



# 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>80-004184</b>	Instrument Location <b>Grant Co</b>
Reason for Install/Repair <input checked="" type="checkbox"/> Install After Receiving From Crime Laboratory <input type="checkbox"/> Install After Location Change <input checked="" 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): N/A
- 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 <b>[Signature]</b>	Date <b>5-2-2012</b>
Reviewed By (Crime Laboratory Use Only) <b>Dep Kashner</b>	Date <b>02 May 2012</b>

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

CMI, Inc. Intoxilyzer            Alcohol Analyzer  
North Dakota Model 8000            SN 80-004184  
Location = CARS                    8164.13.00 06/09  
05/02/2012                            09:58

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

abcdefghijklmnopqrstuvwxy1234567890-|=|  
ABCDEFGHIJKLMNopQRSTUVWXYZ!@#\$\$%^&\*()\_+?

abcdefghijklmnopqrstuvwxy1234567890-|=|  
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 #?            23411080A1  
Standard Cyl #?            38  
Standard Expiration?        10/01/2013  
Oper No?                    039219

Flow Cal. Date:            07/30/2010  
Slope                        804  
Intercept                   -925008

IR Calibration Date:        07/30/2010  
                                    3um                    9um

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0th Coef(\*100):            -19612                    -18975  
1st Coef(\*100):            270159                    137378  
2nd Coef(\*100):            1174                      963  
H2O adj(mg/l\*10k):        427                        372

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

  
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Operator Signature  
STEVEN E. BAY

Remarks:

*Print Test*

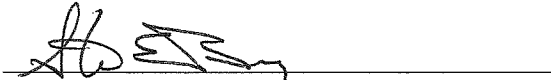
Intoxilyzer Test Record and Checklist  
NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer            Alcohol Analyzer  
North Dakota Model 8000        SN 80-004184  
Location = CARS                 8164.13.00 06/09  
05/02/2012                        09:59

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	09:59
02 Std. Gas	0.080	10:00
03 Room Air	0.000	10:00
04 Std. Gas	0.080	10:01
05 Room Air	0.000	10:01
06 Std. Gas	0.080	10:01
07 Room Air	0.000	10:02

Lot No = 23411080A1  
Cyl No = 38  
Exp Date = 10/01/2013  
County = 19                        Oper No. = 039219

  
Operator Signature  
STEVEN E. BAY

Remarks:

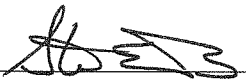
Intoxilyzer Test Record and Checklist  
NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer      Alcohol Analyzer  
North Dakota Model 8000      SN 80-004184  
Location = CARS      8164.13.00 06/09  
05/02/2012      10:06

Test	AC	Time
01 Diagnostic	OK	10:07
02 Room Air	RFI*	10:07
03 Room Air	0.000	10:08

\*Invalid Test  
Inhibited - RFI

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

  
\_\_\_\_\_  
Operator Signature  
STEVEN E. BAY

Remarks:

Form 106-I8000