




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 80-005951	Instrument Location Lehighton, ND
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/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:
 - 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 During Test).
- 7. Repair and/or Maintenance Performed (if any): N/A
- 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 (SFN504096, 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 	Date 6-8-2021
---	----------------------

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 6-11-21
---	-------------------------------

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

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-005951
Location = LANG 8164.14.00 09/16
06/08/2021 22:23

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

abcdefghijklmnopqrstuvwxyz1234567890-=-|
ABCDEFGHIJKLMNopqrstuvwxyz!@#%&^&*()_+?

abcdefghijklmnopqrstuvwxyz1234567890-=-|
ABCDEFGHIJKLMNopqrstuvwxyz!@#%&^&*()_+?

Current Instrument Setup

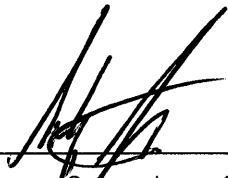
Data Entry Mode: Enabled
Start Test Sequence: DABACABA
Display Prelim Rslt? Yes
Display Third Digit? Yes
Inhib Printer(Y/N)? No
Display Volume? No
Disable On Memfull? Yes
of Print Copies? 1
Select Std (D/W/I)? Dry
Standard Value? 0.080
Standard Lot #? 24119080A1
Standard Cyl #? 1
Standard Expiration? 11/05/2021
Oper No? 021009

Flow Cal. Date: 06/21/2013
Slope 693
Intercept -721277

IR Calibration Date: 05/08/2017

	3um	9um
0th Coef(*100):	-17201	-17496
1st Coef(*100):	267144	137813
2nd Coef(*100):	2948	1389
H2O adj(mg/l*10k):	438	428

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



Operator Signature
GABRIEL JOHNSTON

Remarks:


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

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-005951
Location = LANG 8164.14.00 09/16
06/08/2021 22:23

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	22:24
02 Std. Gas	0.081	22:24
03 Room Air	0.000	22:25
04 Std. Gas	0.080	22:25
05 Room Air	0.000	22:26
06 Std. Gas	0.081	22:26
07 Room Air	0.000	22:27

Lot No = 24119080A1
Cyl No = 1
Exp Date = 11/05/2021
County = 10 Oper No. = 021009



Operator Signature
GABRIEL JOHNSTON

Remarks:

Form 106-I8000

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

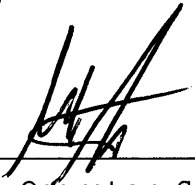
CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-005951
Location = LANG 8164.14.00 09/16
06/08/2021 22:30

DRY CAL CHECK

Test	AC	Time
01 Room Air	RFI*	22:30
02 Room Air	0.000	22:31

*Invalid Test
Inhibited - RFI

Lot No = 24119080A1
Cyl No = 1
Exp Date = 11/05/2021
County = 10 Oper No. = 021009



Operator Signature
GABRIEL JOHNSTON

Remarks:

Form 106-I8000