



INTOXILYZER® 8000 INSTALLATION AND REPAIR CHECKOUT

OFFICE OF ATTORNEY GENERAL
CRIME LABORATORY DIVISION
Toxicology Section/Breath Alcohol Program
SFN 59281 (03-2014)

| | |
|---|------------------------------------|
| Serial Number <i>80-006513</i> | Instrument Location <i>Mott</i> |
| Reason for Install/Repair <input checked="" type="checkbox"/> Install After Receiving From Crime Laboratory <input type="checkbox"/> Install After Location Change <input type="checkbox"/> Other (Specify) _____ | |

Check When Done:

- 1. Surge Protector Installed/Properly 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. RFI Test (CMS Mode or Level 1, Function B or C; Key Radio During Test).
- 7. Repair and/or Maintenance Performed (if Any): _____
- 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 <i>Sarah J. Warner</i> | Date <i>5/16/2016</i> ✓ |
| Reviewed By (Crime Laboratory Use Only) <i>Deb Shanaver</i> | Date <i>20 May 16</i> |

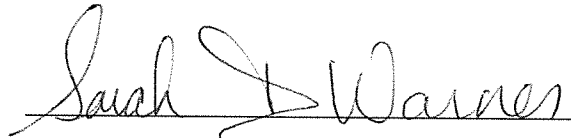
Intoxilyzer Test Record and Checklist
NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-006513
Location = MOTT 8164.13.00 06/09
05/16/2016 12:14

DRY CAL CHECK

| Test | AC | Time |
|-------------|-------|-------|
| 01 Room Air | 0.000 | 12:15 |
| 02 Std. Gas | 0.078 | 12:15 |
| 03 Room Air | 0.000 | 12:16 |
| 04 Std. Gas | 0.079 | 12:16 |
| 05 Room Air | 0.000 | 12:17 |
| 06 Std. Gas | 0.080 | 12:17 |
| 07 Room Air | 0.000 | 12:18 |

Lot No = 19615080A5
Cyl No = 25
Exp Date = 09/05/2017
County = 21 Oper No. = 100620



Operator Signature
SARAH WARNER

Remarks:

Form 106-I8000

Intoxilyzer Test Record and Checklist
NDOAG Crime Lab. Div., Bismarck, ND 58501

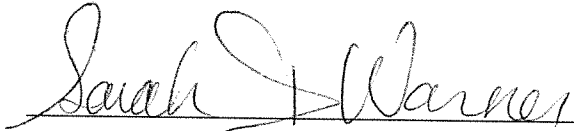
CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-006513
Location = MOTT 8164.13.00 06/09
05/16/2016 12:19

DRY CAL CHECK

| Test | AC | Time |
|-------------|-------|-------|
| 01 Room Air | 0.000 | 12:20 |
| 02 Std. Gas | 0.079 | 12:20 |
| 03 Room Air | RFI* | 12:21 |
| 04 Room Air | RFI* | 12:21 |

*Invalid Test
Inhibited - RFI

Lot No = 19615080A5
Cyl No = 25
Exp Date = 09/05/2017
County = 21 Oper No. = 100620



Operator Signature
SARAH WARNER

Remarks:

Form 106-I8000