

Missouri Department of Health and Senior Services P.O. Box 570, Jefferson City, MO 65102-0570 Phone: 573-751-6400 FAX: 573-751-6010 RELAY MISSOURI for Hearing and Speech Impaired 1-800-735-2966 VOICE 1-800-735-2466



Michael L. Parson Governor

SIMULATOR CERTIFICATION REPORT

SIMULATOR INFORMATION

Simulator Serial Number: SD1615

Manufacturer: Guth

Model Number: 10-4D

Agency: NORMANDY PD

0.02

11/6/2020

Agency Address: 7700 NATURAL BRIDGE RAOD, NORMANDY, MO 63121

NIST THERMOMETER INFORMATION

Serial Number:

Robert J. Knodell

Acting Director

17KMM00690 Bias:

0.00

Uncertainty:

Date of Certification:

Date of Expiration: 11/6/2021

ENVIRONMENTAL CONDITIONS

The environmental conditions during testing are within the tolerances of DHSS BAP method 3.

VERIFICATION RESULTS

Simulator Average 34.00 NIST Average 34.01 Combined Uncertainty .03

The combined uncertainty is calculated with a k=2 value.

ADJUSTMENT RESULTS

No adjustment was needed.

Date of testing:7/28/2021Certification Expiration:7/28/2022Simulator testing technician:D. DEBOARD

Notes on Condition: none

Deviation(s) from method: none

DHSS BAP Scientist Approving:

Certification No:

B. LUTMER

SD1615_7282021

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DHSS BAP Scientist Approving

Simulator Calibration Certification Issued by Lab Manager, DHSS BAP Revision Date: 05/16/2018 Breath Alcohol Program 1903 Northwood Drive, Suite 4 Poplar Bluff, MO 63901 DHSS BAP Document 3.6A Revision 1 Page 1 of 1