

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	100	Instrument Location	C (A)		
80-004 Recent for Install/Bassir	100	Grant County	$\mathcal{S}_{i}\mathcal{O}_{i}$		
Reason for Install/Repair					
Install After Receiving From Crime Laboratory Install After Location Change					
Other (Specify)		and the state of t			
Check When Done:					
Surge Protecto	or Installed/Property Grounded.				
2. Telephone Lin	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).				
CEE DB. ACA Test (Level 1, Function C). RECEIVED ACA TEST (DRY CAL CHECK)					
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):					
8. Complete the Top Portion of the Intoxilyzer® Record (SFN50496, Form 120-G) and Place it by the Intoxilyzer® for Use.					
9. File Previous I	ntoxilyzer® Record (SFN504096, Form 120-0	6) at the Intoxilyzer® Location at the Age	ency.		
	owing to the Crime Laboratory: Completed Int Test, ACA Test, and RFI Test.	oxilyzer® 8000 Installation and Repair C	Checkout (SFN59281, Form		
Field Inspector Signature	10-11		Date		
Serry	Fillon		6-17-2021		
Crime Laboratory Use Onl	у				
the date the Field Inspecto	reviewed and the instrument is approved to be preformed the installation. This record on for Dakota, is certified to be a true and correct contact.	ile at the Office of Attorney General, Crir	rmine alcohol concentration from ne Laboratory Division, in the		
Reviewed/Certified By	/ limber Es	Eh	Certified Date		
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FORM 104-G

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

CMI, Inc. Intoxilyzer Alcohol Analyzer North Dakota Model 8000 SN 80-004200 Location = CARS 8164.14.00 09/16 06/17/2021 16:12

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

abcdefghijklmnopgrstuvwxyz1234567890-= ABCDEFGHIJKLMNOPQRSTUVWXYZ!@#\$%^&*() +?

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

Current Instrument Setup Data Entry Mode: Enabled Start Test Sequence: DABACABA Display Prelim Rslt? Display Third Digit? Yes

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

05620080A1 Standard Lot #? Standard Cyl #? 37

04/05/2022 Standard Expiration? 132318 Oper No?

Flow Cal. Date: 06/25/2019

Slope 614 -551153 Intercept

IR Calibration Date: 06/25/2019 3um

______ Oth Coef(*100): -18792 -22164 1st Coef(*100): 267001 140777 2nd Coef(*100): 1903 1083

H20 adj(mq/l*10k): 403

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

Operator Signature TERRY DILLON

Remarks:

Form 106-I8000

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

CMI, Inc. Intoxilyzer
North Dakota Model 8000
Location = CARS
06/17/2021

Alcohol Analyzer SN 80-004200 8164.14.00 09/16 16:17

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	16:18
02 Std. Gas	0.079	16:18
03 Room Air	0.000	16:19
04 Std. Gas	0.079	16:19
05 Room Air	0.000	16:20
06 Std. Gas	0.078	16:20
07 Room Air	0.000	16:21

Lot No = 05620080A1

Cyl No = 37

Exp Date = 04/05/2022

County = 19

Oper No. = 132318

Operator Signature TERRY DILLON

Remarks:

Form 106-I8000

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

CMI, Inc. Intoxilyzer
North Dakota Model 8000
Location = CARS

06/17/2021

Alcohol Analyzer SN 80-004200 8164.14.00 09/16 16:13

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	16:14
02 Std. Gas	0.079	16:15
03 Room Air	0.000	16:15
04 Std. Gas	0.078	16:15
05 Room Air	RFI*	16:16
06 Room Air	0.000	16:16

*Invalid Test Inhibited - RFI

Lot No = 05620080A1

Cyl No = 37

Exp Date = 04/05/2022

County = 19

Oper No. = 132318

Operator Signature TERRY DILLON

Remarks:

Form 106-I8000