



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 80-004935	Instrument Location Emmons Co SO - Linton
Reason for Install/Repair	
<input checked="" type="checkbox"/> Install After Receiving From Crime Laboratory <input type="checkbox"/> Install After Location Change <input type="checkbox"/> 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 (Level 1, Function P).
 - 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): None
- 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.

AEN

Field Inspector Signature <i>Christoph Lee</i>	Date 4/2/25
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Crime Laboratory Use Only

This installation has been reviewed and the instrument is approved to be used for the analysis of breath to determine alcohol concentration from the date the Field Inspector performed the installation. This record on file at the Office of Attorney General, Crime Laboratory Division, in the County of Burleigh, North Dakota, is certified to be a true and correct copy of the documents received.

Reviewed/Certified By Anna Narehood <i>Anna Narehood</i>	Certified Date 4/14/2025
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Intoxilyzer Test Record and Checklist
NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-004935
Location = LINT. 8164.14.00 09/16
04/02/2025 16:14

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

12 char/line
abcdefghijkl
ABCDEFGHIJKL

16 char per line
abcdefghijklmnop
ABCDEFGHIJKLMN

21 chars per line
abcdefghijklmnopqrstu
ABCDEFGHIJKLMNQRSTU

24 characters per line
abcdefghijklmnopqrstuvw
ABCDEFGHIJKLMNQRSTUW

32 characters per line
abcdefghijklmnopqrstuvwxy123456
ABCDEFGHIJKLMNQRSTUWXYZ123456

42 characters per line
abcdefghijklmnopqrstuvwxy1234567890abcdef
ABCDEFGHIJKLMNQRSTUWXYZ1234567890ABCDEF

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 #? 14323080A4
Standard Cyl #? 39
Standard Expiration? 06/05/2025
Oper No? 130605

Flow Cal. Date: 07/12/2012
Slope 655
Intercept -510289

IR Calibration Date: 05/20/2015
3um 9um

0th Coef(*100):	-7871	-19684
1st Coef(*100):	264505	133108
2nd Coef(*100):	2865	1320
H2O adj(mg/l*10k):	200	298

***** Test End *****


Operator Signature
CHRISTOPHER VARGAS

Remarks:

Form 106-I8000

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

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-004935
Location = LINT 8164.14.00 09/16
04/02/2025 16:16

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	16:17
02 Std. Gas	0.079	16:17
03 Room Air	0.000	16:17
04 Std. Gas	0.079	16:18
05 Room Air	0.000	16:18
06 Std. Gas	0.079	16:19
07 Room Air	0.000	16:19

Lot No = 14323080A4
Cyl No = 39
Exp Date = 06/05/2025
County = 15 Oper No. = 130605


Operator Signature
CHRISTOPHER VARGAS

Remarks:

Form 106-18000

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

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-004935
Location = LINT 8164.14.00 09/16
04/02/2025 16:20

Test	AC	Time
01 Room Air	0.000	16:22
02 *Subject Test	RFI*	16:22
03 Room Air	0.000	16:23

*Invalid Test
Inhibited - RFI

Sub Name = TEST, TEST TEST
Sub DOB = 04/29/1999
Sub Sex = Male Weight = 205
Test = OHU Cit = NA
Dr. Lic. = ND/NA
Lot No = 14323000A4
Cyl No = 39
Expiration Date = 06/05/2025
County = 15 Oper No. = 130605


Operator Signature
CHRISTOPHER VARGAS

Remarks:

Form 106-18000