

INTOXILYZER® 8000 INSTALLATION AND REPAIR CHECKOUT

Serial No.: 80-004194 Instrument Location: Fort Totten PD

Reason for Install/Repair: I Install After Lab Repair/Inspection
Other (Specify) _____

Check When Done:

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

12-18-09
Date

Jacqueline DeMarco
Field Inspector's Signature

30 Dec 2009
Date

Deb Keshur
Reviewed By

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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 80-004194
Location = FTOT 8164.13.00 06/09
12/18/2009 15:39

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

abcdefghijklmnopqrstuvwxy1234567890-=
ABCDEFGHIJKLMNopqrstuvwxyz!@#%&^*()_+?

abcdefghijklmnopqrstuvwxy1234567890-=
ABCDEFGHIJKLMNopqrstuvwxyz!@#%&^*()_+?

Current Instrument Setup

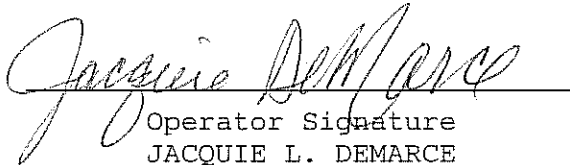
Data Entry Mode: Enabled
Start Test Sequence: DABACABA
Display Prelim Rslt? Yes
Display Third Digit? Yes
Inhib Printer(Y/N)? No
Display Volume? No
Disable On Memfull? Yes
of Print Copies? 1
Select Std (D/W/I)? Dry
Standard Value? 0.080
Standard Lot #? 659358
Standard Cyl #? 56
Standard Expiration? 09/03/2011
Oper No? 100103

Flow Cal. Date: 06/23/2009
Slope 681
Intercept -622430

IR Calibration Date: 12/10/2009

	3um	9um
0th Coef(*100):	-30896	-34419
1st Coef(*100):	274294	133969
2nd Coef(*100):	-715	552
H2O adj(mg/l*10k):	491	645

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


Operator Signature
JACQUIE L. DEMARCE

Remarks:

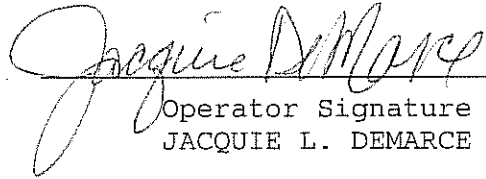
Intoxilyzer Test Record and Checklist
NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-004194
Location = FTOT 8164.13.00 06/09
12/18/2009 15:39

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	15:40
02 Std. Gas	0.077	15:40
03 Room Air	0.000	15:41
04 Std. Gas	0.077	15:41
05 Room Air	0.000	15:42
06 Std. Gas	0.078	15:42
07 Room Air	0.000	15:43

Lot No = 659358
Cyl No = 56
Exp Date = 09/03/2011
County = 03 Oper No. = 100103


Operator Signature
JACQUIE L. DEMARCE

Remarks:

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

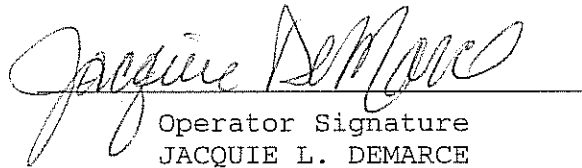
CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-004194
Location = FTOT 8164.13.00 06/09
12/18/2009 15:44

Test	AC	Time
01 Diagnostic	OK	15:46
02 Room Air	RFI*	15:46
03 Room Air	0.000	15:46

*Invalid Test
Inhibited - RFI

Sub Name = TEST, SUBJECT NA
Sub DOB = 01/01/1990
Sub Sex = Female Weight = NA
Test = OTH Cit = NA
Dr. Lic. = ND/NA
Lot No = 659358
Cyl No = 56
Expiration Date = 09/03/2011
County = 03 Oper No. = 100103

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


Operator Signature
JACQUIE L. DEMARCE

Remarks:

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