



INTOXILYZER® 8000 INSTALLATION AND REPAIR CHECKOUT

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

| | |
|---|------------------------------------|
| Serial Number <i>80-004201</i> | Instrument Location <i>GFAF</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 (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 <i>4/18/2012</i> |
| Reviewed By (Crime Laboratory Use Only) <i>Deb Kashner</i> | Date <i>09 Aug 2012</i> |

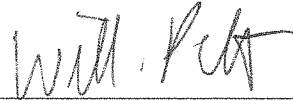
Intoxilyzer Test Record and Checklist
NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-004201
Location = GFAF 8164.13.00 06/09
04/18/2012 18:20

DRY CAL CHECK

| Test | AC | Time |
|-------------|-------|-------|
| 01 Room Air | 0.000 | 18:21 |
| 02 Std. Gas | 0.078 | 18:21 |
| 03 Room Air | 0.000 | 18:22 |
| 04 Std. Gas | 0.077 | 18:22 |
| 05 Room Air | 0.000 | 18:23 |
| 06 Std. Gas | 0.078 | 18:23 |
| 07 Room Air | 0.000 | 18:24 |

Lot No = 05911080A1
Cyl No = 10
Exp Date = 02/01/2013
County = 65 Oper No. = 120011



Operator Signature
WILLIAM R. PETTY

Remarks:

Form 106-I8000

ACA Test Install

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

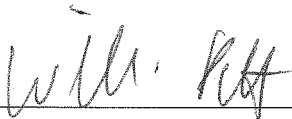
CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-004201
Location = GFAF 8164.13.00 06/09
04/18/2012 18:25

| Test | AC | Time |
|---------------|------|-------|
| 01 Diagnostic | OK | 18:28 |
| 02 Room Air | RFI* | 18:28 |
| 03 Room Air | RFI* | 18:28 |

*Invalid Test
Inhibited - RFI

Sub Name = TEST, RFI NMI
Sub DOB = 08/08/1960
Sub Sex = Male Weight = 200
Test = OTH Cit = NA
Dr. Lic. = ND/NA
Lot No = 05911080A1
Cyl No = 10
Expiration Date = 02/01/2013
County = 65 Oper No. = 120011

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



Operator Signature
WILLIAM R. PETTY

Remarks:

RFI Test Install