



INTOXILYZER® 8000 INSTALLATION AND REPAIR CHECKOUT
 OFFICE OF ATTORNEY GENERAL
 CRIME LABORATORY DIVISION
 Toxicology Section/Breath Alcohol Program
 SFN 59281 (5-2011)

Serial Number 80-004937	Instrument Location UND - Police Dept.
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): Nothing repaired
- 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>L. Tracy L. Meidinger #258</i>	Date 06-02-2011
Reviewed By (Crime Laboratory Use Only) <i>Deb Kashner</i>	Date 06 June 2011

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

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-004937
Location = UNDP 8164.13.00 06/09
06/02/2011 15:37

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	15:38
02 Std. Gas	0.082	15:38
03 Room Air	0.000	15:39
04 Std. Gas	0.082	15:39
05 Room Air	0.000	15:40
06 Std. Gas	0.082	15:40
07 Room Air	0.000	15:41

Lot No = 659358
Cyl No = 31
Exp Date = 09/03/2011
County = 18 Oper No. = 119409

Tracy L. Meidinger #258
Operator Signature
TRACY L. MEIDINGER

Remarks:

Form 106-I8000

ACA 6-2-11 Installation

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