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DEPARTMENT INSPECTION REPORT - INTOXILYZER 8000

Agency: HILLSBOROUGH CO SO Time of Inspection: 20:16

Date of Inspection: 03/03/2017

Serial Number: 80-003388 Software: 8100.27

Check or Test	YES	NO	O Check or Test		NO
Diagnostic Check			Date and/or Time Adjusted		
(Pre-Inspection): OK	Yes				No
Minimum Sample Volume			Barometric Pressure Sensor		
Check: OK	Yes		Check: OK	Yes	
Alcohol Free Subject			Mouth Alcohol Test:		
Test: 0.000	Yes		Slope Not Met	Yes	
Interferent Detect Test:			Diagnostic Check		
Interferent Detect	Yes		(Post-Inspection): OK		No

Alcohol Free Test (g/210L)	0.05g/210L Test (g/210L) Lot#:201603D Exp: 03/08/2018	0.08g/210L Test (g/210L) Lot#:201601F Exp: 01/26/2018	0.20g/210L Test (g/210L) Lot#:201604C Exp: 04/05/2018	0.08 g/210L Dry Gas Std Test (g/210L) Lot#:AG626605 Exp: 09/22/2018		
0.000	0.048	0.080	0.208	/ 0.084		
0.000	0.049	0.081	0.203	/ 0.085		
0.000	0.049	0.080	0.202	/ 0.088		
0.000	0.050	0.081	0.201	/ 0.088		
0.000	0.050	0.081	0.202	/ 0.087		
0.000	0.049	0.081	0.201	/ 0.087		
0.000	0.049	0.081	0.201	/ 0.086		
0.000	0.050	0.082	0.201	/ 0.086		
0.000	0.049	0.081	0.202	/ 0.086		
0.000	0.049	0.082	0.200	/ 0.086		
Standard Deviations	0.0006	0.0006	0.0022	/ 0.0012		

Average Standard Deviation of 0.05, 0.08 and 0.20 g/210L Tests: 0.0011 Number of Simulators Used: 5

Remarks: 08: Ambient Fail CLEARED AREA, Control Outside ToleranceUNK. UNKNOWN CONTROL OUTSIDE TOLERANCE, WILL CONDUCT FURTHER TESNon-compliance: UNKNOWN COT, FURTHER TESTING.

The above	instrument complies () does	not comply (x) with	Chapter	11D-	8, FAC.		8P	BK
I certify	that I performed this	inspection	in accordance	with	the pro	ovisions	of C	hapter	11D-8,	FAC.	
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Signature and Printed Name											

Signature and Printed Name

03/03/2017 Date

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