



INTOXILYZER® 8000 INSTALLATION AND REPAIR CHECKOUT

NORTH DAKOTA OFFICE OF ATTORNEY GENERAL CRIME LABORATORY DIVISION-TOXICOLOGY SECTION/BREATH ALCOHOL PROGRAM SFN 59281 (06/2018)

| Reason for Install/Repair | | County SD |
|--|---|------------------------------|
| Electric Africa Bassisian Francis Orient Laboratory | | |
| Install After Receiving From Crime Laboratory Install Other (Specify) | I After Location Change | |
| 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 Lo | ocation; Level 2, Function E). | |
| 5. Scan/Enter Gas Cylinder Information (Level 1, Function | S). | |
| 6. Run Tests: CEE RECEIVED ALL TEST A. Print Test (Level1, Function P). | -Records. | |
| B. ACA Test (Level 1, Function C). | | |
| C. Radio Frequency Interference (RFI) Test (CMS Mod | le 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 (SF | FN50496, Form 120-G) and Place it by the | he Intoxilyzer® for Use. |
| 9. File Previous Intoxilyzer® Record (SFN504096, Form 12 | 20-G) at the Intoxilyzer® Location at the | Agency. |
| 10. Send the Following to the Crime Laboratory: Completed 104-G), Print Test, ACA Test, and Ball Test. | d Intoxilyzer® 8000 Installation and Repa | air Checkout (SFN59281, Form |
| Field Inspector Signature | | Date 5/24/20 |

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 Charles Tech | Certified Date 6 • (2 • 2020 |
|------------------------------------|------------------------------|
|------------------------------------|------------------------------|

NOTE: INSTALLATION DATE FOR THIS INTOXILYZEZ INSTRUMENT WILL BE 6.8.2020. THIS IS DUE TO A PROPER PRINT TEST PERFORMED ON 6.8.2020 AND SIGNED BY THE FIELD INSPECTAL.
Please EL 6.12.2020

FORM 104-G

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

CMI, Inc. Intoxilyzer North Dakota Model 8000 Location = LINT

05/29/2020

Alcohol Analyzer SN 80-006689 8164.14.00 09/16 15:50

DRY CAL CHECK

| Test | AC | Time |
|---|---|--|
| OI Room Air D2 Std. Gas O3 Room Air O4 Std. Gas O5 Room Air O6 Std. Gas O7 Room Air | 0.000 0.077 0.000 0.077 0.000 0.077 0.000 | 15:51 15:51 15:52 15:52 15:53 15:53 |

Lot No = 34418080A2

Cul No = 2

Exp Date = 02/05/2021

County = 15

70per No. = 130117

rator Signature MARK PEARSON

Remarks:

Form 106-18000

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

CMI, Inc. Intoxilyzer North Dakota Model 8000 Location = LINT 05/29/2020

Alcohol Analyzer SN 80-006689 8164.14.00 09/16 15:54

DRY CAL CHECK

| Test | AC | Time |
|-------------|-------|-------|
| UI ROOM AIR | RF1* | 15:55 |
| 02 Room Air | 0.000 | 15:55 |

∗inualid Test Inhibited - RF1

Lot No = 34418080A2

Cyl No = 2

Exp Date = 02/05/2021

County = 15

7 No. = 130117

ator Signature MARK PEARSON

Remarks:

Form 106-I8000

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

CMI, Inc. Intoxilyzer
North Dakota Model 8000
Location = LINT
06/08/2020

Alcohol Analyzer
SN 80-006689
8164.14.00 09/16

****** Printer Test ******

12 char/line abcdefghijkl ABCDEFGHIJKL

16 char per line abcdefghijklmnop ABCDEFGHIJKLMNOP

21 chars per line abcdefghijklmnopqrstu ABCDEFGHIJKLMNOPQRSTU

24 characters per line abcdefghijklmnopqrstuvwx ABCDEFGHIJKLMNOPQRSTUVWX

32 characters per line abcdefghijklmnopqrstuvwxyz123456 ABCDEFGHIJKLMNOPQRSTUVWXYZ123456

42 characters per line abcdefghijKlmnopqrstuvwxyz1234567890abcdef ABCDEFGHIJKLMNOPORSTUVWXYZ1234567890ABCDEF

Current Instrument Setup

| Start Test Sequence: Display Prelim Rslt? Display Third Digit? Inhib Printer(Y/N)? Display Uolume? Disable On Memfull? # of Print Copies? Select Std (D/W/I)? Standard Ualue? Standard Lot #? Standard Cyl #? | | Yes | | |
|---|---------------------------------------|-----------|----------------------------|------------|
| | Flow Cal. Date: Slope Intercept | | 05/29/28 643 -576193 | 120 |
| | IR Calibration Date | e: 3um | 05/29/20 |)20 9um |
| | Oth Coef(*100): | -25870 | | -2827 |
| | lst Coef(*188): | 287704 | | 13989 |
| | 2nd Coef(*100): | 26 | | 744 |

328

H2O adj(mg/l*10k): 293