



NORTH DAKOTA OFFICE OF ATTORNEY GENERAL
CRIME LABORATORY DIVISION

INTOXILYZER® 8000 ANNUAL INSPECTION

Intoxilyzer® 8000 Serial Number: 80-00 4204 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: TOXL
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: 230 psi Regulator: 225 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 80-004204
Location = TOXL 8164.14.00 09/16
06/22/2023 09:23

***** 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 #? 25
Standard Expiration? 10/05/2023
Oper No? 133237

Flow Cal. Date: 04/15/2020
Slope 657
Intercept -673032

IR Calibration Date: 06/22/2023
 3um 9um

	3um	9um
0th Coef(*100):	-20901	-22715
1st Coef(*100):	264345	135832
2nd Coef(*100):	2957	1309
H2O adj(mg/l*10k):	448	454

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



Operator Signature
ANNA NAREHOOD

Remarks: *Print Test*

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

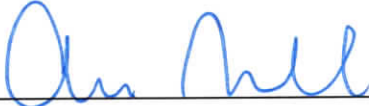
CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-004204
Location = TOXL 8164.14.00 09/16
06/22/2023 09:24

WET CAL CHECK

Test	AC	Time
01 Room Air	0.000	09:25
02 Std. Sol.	0.020	09:26
03 Room Air	0.000	09:26
04 Std. Sol.	0.021	09:27
05 Room Air	0.000	09:28
06 Std. Sol.	0.020	09:28
07 Room Air	0.000	09:29

08 Sim Temp = 34.0°C

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



Operator Signature
ANNA NAREHOOD

Remarks: *LDN Ac Check-0.020Ac*

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 80-004204
Location = TOXL 8164.14.00 09/16
06/22/2023 09:31

WET CAL CHECK

Test	AC	Time
01 Room Air	0.000	09:31
02 Std. Sol.	0.402	09:32
03 Room Air	0.000	09:33
04 Std. Sol.	0.405	09:34
05 Room Air	0.000	09:34
06 Std. Sol.	0.406	09:35
07 Room Air	0.000	09:35

08 Sim Temp = 34.0°C

Simul Ser No = MP3069

Std Sol No = 202212C

County = 08

Oper No. = 133237



Operator Signature
ANNA NAREHOOD

Remarks: High Ac Check - 0.400Ac

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 80-004204
Location = TOXL 8164.14.00 09/16
06/22/2023 09:37

Test	AC	Time
01 Room Air	0.000	09:37
02 *Subject Test	INT*	09:39
03 Room Air	0.000	09:40

*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 = 46
Expiration Date = 02/05/2024
County = 08 Oper No. = 133237



Operator Signature
ANNA NAREHOOD

Remarks: *Interferent check*

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 80-004204
Location = TOXL 8164.14.00 09/16
06/22/2023 09:40

Test	AC	Time
01 Diagnostic	OK	09:41
02 Room Air	0.000	09:42
03 *Subject Test	RFI*	09:42
04 Room Air	0.000	09:42

*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 = 46
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

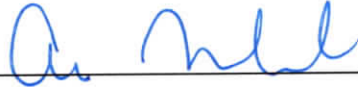
Intoxilyzer Test Record and Checklist
NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-004204
Location = TOXL 8164.14.00 09/16
06/22/2023 09:42

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	09:43
02 Std. Gas	0.079	09:43
03 Room Air	0.000	09:44
04 Std. Gas	0.079	09:44
05 Room Air	0.000	09:45
06 Std. Gas	0.080	09:45
07 Room Air	0.000	09:46

Lot No = 34921080A1
Cyl No = 46
Exp Date = 02/05/2024
County = 08 Oper No. = 133237



Operator Signature
ANNA NAREHOOD

Remarks: DRY cal check # 1-3

Form 106-I8000

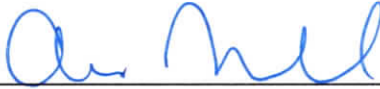
Intoxilyzer Test Record and Checklist
NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-004204
Location = TOXL 8164.14.00 09/16
06/22/2023 09:46

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	09:46
02 Std. Gas	0.080	09:47
03 Room Air	0.000	09:47
04 Std. Gas	0.079	09:48
05 Room Air	0.000	09:48
06 Std. Gas	0.079	09:49
07 Room Air	0.000	09:49

Lot No = 34921080A1
Cyl No = 46
Exp Date = 02/05/2024
County = 08 Oper No. = 133237



Operator Signature
ANNA NAREHOOD

Remarks: Dry Cal Check #4-6

Form 106-I8000

