INTOXILYZER® 8000 INSTALLATION AND REPAIR CHECKOUT

NORTH DAKOTA OFFICE OF ATTORNEY GENERAL
CRIME LABORATORY DIVISION - TOXICOLOGY UNIT - BREATH ALCOHOL SECTION
SFN 59281 (05/2026)

Serial Number	Instrument Location

REASON FOR INSTALL/REPAIR

◯ Install After Receiving From Crime Laboratory ◯ Install After Location Change

◯ Other - Specify: _____

CHECK WHEN DONE:

☐ 1. Surge Protector Installed/Property Grounded.

☐ 2. Telephone Line Connected to Intoxilyzer® 8000.

☐ 3. Breath Tube Heated.

☐ 4. Enter Preliminary Data (i.e. Date, Time, DST (Y), and Location; Level 2, Function E).

☐ 5. Scan/Enter Gas Cylinder Information (Level 1, Function S).

☐ 6. Run Tests:

- ☐ A. Print Test (Level 1, Function P).
- ☐ B. ACA Test (Level 1, Function C).
- ☐ C. Radio Frequency Interference (RFI) Test (CMS Mode or Level 1, Function B or C; Key Radio During Test).

☐ 7. Repair and/or Maintenance Performed (if any) - Specify: _____

☐ 8. Complete the Top Portion of the Intoxilyzer® Record (SFN50496, Form 120-G) and Place it by the Intoxilyzer® for Use.

☐ 9. File Previous Intoxilyzer® Record (SFN50496, Form 120-G) at the Intoxilyzer® Location at the Agency.

☐ 10. Send the Following to the Crime Laboratory: Completed Intoxilyzer® 8000 Installation and Repair Checkout (SFN59281, Form 104-G), Print Test, ACA Test, and RFI Test.

Field Inspector Signature	Date

Crime Laboratory Use Only

This installation has been reviewed and the instrument is approved to be used for the analysis of breath to determine alcohol concentration from the date the Field Inspector performed the installation. This record on file at the Office of Attorney General, Crime Laboratory Division, in the County of Burleigh, North Dakota, is certified to be a true and correct copy of the documents received.

Reviewed/Certified By (print name)	Reviewed/Certified By Signature	Certified Date