Florida Department of Law Enforcement Alcohol Testing Program

REGISTRATION OF EVIDENTIARY BREATH TEST INSTRUMENT

MANUFACTURER:

CMI, Inc.

MODEL:

Intoxilyzer 8000

SERIAL NUMBER:

80-001724

OWNER:

Gretna Police Department

DATE OF REGISTRATION:

September 29, 2009

The above instrument is hereby approved for evidentiary breath alcohol testing in the State of Florida pursuant to Chapter 11D-8, Florida Administrative Code. This instrument and related records are subject to inspection at any time by the Florida Department of Law Enforcement.

Authorized Representative Alcohol Testing Program

Florida Department of Law Enforcement

Florida Department of Law Enforcement Alcohol Testing Program

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Authorized Representative Alcohol Testing Program

Florida Department of Law Enforcement



Florida Department Of Law Enforcement Alcohol Testing Program

SEP 3 0 2009

Alcohol Testing Program

REQUEST FOR REGISTRATION

MAKE AND MODEL OF INSTRUMENT: INTOXILYZER 8000
SERIAL NUMBER: 80-001724
OWNING AGENCY: GRETNA P.D.
DATE OF DEPARTMENT INSPECTION: $9/29/2009$
AGENCY INSPECTOR: JAMES STRICKLAND
ADDRESS: 14615 MAIN ST.
CITY, STATE, ZIP: GRETNA FL 32332
TELEPHONE NUMBER: 850-856-5257
FAX NUMBER: 850-856-9470
EMAIL ADDRESS (if available):

Florida Department of Law Enforcement Alcohol Testing Program

REGISTRATION OF EVIDENTIARY BREATH TEST INSTRUMENT

MANUFACTURER:

CMI, Inc.

MODEL:

Intoxilyzer 8000

SERIAL NUMBER:

80-001724

OWNER:

Gretna Police Department

DATE OF REGISTRATION:

April 7, 2008

The above instrument is hereby approved for evidentiary breath alcohol testing in the State of Florida pursuant to Chapter 11D-8, Florida Administrative Code. This instrument and related records are subject to inspection at any time by the Florida Department of Law Enforcement.

Authorized Representative
Alcohol Testing Program
Florida Department of Law Enforcement

VOID

QEFFECTIVE
Q-1-2000

MING DEARFOLD



REQUEST FOR REGISTRATION

MAKE AND MODEL OF INSTRUMENT: Intoxilyzer 8000	
SERIAL NUMBER: 80-001724	
OWNING AGENCY: <u>Gretna Police Department</u>	
DATE OF DEPARTMENT INSPECTION: 4/7/2008	
AGENCY INSPECTOR: (Brian Bess) Contact person	· · · · · · · · · · · · · · · · · · ·
ADDRESS: 14615 Main St	
CITY, STATE, ZIP: <u>Gretna FI, 32332</u>	·····
TELEPHONE NUMBER: (850) 856-9460	
FAX NUMBER:(850) 856-9454	
EMAIL ADDRESS (if available):	
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