



# INTOXILYZER® 8000 INSTALLATION AND REPAIR CHECKOUT

OFFICE OF ATTORNEY GENERAL  
CRIME LABORATORY DIVISION  
Toxicology Section/Breath Alcohol Program  
SFN 59281 (5-2011)

Serial Number <b>80-002669</b>	Instrument Location <b>WATFORD CITY</b>
Reason for Install/Repair <input type="checkbox"/> Install After Receiving From Crime Laboratory <input checked="" type="checkbox"/> Install After Location Change <input type="checkbox"/> Other (Specify) _____	

Check When Done:

- 1. Surge Protector Installed/Properly Grounded.
- N/A →  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 (Use CMS Mode; Key Radio During First Room Air).
- 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>[Signature]</i>	Date <b>04/01/13</b>
Reviewed By (Crime Laboratory Use Only) <i>Deb Kashner</i>	Date <b>03 Apr 13</b>

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

CMI, Inc. Intoxilyzer            Alcohol Analyzer  
North Dakota Model 8000            SN 80-002669  
Location = WATF                    8164.13.00 06/09  
04/01/2013                            22:05

\*\*\*\*\* Printer Test \*\*\*\*\*

abcdefghijklmnopqrstuvwxyz1234567890-=\_|  
ABCDEFGHIJKLMNopqrstuvwxyz!@#\$\$%^&\*()\_+?

abcdefghijklmnopqrstuvwxyz1234567890-=\_|  
ABCDEFGHIJKLMNopqrstuvwxyz!@#\$\$%^&\*()\_+?

Current Instrument Setup

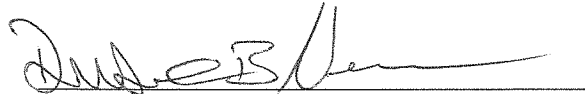
Data Entry Mode:            Enabled  
Start Test Sequence:        DABACABA  
Display Prelim Rslt?        Yes  
Display Third Digit?        Yes  
Inhib Printer(Y/N)?        No  
Display Volume?            No  
Disable On Memfull?        Yes  
# of Print Copies?          1  
Select Std (D/W/I)?        Dry  
Standard Value?            0.080  
Standard Lot #?            11611080A2  
Standard Cyl #?            114  
Standard Expiration?        06/01/2013  
Oper No?                    030924

Flow Cal. Date:            09/09/2011  
Slope                      662  
Intercept                  -510765

IR Calibration Date:        09/09/2011  
                                    3um                      9um

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0th Coef(\*100):            -15623                      -9015  
1st Coef(\*100):            263092                      133867  
2nd Coef(\*100):            3130                        1285  
H2O adj(mg/l\*10k):        642                         392

\*\*\*\*\* Printer Test End \*\*\*\*\*



Operator Signature  
DUSTIN NEWMAN

Remarks:

Print Test/Good

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

CMI, Inc. Intoxilyzer            Alcohol Analyzer  
North Dakota Model 8000            SN 80-002669  
Location = WATF                    8164.13.00 06/09  
04/01/2013                            22:01

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	22:02
02 Std. Gas	0.082	22:02
03 Room Air	0.000	22:03
04 Std. Gas	0.081	22:03
05 Room Air	0.000	22:03
06 Std. Gas	0.081	22:04
07 Room Air	0.000	22:04

Lot No = 11611080A2  
Cyl No = 114  
Exp Date = 06/01/2013  
County = 27                            Oper No. = 030924



Operator Signature  
DUSTIN NEWMAN

Remarks:

Form 106-I8000

ACA Test/Good

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

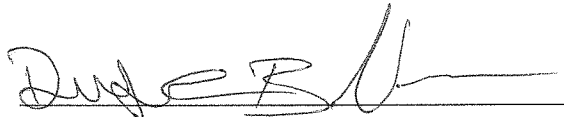
CMI, Inc. Intoxilyzer            Alcohol Analyzer  
North Dakota Model 8000        SN 80-002669  
Location = WATF                 8164.13.00 06/09  
04/01/2013                        21:46

Test	AC	Time
01 Diagnostic	OK	21:48
02 Room Air	RFI*	21:48
03 Room Air	RFI*	21:48

\*Invalid Test  
  Inhibited - RFI

Sub Name = TEST, RFI NA  
Sub DOB = 01/01/1980  
Sub Sex = Male                    Weight = 215  
Test = DUI                        Cit = NA  
Dr. Lic. = ND/NA  
Lot No = 11611080A2  
Cyl No = 114  
Expiration Date = 06/01/2013  
County = 27                        Oper No. = 030924

I followed the Approved Method and the instructions displayed by the Intoxilyzer in conducting this test.



Operator Signature  
DUSTIN NEWMAN

Remarks:

Form 106-I8000

RFI Test / Good