

## INTOXILYZER® 8000 INSTALLATION AND REPAIR CHECKOUT

NORTH DAKOTA OFFICE OF ATTORNEY GENERAL CRIME LABORATORY DIVISION-TOXICOLOGY SECTION/BREATH ALCOHOL PROGRAM SFN 59281 (06/2018)

Serial Number 80 - 00 5940 Instrument Location New T	021			
Reason for Install/Repair				
Install After Receiving From Crime Laboratory   Install After Location Change				
Other (Specify)				
Check When Done:				
1. Surge Protector Installed/Property 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:  [MA Print Test (Level 1 Function P) (EE 5.27.20 ALL TEST RECORDS	RECEIVEN.			
A. Print Test (Level1, Function P).				
B ACA Test (Level 1, Function C).				
C. Radio Frequency Interference (RFI) Test (CMS Mode or Level 1, Function B or C; Key Radio Dur	ring Test).			
7. Repair and/or Maintenance Performed (if any):				
8. Complete the Top Portion of the Intoxilyzer® Record (SFN50496, Form 120-G) and Place it by the In	toxilyzer® for Use.			
9. File Previous Intoxilyzer® Record (SFN504096, Form 120-G) at the Intoxilyzer® Location at the Ager	ncy.			
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	Date (- 1 / 1)			
Field Hispector Signature AL M S 5661	Date 5-16-10			
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	Certified Date			
Charla Etch	5.27.2020			

FORM 104-G

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

CMI, Inc. Intoxilyzer
North Dakota Model 8000

Location = NEWT
05/26/2020

Alcohol Analyzer
SN 80-005940
8164.14.00 09/16
18:39

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

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

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

Current Instrument Setup Data Entry Mode: Start Test Sequence: Display Prelim Rslt? Enabled DABACABA Yes Display Third Digit? Yes Inhib Printer(Y/N)? No Display Volume? No Display Volume?
Disable On Memfull?
# of Print Copies?
Select Std (D/W/I)?
Standard Value?
Standard Lot #?
Standard Cyl #?
Condard Empire tion 2 24119080A1 Standard Expiration? 20 Oper No? 131739

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

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

Oth 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 ANDRES MARTINEZ

Remarks:

Form 106-I8000

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

CMI, Inc. Intoxilyzer
North Dakota Model 8000
Location = NEWT
05/26/2020

Alcohol Analyzer SN 80-005940 8164.14.00 09/16 18:45

## DRY CAL CHECK

Test			AC	Time
01	Room	Air	0.000	18:46
02	Std.	Gas	0.079	18:46
03	Room	Air	0.000	18:47
04	Std.	Gas	0.079	18:47
05	Room	Air	0.000	18:48
06	Std.	Gas	0.079	18:48
07	Room	Air	0.000	18:49

Lot No = 24119080A1

Cyl No = 26

Exp Date = 11/05/2021

County = 60

Oper No. = 131739

Operator Signature ANDRES MARTINEZ

Remarks:

Form 106-I8000

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 = NEWT	8164.14.00 09/16
05/26/2020	18:40

Test	AC	18:43
01 Diagnostic	OK	
02 Room Air	0.000	18:44
03 *Subject Test	RFI*	18:44
04 Room Air	0.000	18:44

\*Invalid Test Inhibited - RFI

Sub Name = TEST, TEST NA

Sub DOB = 09/22/1980

Sub Sex = Male Weight = NA Test = DUI Cit = NA

Dr. Lic. = ND/NA
Lot No = 24119080A1

Cyl No = 26

Expiration Date = 11/05/2021

County = 60 Oper No. = 131739

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

Operator Signature ANDRES MARTINEZ

Install-RFI

Remarks:

Form 106-I8000