



NORTH DAKOTA OFFICE OF ATTORNEY GENERAL
CRIME LABORATORY DIVISION

INTOXILYZER® 8000 ANNUAL INSPECTION

Intoxilyzer® 8000 Serial Number: 80-00 6512 Inspection Location: TOXL

A. Pre-Inspection

- Items with Instrument:
 - Gas Cylinder Yes or No (If Yes, Lot # 26021080A1 Cyl. # 35)
 - Keys Yes or No
 - Power Cord Yes or No
- Download Data
- Upload Operator File
- Current Location Code: CARR
- Battery Check
 - Was the external battery pack replaced? Yes or No
- O-Rings
 - Replaced Simulator O-Ring Yes or No
 - Replaced Breath Tube O-Ring Yes or No

B. General Setup and Checks:

- Diagnostics passed and instrument in "Ready" mode
- Breath tube heated
- 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).
- Print test (Level 1,P). Sign and attach test record.
- Tank monitor (Level 3,D,G).
Display: 923 psi Regulator: 950 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):

- 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: 1/1/24
 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 |
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2. Configure simulator for the following test (Level 1,S).
 Wet Calibration Check - High AC (Level 1,C)
 Known Value \geq 0.25 AC: 0.300 AC
 Sim. Ser #: MP3067
 Lot #: 202201F
 Exp. Date: 18Jan24
 Results \pm 5% AC of known AC
3. Configure dry gas standard for the remaining tests (Level 1,S).
 Known Value : 0.080 AC
 Gas Cylinder Lot #: 26021080A1
 Cylinder #: 3
 Exp. Date: 10/5/23
4. Interferent Check (Level 1,B)
 Known Value: 0.10 AC + 0.05% Acetone
 Sim. Ser #: DR7345
 Lot #: ICS 7
 Exp. Date: NIA
 Display reads "Interferent Detect"
5. RFI Check (CMS Mode)
 Display reads "RFI Detect"
6. Dry Calibration Check (Level 1,C)

| | | |
|----------------------|---------------------|---------------------|
| Test 1 <u>0.080</u> | Test 4 <u>0.080</u> | Test 7 <u>0.080</u> |
| Test 2 <u>0.080</u> | Test 5 <u>0.080</u> | Test 8 <u>0.081</u> |
| Test 3 <u>0.080</u> | Test 6 <u>0.080</u> | Test 9 <u>0.080</u> |
| Average <u>0.080</u> | | |

 Results \pm 0.005 AC of known AC

D. Remarks/Maintenance: NIA

Instrument is acceptable to be used in the field. Yes or No
 If No, state reason(s) why: _____

If Yes, change location code back to A.4.

Am Hill
 Inspector Signature

17May2023
 Date

Janelle Putschiller
 Reviewer

17 May 2023
 Date

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

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

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-006512
Location = TOXL 8164.14.00 09/16
05/17/2023 10:34

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

abcdefghijklmnopqrstuvwxy1234567890-|=|
ABCDEFGHIJKLMNopQRSTUVWXYZ!@#%&^*()_+?

abcdefghijklmnopqrstuvwxy1234567890-|=|
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 #? 26021080A1
Standard Cyl #? 35
Standard Expiration? 10/05/2023
Oper No? 133237

Flow Cal. Date: 08/20/2015
Slope 680
Intercept -660856

IR Calibration Date: 08/21/2015
 3um 9um

0th Coef(*100): -23051 -19261
1st Coef(*100): 266836 137135
2nd Coef(*100): 3974 1466
H2O adj(mg/l*10k): 785 487

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



Operator Signature
ANNA NAREHOOD

Remarks: Pnnt Test

Form 106-I8000

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NDOAG Crime Lab. Div., Bismarck, ND 58501

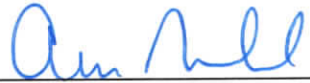
CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-006512
Location = TOXL 8164.14.00 09/16
05/17/2023 10:34

WET CAL CHECK

| Test | AC | Time |
|--------------|-------|-------|
| 01 Room Air | 0.000 | 10:35 |
| 02 Std. Sol. | 0.020 | 10:36 |
| 03 Room Air | 0.000 | 10:36 |
| 04 Std. Sol. | 0.020 | 10:37 |
| 05 Room Air | 0.000 | 10:37 |
| 06 Std. Sol. | 0.020 | 10:38 |
| 07 Room Air | 0.000 | 10:39 |

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 - 0.020AE*

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NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-006512
Location = TOXL 8164.14.00 09/16
05/17/2023 10:39

WET CAL CHECK

| Test | AC | Time |
|--------------|-------|-------|
| 01 Room Air | 0.000 | 10:40 |
| 02 Std. Sol. | 0.295 | 10:41 |
| 03 Room Air | 0.000 | 10:41 |
| 04 Std. Sol. | 0.298 | 10:42 |
| 05 Room Air | 0.000 | 10:43 |
| 06 Std. Sol. | 0.298 | 10:43 |
| 07 Room Air | 0.000 | 10:44 |

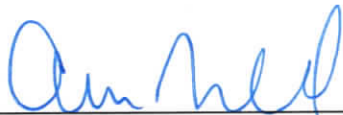
08 Sim Temp = 34.0°C

Simul Ser No = MP3067

Std Sol No = 202201F

County = 08

Oper No. = 133237



Operator Signature
ANNA NAREHOOD

Remarks: High Ac Check - 0.300AC

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 80-006512
Location = TOXL 8164.14.00 09/16
05/17/2023 10:45

| Test | AC | Time |
|------------------|-------|-------|
| 01 Room Air | 0.000 | 10:45 |
| 02 *Subject Test | INT* | 10:46 |
| 03 Room Air | 0.000 | 10:46 |

*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 = 26021080A1
Cyl No = 3
Expiration Date = 10/05/2023
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 80-006512
Location = TOXL 8164.14.00 09/16
05/17/2023 10:47

| Test | AC | Time |
|------------------|-------|-------|
| 01 Diagnostic | OK | 10:47 |
| 02 Room Air | 0.000 | 10:48 |
| 03 *Subject Test | RFI* | 10:48 |
| 04 Room Air | 0.000 | 10:48 |

*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 = 26021080A1
Cyl No = 3
Expiration Date = 10/05/2023
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

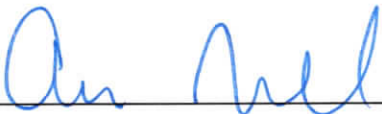
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NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-006512
Location = TOXL 8164.14.00 09/16
05/17/2023 10:49

DRY CAL CHECK

| Test | AC | Time |
|-------------|-------|-------|
| 01 Room Air | 0.000 | 10:49 |
| 02 Std. Gas | 0.080 | 10:49 |
| 03 Room Air | 0.000 | 10:50 |
| 04 Std. Gas | 0.080 | 10:50 |
| 05 Room Air | 0.000 | 10:51 |
| 06 Std. Gas | 0.080 | 10:51 |
| 07 Room Air | 0.000 | 10:52 |

Lot No = 26021080A1
Cyl No = 3
Exp Date = 10/05/2023
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 80-006512
Location = TOXL 8164.14.00 09/16
05/17/2023 10:52

DRY CAL CHECK

| Test | AC | Time |
|-------------|-------|-------|
| 01 Room Air | 0.000 | 10:53 |
| 02 Std. Gas | 0.080 | 10:53 |
| 03 Room Air | 0.000 | 10:54 |
| 04 Std. Gas | 0.080 | 10:54 |
| 05 Room Air | 0.000 | 10:55 |
| 06 Std. Gas | 0.080 | 10:55 |
| 07 Room Air | 0.000 | 10:55 |

Lot No = 26021080A1
Cyl No = 3
Exp Date = 10/05/2023
County = 08 Oper No. = 133237



Operator Signature
ANNA NAREHOOD

Remarks: Dry cal check #4-6

Form 106-I8000

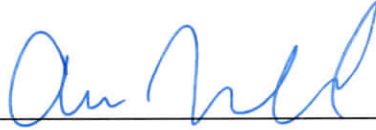
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NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-006512
Location = TOXL 8164.14.00 09/16
05/17/2023 10:56

DRY CAL CHECK

| Test | AC | Time |
|-------------|-------|-------|
| 01 Room Air | 0.000 | 10:56 |
| 02 Std. Gas | 0.080 | 10:57 |
| 03 Room Air | 0.000 | 10:57 |
| 04 Std. Gas | 0.081 | 10:58 |
| 05 Room Air | 0.000 | 10:58 |
| 06 Std. Gas | 0.080 | 10:59 |
| 07 Room Air | 0.000 | 10:59 |

Lot No = 26021080A1
Cyl No = 3
Exp Date = 10/05/2023
County = 08 Oper No. = 133237



Operator Signature
ANNA NAREHOOD

Remarks: Dry Cal check #7-9

Form 106-I8000