

STATE OF NEW JERSEY DEPARTMENT OF LAW AND PUBLIC SAFETY DIVISION OF STATE POLICE <b>BREATH TESTING INSTRUMENT INSPECTION CERTIFICATE</b>		Periodic Inspection <input type="checkbox"/>	Number <b>130-05</b>
		Other Inspection <input checked="" type="checkbox"/>	Date <b>10-21-05</b>

Instrument <b>BREATHALYZER 900</b>	Serial Number <b>8909014-002</b>	Department <b>FLORENCE TWSP</b>	County <b>BURLINGTON</b>
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<b>ok</b> Cylinder Output	<b>00104 00304</b> Ampoule Control Number	<b>ok</b> Optical System	<b>ok</b> Balance Lost Motion	<b>ok</b> Instrument Temperature	<b>10T #05A014 .10</b> Simulator Solution Percentage	<b>* SEE BELOW</b> Instrument Test Percentage Results
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INSTRUMENT LOCATION: **NA**

Background Check **NA**      Effect      No Effect      Remarks

ABOVE INSTRUMENT IS NOT RFI SENSITIVE

RADIO TRANSMISSION TESTING					
OPERATING FREQUENCY	CHANNEL DESIGNATION	BASE STATION	MOBILE (Distance)	PORTABLE (Distance)	REMARKS
<b>* 6 TESTS WITHIN ACCEPTABLE TOLERANCE</b>					

REMARKS- INSTRUMENT FOUND TO BE IN SATISFACTORY WORKING CONDITION. INSTRUMENT REMOVED FROM SERVICE AND REPLACED WITH THE ALCO TEST 7110 MK III-C SERIAL NUMBER ARTN-0053.

The above instrument has been  repaired and  inspected and found to be in satisfactory working condition.

"Pursuant to law, and the "Chemical Breath Testing Regulations" N.J.A.C. 13:51, I am a duly appointed Breath Test Coordinator/Instructor. In my official capacity, and consistent with "Standard Procedures for Inspecting Breath Test Instruments," as established by the Chief Forensic Scientist of the Division of State Police, I perform periodic inspections on approved instruments employing photometry as an approved method of chemical breath testing. Pursuant to, and consistent with, the current "Standard Procedures for Inspecting Breath Test Instruments," as established by the Chief Forensic Scientist, I inspected and tested the photometric instrument identified on this certificate. The results of my inspection and tests are recorded on this certificate. I certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willingly false, I am subject to punishment."

*William M. Cross*  
Signature

**TPR. I WILLIAM M. CROSS #5342**  
Name and Badge Number (Print)

**OCTOBER 21, 2005**  
Date

LEGEND:      N/E - NO EFFECT      N/A - NOT APPLICABLE

STATE OF NEW JERSEY  
DEPARTMENT OF LAW AND PUBLIC SAFETY  
DIVISION OF STATE POLICE  
**BREATH TESTING INSTRUMENT INSPECTION CERTIFICATE**

Periodic Inspection  Number **129.05**  
Other Inspection  Date **08.08.05**

Instrument **ANALYZER 900** Serial Number **8909014-002** Department **FLORENCE TWP** County **CURLINGTON**

<b>O/S</b> Cylinder Output	<b>00104</b> <b>00304</b> Ampoule Control Number	<b>O/S</b> Optical System	<b>O/S</b> Balance Lost Motion	<b>O/S</b> Instrument Temperature	<b>10</b> Simulator Solution Percentage	<b>*SEE</b> <b>BELOW</b> Instrument Test Percentage Results
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INSTRUMENT LOCATION: **N/A**

Background Check **N/A** Effect **No Effect** Remarks

ABOVE INSTRUMENT IS NOT RFI SENSITIVE

**RADIO TRANSMISSION TESTING**

OPERATING FREQUENCY	CHANNEL DESIGNATION	BASE STATION	MOBILE (Distance)	PORTABLE (Distance)	REMARKS
<b>* 6 TESTS WITHIN ACCEPTABLE TOLERANCES</b>					

REMARKS- OTHER INSPECTION DUE TO NEW AMPOULE CONTROL NUMBER (00304) PLACED IN SERVICE THIS DATE.

The above instrument has been  repaired and  inspected and found to be in satisfactory working condition.

"Pursuant to law, and the "Chemical Breath Testing Regulations" N.J.A.C. 13:51, I am a duly appointed Breath Test Coordinator/Instructor. In my official capacity, and consistent with "Standard Procedures for Inspecting Breath Test Instruments," as established by the Chief Forensic Scientist of the Division of State Police, I perform periodic inspections on approved instruments employing photometry as an approved method of chemical breath testing. Pursuant to, and consistent with, the current "Standard Procedures for Inspecting Breath Test Instruments," as established by the Chief Forensic Scientist, I inspected and tested the photometric instrument identified on this certificate. The results of my inspection and tests are recorded on this certificate. I certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willingly false, I am subject to punishment."

Signature

August 8, 2005  
Date

TOR-LAWRENCE P. WACHTER 4653  
Name and Badge Number (Print)

LEGEND: N/E - NO EFFECT N/A - NOT APPLICABLE

STATE OF NEW JERSEY DEPARTMENT OF LAW AND PUBLIC SAFETY DIVISION OF STATE POLICE <b>BREATH TESTING INSTRUMENT INSPECTION CERTIFICATE</b>	Periodic Inspection <input checked="" type="checkbox"/>	Number <i>128-05</i>
	Other Inspection <input type="checkbox"/>	Date <i>06-30-05</i>

Instrument <i>BREATHERIZER 900</i>	Serial Number <i>8709014002</i>	Department <i>FLORENCE TWP</i>	County <i>BURLINGTON</i>
Cylinder Output <i>OK</i>	Ampoule Control Number <i>00403 00104</i>	Optical System <i>OK</i>	Balance Lost Motion <i>OK</i>
Instrument Temperature <i>OK</i>	Simulator Solution Percentage <i>0.10</i>	Instrument Test Percentage Results <i>*500 BELOW</i>	

INSTRUMENT LOCATION: *N/A*

Background Check *N/A*

Effect \_\_\_\_\_ No Effect \_\_\_\_\_

Remarks \_\_\_\_\_

ABOVE INSTRUMENT IS NOT RFI SENSITIVE

RADIO TRANSMISSION TESTING					
OPERATING FREQUENCY	CHANNEL DESIGNATION	BASE STATION	MOBILE (Distance)	PORTABLE (Distance)	REMARKS
<i>* 6 TESTS WITHIN ACCEPTABLE TOLERANCES</i>					

REMARKS- *NONE*

The above instrument has been  repaired and  inspected and found to be in satisfactory working condition.

"Pursuant to law, and the 'Chemical Breath Testing Regulations' N.J.A.C. 13:51, I am a duly appointed Breath Test Coordinator/Instructor. In my official capacity, and consistent with 'Standard Procedures for Inspecting Breath Test Instruments,' as established by the Chief Forensic Scientist of the Division of State Police, I perform periodic inspections on approved instruments employing photometry as an approved method of chemical breath testing. Pursuant to, and consistent with, the current 'Standard Procedures for Inspecting Breath Test Instruments,' as established by the Chief Forensic Scientist, I inspected and tested the photometric instrument identified on this certificate. The results of my inspection and tests are recorded on this certificate. I certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willingly false, I am subject to punishment."

*Lawrence P. Wachter*  
Signature

*JUNE 30, 2005*  
Date

*LAWRENCE P. WACHTER 1669*  
Name and Badge Number (Print)

LEGEND: N/E - NO EFFECT      N/A - NOT APPLICABLE

STATE OF NEW JERSEY  
DEPARTMENT OF LAW AND PUBLIC SAFETY  
DIVISION OF STATE POLICE  
**BREATH TESTING INSTRUMENT INSPECTION CERTIFICATE**

Periodic Inspection <input checked="checked" type="checkbox"/>	Number <span style="font-size: 1.2em;">127-05</span>
Other Inspection <input type="checkbox"/>	Date <span style="font-size: 1.2em;">04-20-05</span>

Instrument <span style="font-size: 1.2em;">BREATHANALYZER 900</span>	Serial Number <span style="font-size: 1.2em;">8909014-002</span>	Department <span style="font-size: 1.2em;">FLORENCE TWPSP</span>	County <span style="font-size: 1.2em;">BURLINGTON</span>
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<span style="font-size: 1.5em;">OK</span>	<span style="font-size: 1.2em;">00104 00403</span>	<span style="font-size: 1.5em;">OK</span>	<span style="font-size: 1.5em;">OK</span>	<span style="font-size: 1.5em;">OK</span>	<span style="font-size: 1.2em;">161 04606 10</span>	<span style="font-size: 1.2em;">*5CC BELOW</span>
Cylinder Output	Ampoule Control Number	Optical System	Balance Lost Motion	Instrument Temperature	Simulator Solution Percentage	Instrument Test Percentage Results

INSTRUMENT LOCATION: N/A

Background Check <span style="font-size: 1.2em;">N/A</span>	Effect	No Effect	Remarks
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ABOVE INSTRUMENT IS NOT RFI SENSITIVE

**RADIO TRANSMISSION TESTING**

OPERATING FREQUENCY	CHANNEL DESIGNATION	BASE STATION	MOBILE (Distance)	PORTABLE (Distance)	REMARKS
* 6 TESTS WITHIN ACCEPTABLE TOLERANCES					

REMARKS-  
NONE

The above instrument has been  repaired and  inspected and found to be in satisfactory working condition.

"Pursuant to law, and the "Chemical Breath Testing Regulations" N.J.A.C. 13:51, I am a duly appointed Breath Test Coordinator/Instructor. In my official capacity, and consistent with "Standard Procedures for Inspecting Breath Test Instruments," as established by the Chief Forensic Scientist of the Division of State Police, I perform periodic inspections on approved instruments employing photometry as an approved method of chemical breath testing. Pursuant to, and consistent with, the current "Standard Procedures for Inspecting Breath Test Instruments," as established by the Chief Forensic Scientist, I inspected and tested the photometric instrument identified on this certificate. The results of my inspection and tests are recorded on this certificate. I certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willingly false, I am subject to punishment."

Lawrence P. Wichter
Signature  
THE LAURENCE P. WICHTER 4603
Name and Badge Number (Print)

April 20, 2005.

Date

LEGEND: N/E - NO EFFECT                      N/A - NOT APPLICABLE

STATE OF NEW JERSEY DEPARTMENT OF LAW AND PUBLIC SAFETY DIVISION OF STATE POLICE <b>BREATH TESTING INSTRUMENT INSPECTION CERTIFICATE</b>	Periodic Inspection <input checked="checked" type="checkbox"/>	Number <b>126-05</b>
	Other Inspection <input type="checkbox"/>	Date <b>03-04-05</b>

Instrument <b>BREATHANALYZER 900</b>	Serial Number <b>8909014-002</b>	Department <b>FLORANCE TWP</b>	County <b>BUCKINGTON</b>
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Cylinder Output <b>05</b>	Ampoule Control Number <b>00403 00104</b>	Optical System <b>05</b>	Balance Lost Motion <b>05</b>	Instrument Temperature <b>05</b>	Simulator Solution Percentage <b>15#04006 10</b>	Instrument Test Percentage Results <b>* SEE BELOW</b>
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INSTRUMENT LOCATION: <b>N/A</b>			
Background Check <b>N/A</b>	Effect	No Effect	Remarks

ABOVE INSTRUMENT IS NOT RFI SENSITIVE

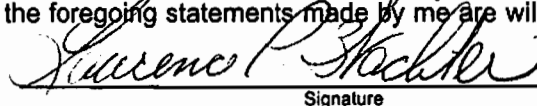
### RADIO TRANSMISSION TESTING

OPERATING FREQUENCY	CHANNEL DESIGNATION	BASE STATION	MOBILE (Distance)	PORTABLE (Distance)	REMARKS
<b>* 6 TESTS WITHIN ACCEPTABLE TOLERANCES</b>					

REMARKS- **NONE**

The above instrument has been  repaired and  inspected and found to be in satisfactory working condition.

"Pursuant to law, and the "Chemical Breath Testing Regulations" N.J.A.C. 13:51, I am a duly appointed Breath Test Coordinator/Instructor. In my official capacity, and consistent with "Standard Procedures for Inspecting Breath Test Instruments," as established by the Chief Forensic Scientist of the Division of State Police, I perform periodic inspections on approved instruments employing photometry as an approved method of chemical breath testing. Pursuant to, and consistent with, the current "Standard Procedures for Inspecting Breath Test Instruments," as established by the Chief Forensic Scientist, I inspected and tested the photometric instrument identified on this certificate. The results of my inspection and tests are recorded on this certificate. I certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willingly false, I am subject to punishment."

  
 Signature  
**THE LAWRENCE P. WICHTER 4663**  
 Name and Badge Number (Print)

**MARCH 4, 2005**  
 Date

LEGEND:      N/E - NO EFFECT                                  N/A - NOT APPLICABLE



Instrument METHALYZER 900 Serial Number 8909019-002 Department FLORENCE TWP County BURLINGTON

<u>OK</u> Cylinder Output	<u>00403 00104</u> Ampoule Control Number	<u>OK</u> Optical System	<u>OK</u> Balance Lost Motion	<u>OK</u> Instrument Temperature	<u>15-1072006 .10</u> Simulator Solution Percentage	<u>*5CC ALLOW</u> Instrument Test Percentage Results
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INSTRUMENT LOCATION: N/A

Background Check N/A Effect No Effect Remarks

ABOVE INSTRUMENT IS NOT RFI SENSITIVE

**RADIO TRANSMISSION TESTING**

OPERATING FREQUENCY	CHANNEL DESIGNATION	BASE STATION	MOBILE (Distance)	PORTABLE (Distance)	REMARKS
<u>*6 TESTS WITHIN ACCEPTABLE TOLERANCES</u>					

REMARKS- DURING PERIODIC INSPECTION I NOTICED A FAULTY SIGNAL (POWER ON) NOT ENERGIZING. I IMMEDIATELY DETACHED AND SOLDERED WIRING TO RED SIGNAL. ALSO CLEANED BOTTOM CONTACT SPRINGS, AND REPAIRED PWR WAS TAKENABLE TO PREVENT INSPECTION OF INSTRUMENT WITHOUT REPLACENT. THE EXISTENCE OF THIS MALFUNCTION WOULD MAKE AITHEALANCE TO (CHECKLIST) IMPOSSIBLE.

The above instrument has been  repaired and  inspected and found to be in satisfactory working condition.

"Pursuant to law, and the "Chemical Breath Testing Regulations" N.J.A.C. 13:51, I am a duly appointed Breath Test Coordinator/Instructor. In my official capacity, and consistent with "Standard Procedures for Inspecting Breath Test Instruments," as established by the Chief Forensic Scientist of the Division of State Police, I perform periodic inspections on approved instruments employing photometry as an approved method of chemical breath testing. Pursuant to, and consistent with, the current "Standard Procedures for Inspecting Breath Test Instruments," as established by the Chief Forensic Scientist, I inspected and tested the photometric instrument identified on this certificate. The results of my inspection and tests are recorded on this certificate. I certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willingly false, I am subject to punishment."

*Lawrence P. Wachter*  
 Signature  
TRA I LAURENCE P. WACHTER 4663  
 Name and Badge Number (Print)

DECEMBER 7, 2004  
 Date

LEGEND: N/E - NO EFFECT N/A - NOT APPLICABLE



STATE OF NEW JERSEY  
 DEPARTMENT OF LAW AND PUBLIC SAFETY  
 DIVISION OF STATE POLICE

**BREATH TESTING INSTRUMENT INSPECTION CERTIFICATE**

Periodic Inspection  Number 123-04  
 Other Inspection  Date 10-04-04

Instrument BREATHLYZER 900 Serial Number 8909014002 Department FLORENCE TWP County BURLINGTON  
 Cylinder Output 05 Ampoule Control Number 00403 Optical System 05 Balance Lost Motion 05 Instrument Temperature 05 <sup>LET CALIB</sup> Simulator Solution Percentage .10 <sup>\*SEE</sup> Instrument Test Percentage Results BELOW

INSTRUMENT LOCATION: N/A  
 Background Check N/A Effect \_\_\_\_\_ No Effect \_\_\_\_\_ Remarks \_\_\_\_\_

ABOVE INSTRUMENT IS NOT RFI SENSITIVE

**RADIO TRANSMISSION TESTING**

OPERATING FREQUENCY	CHANNEL DESIGNATION	BASE STATION	MOBILE (Distance)	PORTABLE (Distance)	REMARKS
<u>* 6 TESTS WITHIN ACCEPTABLE TOLERANCES</u>					

REMARKS NONE

The above instrument has been  repaired and  inspected and found to be in satisfactory working condition.

"Pursuant to law, and the 'Chemical Breath Testing Regulations' N.J.A.C. 13:51, I am a duly appointed Breath Test Coordinator/Instructor. In my official capacity, and consistent with 'Standard Procedures for Inspecting Breath Test Instruments,' as established by the Chief Forensic Scientist of the Division of State Police, I perform periodic inspections on approved instruments employing photometry as an approved method of chemical breath testing. Pursuant to, and consistent with, the current 'Standard Procedures for Inspecting Breath Test Instruments,' as established by the Chief Forensic Scientist, I inspected and tested the photometric instrument identified on this certificate. The results of my inspection and tests are recorded on this certificate. I certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willingly false, I am subject to punishment."

OCTOBER 4, 2004  
Date

[Signature]  
Signature  
TRIP LORANCE P. WACHTER 4663  
Name and Badge Number (Print)

LEGEND: N/E - NO EFFECT N/A - NOT APPLICABLE











STATE OF NEW JERSEY DEPARTMENT OF LAW AND PUBLIC SAFETY DIVISION OF STATE POLICE <b>BREATH TESTING INSTRUMENT INSPECTION CERTIFICATE</b>				Periodic Inspection <input checked="" type="checkbox"/>	Number <i>118-04</i>
				Other Inspection <input type="checkbox"/>	Date <i>01-07-04</i>
Instrument <i>BREATHALYZER 900</i>		Serial Number <i>0909014002</i>		Department <i>FLORENCE TWP</i>	
				County <i>MURKINGTON</i>	
<i>OK</i> Cylinder Output	<i>00103</i> <i>00303</i> Ampoule Control Number	<i>OK</i> Optical System	<i>OK</i> Balance Lost Motion	<i>OK</i> Instrument Temperature	<i>107#03K001</i> <i>.10</i> Simulator Solution Percentage
				<i>* SEC</i> <i>1510W</i> Instrument Test Percentage Results	
INSTRUMENT LOCATION: <i>N/A</i>					
Background Check <i>N/A</i>		Effect	No Effect	Remarks	
<input checked="" type="checkbox"/> ABOVE INSTRUMENT IS NOT RFI SENSITIVE					
RADIO TRANSMISSION TESTING					
OPERATING FREQUENCY	CHANNEL DESIGNATION	BASE STATION	MOBILE (Distance)	PORTABLE (Distance)	REMARKS
<i>* 6 TESTS WITHIN ACCEPTABLE TOLERANCES</i>					
REMARKS- <i>NONE</i>					
The above instrument has been <input type="checkbox"/> repaired and <input checked="" type="checkbox"/> inspected and found to be in satisfactory working condition.					
<p>"Pursuant to law, and the "Chemical Breath Testing Regulations" N.J.A.C. 13:51, I am a duly appointed Breath Test Coordinator/Instructor. In my official capacity, and consistent with "Standard Procedures for Inspecting Breath Test Instruments," as established by the Chief Forensic Scientist of the Division of State Police, I perform periodic inspections on approved instruments employing photometry as an approved method of chemical breath testing. Pursuant to, and consistent with, the current "Standard Procedures for Inspecting Breath Test Instruments," as established by the Chief Forensic Scientist, I inspected and tested the photometric instrument identified on this certificate. The results of my inspection and tests are recorded on this certificate. I certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willingly false, I am subject to punishment."</p>					
				<i>Laurence P. Wakter</i> Signature	
<i>JANUARY 7, 2004</i> Date				<i>TYPE LAURENCE P. WAKTER 9163</i> Name and Badge Number (Print)	
<b>LEGEND:      N/E - NO EFFECT      N/A - NOT APPLICABLE</b>					













STATE OF NEW JERSEY DEPARTMENT OF LAW AND PUBLIC SAFETY DIVISION OF STATE POLICE <b>BREATH TESTING INSTRUMENT INSPECTION CERTIFICATE</b>	Periodic Inspection <input checked="" type="checkbox"/>	Number <b>112-03</b>
	Other Inspection <input type="checkbox"/>	Date <b>02-27-03</b>

Instrument <b>BREATHANALYZER 900</b>	Serial Number <b>8909014-002</b>	Department <b>FLORENCE TWP</b>	County <b>BURLINGTON</b>
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Cylinder Output <b>OK</b>	Ampoule Control Number <b>00102</b>	Optical System <b>OK</b>	Balance Lost Motion <b>OK</b>	Instrument Temperature <b>OK</b>	Simulator Solution Percentage <b>N.T.#02080 10</b>	Instrument Test Percentage Results <b>*SEE BELOW</b>
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INSTRUMENT LOCATION: **N/A**

Background Check <b>N/A</b>	Effect	No Effect	Remarks
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ABOVE INSTRUMENT IS NOT RFI SENSITIVE

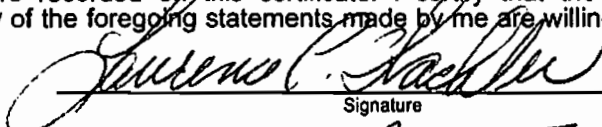
**RADIO TRANSMISSION TESTING**

OPERATING FREQUENCY	CHANNEL DESIGNATION	BASE STATION	MOBILE (Distance)	PORTABLE (Distance)	REMARKS
<b>*6 TESTS WITHIN ACCEPTABLE TOLERANCES</b>					

REMARKS- **NONE**

The above instrument has been  repaired and  inspected and found to be in satisfactory working condition.

"Pursuant to law, and the "Chemical Breath Testing Regulations" N.J.A.C. 13:51, I am a duly appointed Breath Test Coordinator/Instructor. In my official capacity, and consistent with "Standard Procedures for Inspecting Breath Test Instruments," as established by the Chief Forensic Scientist of the Division of State Police, I perform periodic inspections on approved instruments employing photometry as an approved method of chemical breath testing. Pursuant to, and consistent with, the current "Standard Procedures for Inspecting Breath Test Instruments," as established by the Chief Forensic Scientist, I inspected and tested the photometric instrument identified on this certificate. The results of my inspection and tests are recorded on this certificate. I certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willingly false, I am subject to punishment."

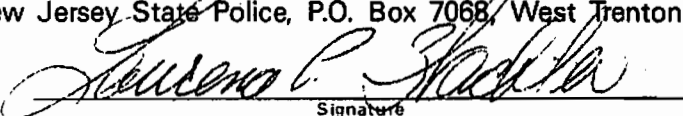
  
 Signature

**FEBRUARY 27, 2003**  
 Date

**TRO. LAWRENCE P. WACHTER 4663**  
 Name and Badge Number (Print)

LEGEND: N/E - NO EFFECT      N/A - NOT APPLICABLE



STATE OF NEW JERSEY DEPARTMENT OF LAW AND PUBLIC SAFETY DIVISION OF STATE POLICE <b>BREATH TESTING INSTRUMENT INSPECTION CERTIFICATE</b>					Periodic Inspection <input checked="" type="checkbox"/>	Number 110-02
					Other Inspection <input type="checkbox"/>	Date 10-31-02
Instrument BREATHANALYZER 900		Serial Number 8909014-002		Department FLORENCE TWSP		County BURLINGTON
05 Cylinder Output	00102 00300 Ampoule Control Number	05 Optical System	05 Balance Lost Motion	05 Instrument Temperature	100% #02060 .10 Simulator Solution Percentage	*SEE BELOW Instrument Test Percentage Results
INSTRUMENT LOCATION: N/A						
Background Check N/A		Effect	No Effect	Remarks		
<input checked="" type="checkbox"/> ABOVE INSTRUMENT IS NOT RFI SENSITIVE						
<b>RADIO TRANSMISSION TESTING</b>						
OPERATING FREQUENCY	CHANNEL DESIGNATION	BASE STATION	MOBILE (Distance)	PORTABLE (Distance)	REMARKS	
*TESTS WITHIN ACCEPTABLE TOLERANCES						
REMARKS: NONE						
The above instrument has been <input type="checkbox"/> repaired and <input checked="" type="checkbox"/> inspected and found to be in satisfactory working condition.						
"I am a Breath Test Coordinator Instructor, empowered by the Attorney General of the State of New Jersey, pursuant to the provisions of P. L. 1966 c. 142 S3 as amended (C. 39:4-50.3) and rules and regulations adopted thereunder, to perform inspection and maintenance of approved instruments for performing chemical analysis of a person's breath. I hereby affirm that I have inspected the approved instrument designated on this certificate. I further attest that this document contains a true, accurate and complete record of the inspection and maintenance performed herein, including random sample testing of ampoules used in the operation of this approved instrument as is evidenced by the ampoules control number (s) designated on this certificate. The original document of this inspection is on file at Division Headquarters of the New Jersey State Police, P.O. Box 7068, West Trenton, New Jersey 08628-0068."						
OCTOBER 31, 2002 <small>Date</small>				 <small>Signature</small>		
				LAWRENCE P. MCATTEE 463 <small>Name and Badge Number (Print)</small>		
<b>LEGEND:</b>						
N/E - NO EFFECT			N/A - NOT APPLICABLE			





**STATE OF NEW JERSEY  
DEPARTMENT OF LAW AND PUBLIC SAFETY  
DIVISION OF STATE POLICE  
BREATH TESTING INSTRUMENT INSPECTION CERTIFICATE**

Periodic Inspection  Number 108 02  
Other Inspection  Date 06-27-02

Instrument BREATHANALYZER 900 Serial Number 8909014-002 Department FLORENCE TWP County BURLINGTON

<u>OK</u> Cylinder Output	<u>00300</u> Ampoule Control Number	<u>OK</u> Optical System	<u>OK</u> Balance Lost Motion	<u>OK</u> Instrument Temperature	<u>107-#01100 .10</u> Simulator Solution Percentage	<u>*SEE BELOW</u> Instrument Test Percentage Results
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INSTRUMENT LOCATION: N/A

Background Check <u>N/A</u>	Effect	No Effect	Remarks
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ABOVE INSTRUMENT IS NOT RFI SENSITIVE

**RADIO TRANSMISSION TESTING**

OPERATING FREQUENCY	CHANNEL DESIGNATION	BASE STATION	MOBILE (Distance)	PORTABLE (Distance)	REMARKS
<u>* 6 TESTS WITHIN ACCEPTABLE TOLERANCES</u>					

REMARKS: NONE

The above instrument has been  repaired and  inspected and found to be in satisfactory working condition.

"I am a Breath Test Coordinator Instructor, empowered by the Attorney General of the State of New Jersey, pursuant to the provisions of P. L. 1966 c. 142 S3 as amended (C. 39:4-50.3) and rules and regulations adopted thereunder, to perform inspection and maintenance of approved instruments for performing chemical analysis of a person's breath. I hereby affirm that I have inspected the approved instrument designated on this certificate. I further attest that this document contains a true, accurate and complete record of the inspection and maintenance performed herein, including random sample testing of ampoules used in the operation of this approved instrument as is evidenced by the ampoules control number (s) designated on this certificate. The original document of this inspection is on file at Division Headquarters of the New Jersey State Police, P.O. Box 7068, West Trenton, New Jersey 08628-0068."

June 27, 2002  
Date

[Signature]  
Signature  
THOMAS P. WALTER 4663  
Name and Badge Number (Print)

**LEGEND:**  
N/E - NO EFFECT                      N/A - NOT APPLICABLE

STATE OF NEW JERSEY  
DEPARTMENT OF LAW AND PUBLIC SAFETY  
DIVISION OF STATE POLICE

**BREATH TESTING INSTRUMENT INSPECTION CERTIFICATE**

Periodic Inspection

Number

107-02

Other Inspection

Date

05 20 02

Instrument <i>BREATHALYZER 900</i>	Serial Number <i>8909014-002</i>	Department <i>FLORENCE TWP</i>		County <i>BURLINGTON</i>
<i>OK</i> Cylinder Output	<i>00300</i> Ampoule Control Number	<i>OK</i> Optical System	<i>OK</i> Balance Lost Motion	<i>OK</i> Instrument Temperature
				<i>101100</i> Simulator Solution Percentage
				<i>*SEE BELOW</i> Instrument Test Percentage Results

INSTRUMENT LOCATION: *N/A*

Background Check <i>N/A</i>	Effect	No Effect	Remarks
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ABOVE INSTRUMENT IS NOT RFI SENSITIVE

**RADIO TRANSMISSION TESTING**

OPERATING FREQUENCY	CHANNEL DESIGNATION	BASE STATION	MOBILE (Distance)	PORTABLE (Distance)	REMARKS
<i>* 6 TESTS WITHIN ACCEPTABLE TOLERANCES</i>					

REMARKS: *NONE*

The above instrument has been  repaired and  inspected and found to be in satisfactory working condition.

"I am a Breath Test Coordinator Instructor, empowered by the Attorney General of the State of New Jersey, pursuant to the provisions of P. L. 1966 c. 142 S3 as amended (C. 39:4-50.3) and rules and regulations adopted thereunder, to perform inspection and maintenance of approved instruments for performing chemical analysis of a person's breath. I hereby affirm that I have inspected the approved instrument designated on this certificate. I further attest that this document contains a true, accurate and complete record of the inspection and maintenance performed herein, including random sample testing of ampoules used in the operation of this approved instrument as is evidenced by the ampoules control number (s) designated on this certificate. The original document of this inspection is on file at Division Headquarters of the New Jersey State Police, P.O. Box 7068, West Trenton, New Jersey 08628-0068."

*MAY 20, 2002*  
Date

*THOMAS P. WACHTER*  
Signature  
*THOMAS P. WACHTER 4603*  
Name and Badge Number (Print)

LEGEND: N/E - NO EFFECT      N/A - NOT APPLICABLE



