



**INTOXILYZER® 8000 INSTALLATION AND REPAIR CHECKOUT**  
 OFFICE OF ATTORNEY GENERAL  
 CRIME LABORATORY DIVISION  
 Toxicology Section/Breath Alcohol Program  
 SFN 59281 (10-2016)

Serial Number <b>80-005940</b>	Instrument Location <b>Cooperstown</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) <u>Install after bringing it to crime lab for download</u>	

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 (CMS Mode or Level 1, Function B or C; Key Radio During Test).
- 7. Repair and/or Maintenance Performed (if Any): NA
- 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 <b>1/19/18</b>
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Crime Laboratory Use Only

This installation has been reviewed and the instrument is approved to be used for the analysis of breath to determine alcohol concentration from the date the Field Inspector performed the installation. This record on file at the Office of Attorney General, Crime Laboratory Division, in the County of Burleigh, North Dakota, is certified to be a true and correct copy of the documents received.

Reviewed/Certified by <i>Roberta Muegge Nimmo</i>	Certified Date <b>1/19/18</b>
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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 80-005940  
Location = COOP      8164.14.00 09/16  
01/19/2018      13:48

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

abcdefghijklmnopqrstuvwxyz1234567890-=  
ABCDEFGHIJKLMNPOQRSTUVWXYZ!@#\$\$%^&\*()\_+?

abcdefghijklmnopqrstuvwxyz1234567890-=  
ABCDEFGHIJKLMNPOQRSTUVWXYZ!@#\$\$%^&\*()\_+?

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 #? 03417080A3  
Standard Cyl #? 10  
Standard Expiration? 03/05/2019  
Oper No? 061123

Flow Cal. Date: 06/21/2013  
Slope 688  
Intercept -659053

IR Calibration Date: 04/02/2015  
3um 9um

	3um	9um
0th Coef(*100):	-18917	-25088
1st Coef(*100):	267616	136158
2nd Coef(*100):	3374	1493
H2O adj(mg/l*10k):	427	417

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



Operator Signature  
WESLEY STRAIGHT

Remarks:


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

CMI, Inc. Intoxilyzer            Alcohol Analyzer  
North Dakota Model 8000        SN 80-005940  
Location = COOP                8164.14.00 09/16  
01/19/2018                        13:49

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	13:50
02 Std. Gas	0.081	13:50
03 Room Air	0.000	13:50
04 Std. Gas	0.080	13:51
05 Room Air	0.000	13:51
06 Std. Gas	0.080	13:52
07 Room Air	0.000	13:52

Lot No = 03417080A3  
Cyl No = 10  
Exp Date = 03/05/2019  
County = 20                      Oper No. = 061123

  
\_\_\_\_\_  
Operator Signature  
WESLEY STRAIGHT

Remarks:

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

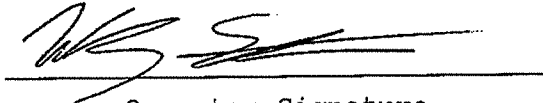
CMI, Inc. Intoxilyzer      Alcohol Analyzer  
North Dakota Model 8000      SN 80-005940  
Location = COOP      8164.14.00 09/16  
01/19/2018      13:52

DRY CAL CHECK

Test	AC	Time
01 Room Air	RFI*	13:53
02 Room Air	0.000	13:53

\*Invalid Test  
Inhibited - RFI

Lot No = 03417080A3  
Cyl No = 10  
Exp Date = 03/05/2019  
County = 20      Oper No. = 061123



Operator Signature  
WESLEY STRAIGHT

Remarks:

Form 106-I8000