

Instrument Processing Sheet

Agency: FL HIGHWAY PATROL

Instrument Serial Number: 80-001123

Date In: 10/30/2025

DI Completion Date: 11/18/2025

☒ Ship ☐ P/U ☐ H/D ☐ CMI ☐ EE

Intake By: <u>WKP</u> Date: <u>10/30/25</u>		Quality Checks By: <u>WKP</u> Date: <u>11/14/2025</u>		Flow Adjustment By: _____ Date: _____																																									
☒ Annual ☐ Registration ☒ Return from CMI / EE ☐ Return unworked ☐ Training 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>221</u> ☒ Flow Verification (L/s) Flow Column #: <u>ATP 103</u> 32 mm <u>0.160</u> (.139-.169) 36 mm <u>0.175</u> (.156-.190) 53 mm <u>0.250</u> (.228-.278) 103 mm <u>0.523</u> (.447-.547) ☒ Barometric Pressure Check Gauge ID #: <u>28427</u> Gauge: <u>1018.9</u> Instrument: <u>1018</u> ☒ Stability Checks		Flow Column #: _____ ☐ 5L/min – 17mm ☐ 15L/min – 53mm ☐ 30L/min – 103mm ☐ R-Value: _____ ☐ Post Adjustment Verification (L/S) Flow Column #: _____ 32 mm _____ (.139-.169) 36 mm _____ (.156-.190) 53 mm _____ (.228-.278) 103 mm _____ (.447-.547)																																									
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Optical Bench Adjustment By: _____		Department Inspection By: <u>SLH</u>																																											
Barometric Pressure Gauge: _____ ID#: _____		Barometric Pressure ID#: <u>28427</u>																																											
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Barometric Pressure Gauge: _____ ID#: _____		☐ Post-Stability Checks ☐ Flow Adjustment ☒ Form 40 ☐ Other:																																											
Notes/Suggested Service: Per agency inspector request, redacted their phone number on page 7 and 17 of this previously posted calibration packet. SLH 6/29/2026		☒ 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																																											
		Digitally signed by Taylor Gutschow Date: 2025.11.25 23:39:41 -05'00'		Digitally signed by Shayla Platt Date: 2025.12.12 10:14:34 -05'00'																																									
		Tech Review		Admin Review																																									

Stability Checks

0.05g/210L 0.047 to 0.053	0.08g/210L 0.077 to 0.083	0.20g/210L 0.194 to 0.206	DGS 0.08g/210L 0.077 to 0.083																																																																																																																																																
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Florida Department of Law Enforcement Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: FHP TROOP D ORLANDO

Time of Inspection: 09:56

Date of Inspection: 11/18/2025

Serial Number: 80-001123

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:_____

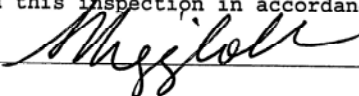
Number of Simulators Used: _____

Remarks:

VERIFY FORMS LOADED POST REPAIR

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

Signature and Printed Name

11/18/2025

Date

Florida Department of Law Enforcement Alcohol Testing Program

DEPARTMENT INSPECTION REPORT - INTOXILYZER 8000

Agency: FHP TROOP D ORLANDO

Serial Number: 80-001123

Time of Inspection: 15:48

Date of Inspection: 11/18/2025

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#:AG510701 Exp: 04/17/2027
0.000	0.048	0.078	0.198	0.079
0.000	0.048	0.078	0.198	0.079
0.000	0.048	0.078	0.199	0.079
0.000	0.048	0.078	0.199	0.079
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0.000	0.048	0.078	0.198	0.079
0.000	0.048	0.078	0.198	0.079

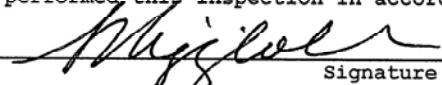
Standard Deviations	0.0000	0.0000	0.0004	0.0003
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Average Standard Deviation of 0.05, 0.08 and 0.20 g/210L Tests: 0.0001 Number of Simulators Used: 5

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.


 LEANDRA HIGGINBOTHAM
 Signature and Printed Name

11/18/2025
 Date



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

Calibration Certificate

This is to certify the calibration of Intoxilyzer 8000 serial number 80-001123, manufactured by CMI, Inc. was calibrated in accordance with FDLE/ATP Form 36 - Department Inspection Procedures - Intoxilyzer 8000.

Serial Number:	80-001123	UNCERTAINTY* $\pm$
Owning Agency:	FHP TROOP D ORLANDO	0.050 g/ 210 L 0.004
Calibration Date:	11/18/2025	0.080 g/ 210 L 0.004
Calibration Time:	15:48	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 Countermeasures 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.

11/18/2025
Date

LEANDRA HIGGINBOTHAM,
Department Inspector

FDLE/ATP Form 69 October 2024
Issuing Authority: Alcohol Testing Program

Service • Integrity • Respect • Quality



INSTRUMENT PROCESSING SHEET

Agency FHPS/N 80-001123Florida Department of
Law EnforcementDate In 5/22/2025DI Completion Date not completed☐ Ship☐ P/U☐ H/D☒ CMI☐ EE

Intake	By SLH	Date 5/27/2025	Quality Checks	By WKP	Date 5/29/2025	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: <u>Scanned note indicating 'Agency.Check'error.SLH</u>			☒ Breath Tube Screen ☒ Replace External O-Rings ☒ Instrument Set Up Verified ☒ R-Value <u>220</u> ☒ Flow Verification (L/s) Flow Column # <u>ATP-105</u> 32 mm <u>0.160</u> (.139 - .169) 36 mm <u>0.175</u> (.156 - .190) 53 mm <u>0.250</u> (.228 - .278) 103 mm <u>0.527</u> (.447 - .547) ☒ Barometric Pressure Check Gauge ID # <u>28421</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)																																
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Calibration Adjustment			Department Inspection																																			
Barometric Pressure Gauge _____ ID # _____			Barometric Pressure ID# <u>28662</u>																																			
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Simulator	Serial #	Lot #	Expiration																																			
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Simulator	Serial #	Lot #	Expiration																																			
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Notes/Suggested Service: Admin. Coordinated remote download of forms with CMI on 6/3 and 6/5/25 but unsuccessful. Advised to send into CMI. There was also an error reported by the agency to address. SLH 7/2/2025			☐ 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																																			
Phil Nicodemo Digitally signed by Phil Nicodemo Date: 2025.06.26 12:09:22 -0400			Taylor Gutschow Digitally signed by Taylor Gutschow Date: 2025.07.02 14:58:55 -0400																																			
Tech Review / Date			Admin Review / Date																																			

4/11/2025

80-001123- Intoxilyzer 8000

GIVING "AGENCY.CHECK" ERROR
DESPITE MOST RECENT AGENCY
INSPECTION BEING COMPLETE.

PLEASE RETURN TO:

SERGEANT MAYKOLL SOUZA

11059 INTERNATIONAL DRIVE

ORLANDO, FL 32821

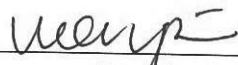
PHONE: [REDACTED] SLH

EMAIL: MAYKOLLSOUZA@FLHSMV.GOV

0.05g/210L

FHP TROOP D ORLANDO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-001123
05/29/2025
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	12:58
Control Test	0.049	12:59
Air Blank	0.000	12:59
Control Test	0.049	13:00
Air Blank	0.000	13:01
Control Test	0.049	13:01
Air Blank	0.000	13:02
Control Test Stats		
Average	0.0490	
Std Dev	0.0000	
Rel Std Dev(%)	0.0000	



Operator's Signature

0.08 g/210L
WET

FHP TROOP D ORLANDO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-001123
05/29/2025
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	13:04
Control Test	0.079	13:05
Air Blank	0.000	13:06
Control Test	0.079	13:06
Air Blank	0.000	13:07
Control Test	0.079	13:08
Air Blank	0.000	13:08
Control Test Stats		
Average	0.0790	
Std Dev	0.0000	
Rel Std Dev(%)	0.0000	

Wenph

Operator's Signature

0.200g/210L

FHP TROOP D ORLANDO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-001123
05/29/2025
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	13:13
Control Test	0.199	13:14
Air Blank	0.000	13:15
Control Test	0.199	13:15
Air Blank	0.000	13:16
Control Test	0.199	13:17
Air Blank	0.000	13:17
Control Test Stats		
Average	0.1990	
Std Dev	0.0000	
Rel Std Dev(%)	0.0000	



Operator's Signature

0.08 g/210L
Dry Gas
Standard

FHP TROOP D ORLANDO
Intoxilyzer - Alcohol Analyzer
Model 8000 SN 80-001123
05/29/2025
Software: 8100.27

Test	g/210L	Time
Air Blank	0.000	13:20
Control Test	0.080	13:20
Air Blank	0.000	13:21
Control Test	0.080	13:21
Air Blank	0.000	13:22
Control Test	0.080	13:22
Air Blank	0.000	13:22
Control Test Stats		
Average	0.0800	
Std Dev	0.0000	
Rel Std Dev(%)	0.0000	

Wenp

Operator's Signature

Florida Department of Law Enforcement Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: FHP TROOP D ORLANDO

Serial Number: 80-001123

Time of Inspection: 12:36

Date of Inspection: 05/29/2025

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: 'did not enter remark of 'bypass' 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.



WEN-CHI K PIERSON

Signature and Printed Name

05/29/2025

Date

Florida Department of Law Enforcement

Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: FHP TROOP D ORLANDO

Serial Number: 80-001123

Time of Inspection: 12:37

Date of Inspection: 05/29/2025

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

WKP 6/10/2025

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.

Wen-Chi K Pierson

WEN-CHI K PIERSON

Signature and Printed Name

05/29/2025

Date

Florida Department of Law Enforcement
Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: FHP TROOP D ORLANDO

Serial Number: 80-001123

Time of Inspection: 10:46

Date of Inspection: 06/03/2025

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, COMPLIANCE UNDETERMINED

*AI = agency inspection
Sub 6/9/2025*

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.

[Signature]

LEANDRA HIGGINBOTHAM

Signature and Printed Name

06/03/2025

Date

Florida Department of Law Enforcement Alcohol Testing Program

DEPARTMENT INSPECTION REPORT - INTOXILYZER 8000

Agency: FHP TROOP D ORLANDO

Serial Number: 80-001123

Time of Inspection: 12:28

Date of Inspection: 06/03/2025

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

Noted Sub 6/9/25

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				
0.000				
0.000				
0.000				
0.000				
0.000				
0.000				

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:

FORMS NEED TO BE LOADED PRIOR TO DEPARTMENT INSPECTION

- Aborted after Dept. Inspection initiated, sub 6/9/25

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.

Miggell

LEANDRA HIGGINBOTHAM

Signature and Printed Name

06/03/2025

Date

Florida Department of Law Enforcement Alcohol Testing Program

AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: FHP TROOP D ORLANDO

Serial Number: 80-001123

Time of Inspection: 10:33

Date of Inspection: 06/06/2025

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 CHECK FORMS

AI = agency inspection

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

Signature and Printed Name

06/06/2025

Date

Return Material Authorization

Ship to: ☒ CMI, Inc.

☐ Enforcement Electronics

Shipment to repair facility authorized by: Sgt Maykoll Souza on 06/09/2025

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

Instrument Model: Intoxilyzer 8000 Serial Number: 80-001123

Bill To Address:

FHP (Orlando)

Ship to Address:

FDLE- Tallahassee

Reason for Return:

Please download Forms - remote download failed 6/3 and 6/6/2025.

Please attempt upload before performing any repairs

Agency reports 'Agency Check Error'

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: Sgt Maykoll Souza

Phone #: [REDACTED] SLH Email: MaykollSouza@flhsmv.gov

ATP Contact Name: LeAndra Higginbotham ATP Email: leandrahigginbotham@fdle.state.fl.us