

Database ✓

**INTOXILYZER® 5000 G AND 8000
INSTALLATION AND REPAIR CHECKOUT**

Serial No.: 80-002669 Instrument Location: Cass County Jail

Reason for Install/Repair: _____ Install After Lab Repair/Inspection
 Other (specify) New Install and Setup

Check When Done:

- A. Surge Protector Installed/Properly Grounded.
- B. Telephone Line Connected to Intoxilyzer® KB.
- C. Breath Tube Heated.
- D. Review/Enter Preliminary Data Entry (Level 2, Function E).
- E. Ethanol Breath Standard: Connected Installed.
(Include Form 105-G if New Cylinder Installed.)
- F. Review/Enter Gas Setup (Level 1, Function S). (Intoxilyzer® 8000 Only.)
- G. Print Test (Level 1, Function P). (Attach Test Record.)
- H. ACA Test (Level 1, Function C). (Attach Test Record.)
- I. RFI Test (Use CMS Mode-First Room Air). (Attach Test Record.)
- J. Repair and/or Maintenance Performed: _____

10/1/09
Date
01 Oct 09
Date

Soelz
Field Inspector's Signature
Deb Keshner
Reviewed By

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

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-002669
Location = TOXL 8164.12.00 06/09
08/26/2009 08:25

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

12 char/line
abcdefghijkl
ABCDEFGHIJKL

16 char per line
abcdefghijklmnop
ABCDEFGHIJKLMN

21 chars per line
abcdefghijklmnopqrstu
ABCDEFGHIJKLMNQRSTU

24 characters per line
abcdefghijklmnopqrstuvw
ABCDEFGHIJKLMNQRSTUWX

32 characters per line
abcdefghijklmnopqrstuvwxy123456
ABCDEFGHIJKLMNQRSTUWXYZ123456

42 characters per line
abcdefghijklmnopqrstuvwxy1234567890abcdef
ABCDEFGHIJKLMNQRSTUWXYZ1234567890ABCDEF

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)? Wet
Standard Value? 0.110
Standard Solution #? DR00000
Sim Serial #? 1
Oper No? 107501

Flow Cal. Date: 09/10/2007
Slope 702
Intercept -608746

IR Calibration Date: 09/10/2007
3µm 9µm

0th Coef(*100): -4604 -8890
1st Coef(*100): 254947 133181
2nd Coef(*100): 4056 1165
H2O adj(mg/l*10K): 616 347

***** Test End *****



Operator Signature
MARGY PEARSON

Remarks:

Form 106-18000

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FM

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 = CASS 8164.12.00 06/09
10/01/2009 15:59

***** 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 #? 659357
Standard Cyl #? 40
Standard Expiration? 09/03/2011
Oper No? 020535

Flow Cal. Date: 09/10/2007
Slope 702
Intercept -608746

IR Calibration Date: 09/10/2007
 3um 9um

0th Coef(*100): -4604 -8890
1st Coef(*100): 254947 133181
2nd Coef(*100): 4056 1165
H2O adj(mg/l*10k): 616 347

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



Operator Signature
SHAWN P GETZ

Remarks:

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 = CASS 8164.12.00 06/09
10/01/2009 16:12

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	16:13
02 Std. Gas	0.081	16:13
03 Room Air	0.000	16:13
04 Std. Gas	0.081	16:14
05 Room Air	0.000	16:14
06 Std. Gas	0.081	16:15
07 Room Air	0.000	16:15

Lot No = 659357
Cyl No = 40
Exp Date = 09/03/2011
County = 09 Oper No. = 020535

S Getz

Operator Signature
SHAWN P. GETZ

Remarks:

Initial Setup

Form 106-I8000

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JFM*

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 = CASS 8164.12.00 06/09
10/01/2009 16:29

Test	AC	Time
01 Diagnostic	OK	16:31
02 Room Air	RFI*	16:31
03 Room Air	0.000	16:31

*Invalid Test
Inhibited - RFI

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



Operator Signature
SHAWN P. GETZ

Remarks:

Form 106-I8000

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