



INSTRUMENT PROCESSING SHEET

Agency FL Highway PatrolS/N 80-006771Florida Department of
Law EnforcementDate In 2/10/25DI Completion Date N/A☐ Ship ☐ P/U ☐ H/D ☒ CMI ☐ EE

Intake By <u>ALL</u> Date <u>2/10/25</u> <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Registration <input type="checkbox"/> Return from CMI / EE Visual Inspection: <input checked="" type="checkbox"/> Case <input type="checkbox"/> Handle <input checked="" type="checkbox"/> Keyboard <input type="checkbox"/> Dry Gas Shelf <input checked="" type="checkbox"/> Feet <input type="checkbox"/> Breath Tube <input checked="" type="checkbox"/> Ports <input type="checkbox"/> Screws Tight Other Equipment/ Accessories: <input type="checkbox"/> Power cord <input type="checkbox"/> Printer Cable <input checked="" type="checkbox"/> Static Bag <input type="checkbox"/> 12V DC Cable Notes: AI indicated that instrument displaying RAM FAIL during diagnostic checks. DA 02/12/2025	Quality Checks By <u>DA</u> Date <u>02/12/2025</u> <input checked="" type="checkbox"/> Breath Tube Screen <input checked="" type="checkbox"/> Replace External O-Rings <input checked="" type="checkbox"/> Instrument Set Up Verified <input checked="" type="checkbox"/> R-Value <u>67</u> <input checked="" type="checkbox"/> Flow Verification (L/s) Flow Column # <u>ATP102</u> 32 mm <u>0.027</u> (.139 - .169) 36 mm <u>0.035</u> (.156 - .190) 53 mm <u>0.097</u> (.228 - .278) 103 mm <u>0.414</u> (.447 - .547) <input checked="" type="checkbox"/> Barometric Pressure Check Gauge ID # <u>30793</u> <input checked="" type="checkbox"/> Stability Checks <table border="1" style="width:100%; border-collapse: collapse;"><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	Flow Calibration By <u>DA</u> Date <u>02/12/2025</u> Flow Column # <u>ATP103/ATP105</u> <input checked="" type="checkbox"/> 5L/min – 17mm <input checked="" type="checkbox"/> 15L/min – 53mm <input checked="" type="checkbox"/> 30L/min – 103mm <input checked="" type="checkbox"/> R-Value <u>69/69</u> <input checked="" type="checkbox"/> Post Calibration Verification (L/s) Flow Column # <u>ATP102</u> 32 mm <u>0.144/0.140</u> (.139 - .169) 36 mm <u>0.152/0.152</u> (.156 - .190) 53 mm <u>0.210/0.203</u> (.228 - .278) 103 mm <u>0.503/0.496</u> (.447 - .547) Maintenance By _____ Date _____ <input type="checkbox"/> Battery Replacement <input type="checkbox"/> Dry Gas Regulator Replacement <input type="checkbox"/> Breath Tube Replacement <input type="checkbox"/> Other _____																																	
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Department Inspection By _____ Barometric Pressure ID# _____ Gauge _____ Instrument _____ Mouth Alcohol Solution Lot # _____ Acetone Stock Solution Lot # _____ <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></td></tr><tr><td>Interferent</td><td></td></tr><tr><td>0.050</td><td></td></tr><tr><td>0.080</td><td></td></tr><tr><td>0.200</td><td></td></tr></tbody></table> Attachments <table style="width:100%;"><tr><td><input type="checkbox"/> Form 41</td><td><input type="checkbox"/> Post-Stability Checks</td></tr><tr><td><input checked="" type="checkbox"/> Stability Checks</td><td><input checked="" type="checkbox"/> Flow Calibration</td></tr><tr><td><input type="checkbox"/> Calibration Certificate</td><td><input checked="" type="checkbox"/> Form 40</td></tr><tr><td><input type="checkbox"/> Calibration Adjustment</td><td><input checked="" type="checkbox"/> Other <u>Diagnostic/Form 51</u></td></tr></table> <input type="checkbox"/> Instrument Complies with Chapter 11D-8, FAC <input checked="" type="checkbox"/> Instrument Does Not Comply with Chapter 11D-8, FAC <input type="checkbox"/> Return to/Place into Evidentiary Use <input checked="" type="checkbox"/> Remain Out of Evidentiary Use <input type="checkbox"/> Conduct an Agency Inspection Before Evidentiary Use <div style="display: flex; justify-content: space-between;"><div>Taylor Gutschow <small>Digitally signed by Taylor Gutschow Date: 2025.02.17 15:52:55 -05'00'</small></div><div>Shayla Platt <small>Digitally signed by Shayla Platt Date: 2025.02.19 12:36:59 -05'00'</small></div></div> <div style="display: flex; justify-content: space-between;"><div>Tech Review / Date</div><div>Admin Review / Date</div></div>			Simulator	Serial Number	0.000		Interferent		0.050		0.080		0.200		<input type="checkbox"/> Form 41	<input type="checkbox"/> Post-Stability Checks	<input checked="" type="checkbox"/> Stability Checks	<input checked="" type="checkbox"/> Flow Calibration	<input type="checkbox"/> Calibration Certificate	<input checked="" type="checkbox"/> Form 40	<input type="checkbox"/> Calibration Adjustment	<input checked="" type="checkbox"/> Other <u>Diagnostic/Form 51</u>																												
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Florida Department of Law Enforcement Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: FL HIGHWAY PATROL
Time of Inspection: 11:12

Date of Inspection: 02/12/2025

Serial Number: 80-006771
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: _____

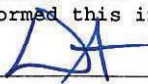
Remarks:

BYPASS AI TO OPERATE INSTRUMENT COMPLIANCE NOT DETERMINED

N/A DA 2/12/25

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.



DESTINEE N ARMSTRONG

Signature and Printed Name

02/12/2025
Date

Diagnostic Tests 80-006771 DA 2/12/25

FL HIGHWAY PATROL
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-006771
02/12/2025
Software: 8100.27

#1

DIAGNOSTICS

Voltage/Current Test	OK
RAM Test	OK
EEPROM Checksum Test	OK
Real Time Clock Test	OK
DSP Test	OK
Analytical Stability Test	OK
Internal Printer Test	OK
Modem Test	OK
Temperature Regulation Test	OK

FL HIGHWAY PATROL
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-006771
02/12/2025
Software: 8100.27

#2

DIAGNOSTICS

Voltage/Current Test	OK
RAM Test	OK
EEPROM Checksum Test	OK
Real Time Clock Test	OK
DSP Test	OK
Analytical Stability Test	OK
Internal Printer Test	OK
Modem Test	OK
Temperature Regulation Test	OK

Agency Inspector indicated RAM fails during diagnostic checks. I was unable to replicate the RAM fails. I performed two additional diagnostic tests and all results 'OK'.

Flow Calibration Adjustment

80-006771 DA 2/12/25

FL HIGHWAY PATROL
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-006771
02/12/2025
Software: 8100.27

#1

Flow Rate Calibration*****
1: Rate (Liters/min) = 5
SQRT(Diff) = 3.316
2: Rate (Liters/min) = 15
SQRT(Diff) = 7.070
3: Rate (Liters/min) = 30
SQRT(Diff) = 18.598
Dependent Data Scale Factor = 100000 L/min
Independent Data Scale Factor = 256
Rounded Slope = 608
Rounded Intercept = 162224
Correlation = 0.98547

FL HIGHWAY PATROL
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-006771
02/12/2025
Software: 8100.27

#2

Flow Rate Calibration*****
1: Rate (Liters/min) = 5
SQRT(Diff) = 3.461
2: Rate (Liters/min) = 15
SQRT(Diff) = 7.414
3: Rate (Liters/min) = 30
SQRT(Diff) = 19.129
Dependent Data Scale Factor = 100000 L/min
Independent Data Scale Factor = 256
Rounded Slope = 595
Rounded Intercept = 142800
Correlation = 0.98664

Stability Checks - 80-006771

2/12/25

DA

FL HIGHWAY PATROL

Intoxilyzer - Alcohol Analyzer

Model 8000

SN 80-006771

02/12/2025

Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	11:32
Control Test	0.047	11:33
Air Blank	0.000	11:34
Control Test	0.048	11:34
Air Blank	0.000	11:35
Control Test	0.047	11:35
Air Blank	0.000	11:36
Control Test Stats		
Average	0.0473	
Std Dev	0.0006	
Rel Std Dev(%)	1.2198	



Operator's Signature

FL HIGHWAY PATROL

Intoxilyzer - Alcohol Analyzer

Model 8000

SN 80-006771

02/12/2025

Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	11:37
Control Test	0.078	11:38
Air Blank	0.000	11:38
Control Test	0.078	11:39
Air Blank	0.000	11:39
Control Test	0.078	11:40
Air Blank	0.000	11:41
Control Test Stats		
Average	0.0780	
Std Dev	0.0000	
Rel Std Dev(%)	0.0000	

Wet



Operator's Signature

FL HIGHWAY PATROL

Intoxilyzer - Alcohol Analyzer

Model 8000

SN 80-006771

02/12/2025

Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	11:25
Control Test	0.197	11:26
Air Blank	0.000	11:27
Control Test	0.197	11:27
Air Blank	0.000	11:28
Control Test	0.197	11:29
Air Blank	0.000	11:29
Control Test Stats		
Average	0.1970	
Std Dev	0.0000	
Rel Std Dev(%)	0.0000	



Operator's Signature

FL HIGHWAY PATROL

Intoxilyzer - Alcohol Analyzer

Model 8000

SN 80-006771

02/12/2025

Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	11:44
Control Test	0.079	11:44
Air Blank	0.000	11:44
Control Test	0.078	11:45
Air Blank	0.000	11:45
Control Test	0.078	11:46
Air Blank	0.000	11:46
Control Test Stats		
Average	0.0783	
Std Dev	0.0006	
Rel Std Dev(%)	0.7370	

DGS



Operator's Signature

Return Material Authorization

Ship to: ☒ CMI, Inc.

☐ Enforcement Electronics

Shipment to repair facility authorized by: Jordan Capela on 02/03/2025

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

Instrument Model: Intoxilyzer 8000 Serial Number: 80-006771

Bill To Address:

Florida Highway Patrol

ATTN: Jordan Capela

Ship to Address:

FDLE Off-Site Mail Facility

c/o Florida Department of Law Enforcement

Alcohol Testing Program

813 B Lake Bradford Rd

Tallahassee, FL 32304

Reason for Return:

Agency Inspector reported RAM fails during diagnostic checks and unable to upload
the instrument. I was unable to replicate the reported RAM fails and was able to successfully
upload. However, instrument R-value is less than 100. I performed two flow calibration
adjustments and post-calibration verification values were outside of nominal range.

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: Jordan Capela

Phone #: _____ Email: jordancapela@flhsmv.gov

ATP Contact Name: Destinee Armstrong ATP Email: destinee.armstrong@fdle.state.fl.us