429602 10/22/2026	Maintenance By _____ Date _____ ☐ Battery Replacement ☐ Dry Gas Regulator Replacement ☐ Breath Tube Replacement ☐ Other _____ _____ _____ _____ _____
Simulator	Serial #	Lot #/Exp															
0.050	MP5088	202406K 06/19/2026															
0.080	MP5089	202406L 06/19/2026															
0.200	MP5090	202406N 06/20/2026															
0.080 DGS	N/A	AG429602 10/22/2026															

Calibration Adjustment				By _____	
Barometric Pressure Gauge _____				ID # _____	
Simulator	Serial #	Lot #	Expiration		
0.000		N/A	N/A		
0.040					
0.100					
0.200					
0.300					
0.080 DGS	N/A				
☐ Post Calibration Adjustment Stability Checks					
Simulator	Serial #	Lot #	Expiration		
0.050					
0.080					
0.200					
0.080 DGS	N/A				
Notes/Suggested Service: _____ _____ _____ _____ _____ _____ _____ _____					

Department Inspection		By <u>SP</u>	
Barometric Pressure ID# <u>28662</u>			
Gauge <u>1013</u>	Instrument <u>1015</u>		
Mouth Alcohol Solution Lot # <u>2024-A</u>			
Acetone Stock Solution Lot # <u>2024-B</u>			
Simulator	Serial Number		
0.000	MP6294		
Interferent	MP5087		
0.050	MP5088		
0.080	MP5089		
0.200	MP5090		
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: 2025.07.11 14:14:36 -04'00'		Phil Nicodemo Digitally signed by Phil Nicodemo Date: 2025.07.11 15:23:18 -04'00'	
Tech Review / Date _____		Admin Review / Date _____	

Stability Checks

0.05g/210L		0.08g/210L		0.20g/210L		DGS 0.08g/210L	
0.047 to 0.053		0.077 to 0.083		0.194 to 0.206		0.077 to 0.083	
Performed Root Case Analysis		Performed Root Case Analysis		Performed Root Case Analysis		Performed Root Case Analysis	
NAES-4 COUNTY 50 Intoxilyzer - Alcohol Analyzer Model 8000 07/10/2025 Software: 8100.27 SN 80-001053		NAES-4 COUNTY 50 Intoxilyzer - Alcohol Analyzer Model 8000 07/10/2025 Software: 8100.27 SN 80-001053		NAES-4 COUNTY 50 Intoxilyzer - Alcohol Analyzer Model 8000 07/10/2025 Software: 8100.27 SN 80-001053		NAES-4 COUNTY 50 Intoxilyzer - Alcohol Analyzer Model 8000 07/10/2025 Software: 8100.27 SN 80-001053	
Test		Test		Test		Test	
g/210L		g/210L		g/210L		g/210L	
Time		Time		Time		Time	
Air Blank		Air Blank		Air Blank		Air Blank	
Control Test		Control Test		Control Test		Control Test	
Air Blank		Air Blank		Air Blank		Air Blank	
Control Test		Control Test		Control Test		Control Test	
Air Blank		Air Blank		Air Blank		Air Blank	
Control Test		Control Test		Control Test		Control Test	
Air Blank		Air Blank		Air Blank		Air Blank	
Control Test		Control Test		Control Test		Control Test	
Control Test Stats		Control Test Stats		Control Test Stats		Control Test Stats	
Average		Average		Average		Average	
Std Dev		Std Dev		Std Dev		Std Dev	
Rel Std Dev(%)		Rel Std Dev(%)		Rel Std Dev(%)		Rel Std Dev(%)	
Operator's Signature		Operator's Signature		Operator's Signature		Operator's Signature	

Florida Department of Law Enforcement

Alcohol Testing Program

DEPARTMENT INSPECTION REPORT - INTOXILYZER 8000

Agency: NASSAU COUNTY SO
Time of Inspection: 16:11

Date of Inspection: 07/10/2025

Serial Number: 80-001053
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#:202406K Exp: 06/19/2026	0.08g/210L Test (g/210L) Lot#:202406L Exp: 06/19/2026	0.20g/210L Test (g/210L) Lot#:202406N Exp: 06/20/2026	0.08 g/210L Dry Gas Std Test (g/210L) Lot#:AG429602 Exp: 10/22/2026
0.000	0.049	0.079	0.200	0.077
0.000	0.049	0.079	0.200	0.077
0.000	0.048	0.079	0.201	0.077
0.000	0.049	0.079	0.200	0.078
0.000	0.049	0.079	0.200	0.077
0.000	0.049	0.079	0.200	0.077
0.000	0.050	0.079	0.200	0.077
0.000	0.048	0.079	0.201	0.078
0.000	0.049	0.080	0.200	0.078
0.000	0.049	0.079	0.200	0.077

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

Shayla Platt

SHAYLA D PLATT

Signature and Printed Name

07/10/2025
Date



Calibration Certificate

Florida Department of Law Enforcement
Alcohol Testing Program
2331 Phillips Road
Tallahassee, FL 32308

This is to certify the calibration of Intoxilyzer 8000 serial number 80-001053, manufactured by CMI, Inc. was calibrated in accordance with FDLE/ATP Form 36 - Department Inspection Procedures - Intoxilyzer 8000.

Serial Number:	<u>80-001053</u>	UNCERTAINTY* $\pm$
Owning Agency:	<u>NASSAU COUNTY SO</u>	0.050 g/ 210 L 0.004
Calibration Date:	<u>07/10/2025</u>	0.080 g/ 210 L 0.004
Calibration Time:	<u>16:11</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.

Shayla Platt
Digitally signed by
Shayla Platt
Date: 2025.07.10
17:12:57 -04'00'

07/10/2025

Date

SHAYLA D PLATT,
Department Inspector

FDLE/ATP Form 69 October 2024

Issuing Authority: Alcohol Testing Program

Service • Integrity • Respect • Quality