



NORTH DAKOTA OFFICE OF ATTORNEY GENERAL
CRIME LABORATORY DIVISION

INTOXILYZER® 8000 ANNUAL INSPECTION

Intoxilyzer® 8000 Serial Number: 80-00 6492 Inspection Location: TOXL

A. Pre-Inspection

1. Items with Instrument:
 - Gas Cylinder Yes or No (If Yes, Lot # _____ Cyl. # _____)
 - Keys Yes or No
 - Power Cord Yes or No
2. Download Data
3. Upload Operator File
4. Current Location Code: FYPP
5. Battery Check
 - Was the external battery pack replaced? Yes or No
6. O-Rings
 - Replaced Simulator O-Ring Yes or No
 - Replaced Breath Tube O-Ring Yes or No

B. General Setup and Checks:

1. Diagnostics passed and instrument in "Ready" mode
2. Breath tube heated
3. Date, time and location code (Level 2,E). Re-set if necessary.
 - Time Zone: CST or MDT (Time on test records will be in time zone circled).
4. Print test (Level 1,P). Sign and attach test record.
5. Tank monitor (Level 3,D,G).
 - Display: 226 psi Regulator: 200 psi
 - Display and Regulator ± 50 psi of each other Yes or No
 - Gas tank tare necessary? Yes or No
 - If Yes, display readings after tare (Level 3,M,C,G):
 - Display: _____ psi Regulator: _____ psi

C. Tests (Sign and attach test records):

1. Configure simulator for the following test (Level 1,S).
 - Wet Calibration Check - Low AC (Level 1,C)
 - Known Value ≤ 0.03 AC: 0.020 AC
 - Sim. Ser #: MP5318
 - Lot #: 202201A
 - Exp. Date: 11Jan24
 - Results ± 0.005 of known AC

Toxicology Unit - Breath Alcohol Section	Qualtrax ID: 11698 Revision: 1
Intoxilyzer 8000 Annual Inspection	Status: Published Published: 03/24/2023
UNCONTROLLED WHEN PRINTED	Page 1 of 2

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

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-006492
Location = TOXL 8164.14.00 09/16
04/28/2023 13:28

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

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

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

Current Instrument Setup

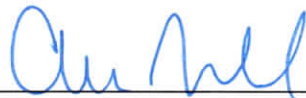
Data Entry Mode: Enabled
Start Test Sequence: DABACABA
Display Prelim Rslt? Yes
Display Third Digit? Yes
Inhib Printer(Y/N)? No
Display Volume? No
Disable On Memfull? Yes
of Print Copies? 1
Select Std (D/W/I)? Dry
Standard Value? 0.080
Standard Lot #? 34921080A1
Standard Cyl #? 47
Standard Expiration? 02/05/2024
Oper No? 133237

Flow Cal. Date: 08/18/2015
Slope 669
Intercept -631515

IR Calibration Date: 08/18/2015
 3um 9um

0th Coef(*100): -41685 -23145
1st Coef(*100): 269226 142194
2nd Coef(*100): 2671 1239
H2O adj(mg/l*10k): 872 437

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



Operator Signature
ANNA NAREHOOD

Remarks: *Print Test*

Form 106-I8000

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

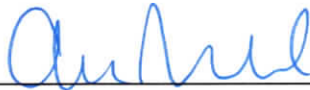
CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-006492
Location = TOXL 8164.14.00 09/16
04/28/2023 13:54

WET CAL CHECK

Test	AC	Time
01 Room Air	0.000	13:55
02 Std. Sol.	0.017	14:04
03 Room Air	0.000	14:04
04 Std. Sol.	0.018	14:05
05 Room Air	0.000	14:06
06 Std. Sol.	0.018	14:06
07 Room Air	0.000	14:07

08 Sim Temp = 34.0°C

Simul Ser No = MP5318
Std Sol No = 202201A
County = 08 Oper No. = 133237



Operator Signature
ANNA NAREHOOD

Remarks: *LOW Ac Check - 0.020Ac*

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CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-006492
Location = TOXL 8164.14.00 09/16
04/28/2023 14:08

WET CAL CHECK

Test	AC	Time
01 Room Air	0.000	14:08
02 Std. Sol.	0.296	14:09
03 Room Air	0.000	14:10
04 Std. Sol.	0.298	14:10
05 Room Air	0.000	14:11
06 Std. Sol.	0.299	14:12
07 Room Air	0.000	14:13

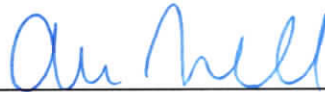
08 Sim Temp = 34.0°C

Simul Ser No = MP3067

Std Sol No = 202201F

County = 08

Oper No. = 133237



Operator Signature
ANNA NAREHOOD

Remarks: High Ac Check - 0.300ac

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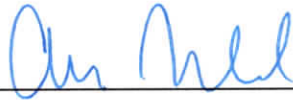
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NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-006492
Location = TOXL 8164.14.00 09/16
04/28/2023 14:16

Test	AC	Time
01 Room Air	0.000	14:17
02 *Subject Test	INT*	14:17
03 Room Air	0.000	14:18

*Invalid Test
Interferent Detected

Sub Name = TEST, DONOR2 NONE
Sub DOB = 07/25/1998
Sub Sex = Male Weight = NA
Test = OTH Cit = INTERFERENT CK
Dr. Lic. = ND/TES989643
Lot No = 34921080A1
Cyl No = 49
Expiration Date = 02/05/2024
County = 08 Oper No. = 133237



Operator Signature
ANNA NAREHOOD

Remarks:

Interferent check

Form 106-I8000

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CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-006492
Location = TOXL 8164.14.00 09/16
04/28/2023 14:18

Test	AC	Time
01 Diagnostic	OK	14:19
02 Room Air	0.000	14:20
03 *Subject Test	RFI*	14:20
04 Room Air	0.000	14:20

*Invalid Test
Inhibited - RFI

Sub Name = TEST, DONOR2 NONE
Sub DOB = 07/25/1998
Sub Sex = Male Weight = NA
Test = OTH Cit = RFI CHECK
Dr. Lic. = ND/TES989643
Lot No = 34921080A1
Cyl No = 49
Expiration Date = 02/05/2024
County = 08 Oper No. = 133237

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



Operator Signature
ANNA NAREHOOD

Remarks: *RFI check*

Form 106-I8000

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CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-006492
Location = TOXL 8164.14.00 09/16
04/28/2023 14:21

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	14:21
02 Std. Gas	0.080	14:22
03 Room Air	0.000	14:22
04 Std. Gas	0.080	14:22
05 Room Air	0.000	14:23
06 Std. Gas	0.081	14:23
07 Room Air	0.000	14:24

Lot No = 34921080A1
Cyl No = 49
Exp Date = 02/05/2024
County = 08 Oper No. = 133237



Operator Signature
ANNA NAREHOOD

Remarks: Dry cal check #1-3

Form 106-I8000

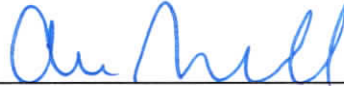
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CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-006492
Location = TOXL 8164.14.00 09/16
04/28/2023 14:24

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	14:25
02 Std. Gas	0.081	14:25
03 Room Air	0.000	14:26
04 Std. Gas	0.080	14:26
05 Room Air	0.000	14:27
06 Std. Gas	0.081	14:27
07 Room Air	0.000	14:28

Lot No = 34921080A1
Cyl No = 49
Exp Date = 02/05/2024
County = 08 Oper No. = 133237



Operator Signature
ANNA NAREHOOD

Remarks: Dry cal check #4-6

Form 106-I8000

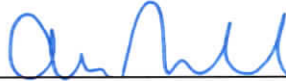
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CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-006492
Location = TOXL 8164.14.00 09/16
04/28/2023 14:28

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	14:29
02 Std. Gas	0.081	14:29
03 Room Air	0.000	14:30
04 Std. Gas	0.081	14:30
05 Room Air	0.000	14:31
06 Std. Gas	0.081	14:31
07 Room Air	0.000	14:32

Lot No = 34921080A1
Cyl No = 49
Exp Date = 02/05/2024
County = 08 Oper No. = 133237



Operator Signature
ANNA NAREHOOD

Remarks: Dry cal check #7-9

Form 106-I8000