

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 - 006517 Instrument Location 6FSO - Still						
Reason for Install/Repair						
☐ Install After Receiving From Crime Laboratory ☐ Install After Location Change						
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).						
X 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): Installed after return from	State Lab					
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					
7/all Al	Date 06-19-24					
Crime Laboratory Use Only						
This installation has been reviewed and the instrument is approved to be used for the analysis of breath to det the date the Field Inspector performed the installation. This record on file at the Office of Attorney General, County of Burleigh, North Dakota, is certified to be a true and correct copy of the documents received.	ermine alcohol concentration from ime Laboratory Division, in the					

FORM 104-G

Reviewed/Certified By

Certified Date

19June2024

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 = GFSO 8164.14.00 09/16
06/19/2024 08:55

******* 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 Yes Disable On Memfull? # of Print Copies? 1 Dry 0.080 Select Std (D/W/I)? Standard Value? Standard Lot #? 28423080A3 Standard Cyl #? 12 Standard Expiration? 11/05/2025 Oper No? 100452

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

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

Oth 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 NATHAN MOEN

Remarks:

Form 106-I8000

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

CMI, Inc. Intoxilyzer North Dakota Model 8000 SN 80-006512 Location = GFSO 06/19/2024

Alcohol Analyzer 8164.14.00 09/16 08:55

DRY CAL CHECK

Test			AC	Time
01	Room	Air	0.000	08:56
02	Std.	Gas	0.081	08:56
03	Room	Air	0.000	08:57
04	Std.	Gas	0.081	08:57
05	Room	Air	0.000	08:58
06	Std.	Gas	0.081	08:58
07	Room	Air	0.000	08:59

Lot No = 28423080A3

Cyl No = 12

Exp Date = 11/05/2025

County = 18

Oper No. = 100452

Operator Signature NATHAN MOEN

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 80-006512 Location = GFSO 8164.14.00 09/16 06/19/2024

09:04

DRY CAL CHECK

Test			AC	Time
01	Room	Air	0.000	09:05
02	Std.	Gas	0.081	09:05
03	Room	Air	RFI*	09:05
04	Room	Air	0.000	09:06

*Invalid Test Inhibited - RFI

Lot No = 28423080A3

Cyl No = 12

Exp Date = 11/05/2025

County = 18

Oper No. = 100452

Operator Signature NATHAN MOEN

Remarks:

Form 106-I8000