



NORTH DAKOTA OFFICE OF ATTORNEY GENERAL  
CRIME LABORATORY DIVISION

INTOXILYZER® 8000 ANNUAL INSPECTION

Intoxilyzer® 8000 Serial Number: 80-00 4939 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: 304 psi Regulator: 300 psi  
Display and Regulator  $\pm$  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  $\leq$  0.03 AC: 0.020 AC  
Sim. Ser #: MP5321  
Lot #: 202311D  
Exp. Date: 11/28/25  
☒ Results  $\pm$  0.005 of known AC

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 #: MP6035  
Lot #: 202402C  
Exp. Date: 2/14/26  
☒ 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 #: 14323080A1  
Cylinder #: 25  
Exp. Date: 6/5/25
4. ☒ Interferent Check (Level 1,B)  
Known Value: 0.10 AC + 0.05% Acetone  
Sim. Ser #: DR7352  
Lot #: 1CS8  
Exp. Date: None  
☒ Display reads "Interferent Detect"
5. ☒ RFI Check (CMS Mode)  
☒ Display reads "RFI Detect"
6. ☒ Dry Calibration Check (Level 1,C)  
Test 1 0.082 Test 4 0.082 Test 7 0.082  
Test 2 0.081 Test 5 0.082 Test 8 0.082  
Test 3 0.082 Test 6 0.082 Test 9 0.082  
Average 0.081  
☒ Results  $\pm 0.005$  AC of known AC

D. Remarks/Maintenance: N/A

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 unless A.4 is TOXL. ☒

Inspector Signature

Date

Reviewer

Date

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

CMI, Inc. Intoxilyzer      Alcohol Analyzer  
North Dakota Model 8000      SN 80-004939  
Location = TOXL      8164.14.00 09/16  
04/17/2025      13:35

\*\*\*\*\* 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 #?      28423080A3  
Standard Cyl #?      37  
Standard Expiration?      11/05/2025  
Oper No?      133237

Flow Cal. Date:      01/18/2010  
Slope      724  
Intercept      -779308

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

0th Coef(*100):	-19230	-17600
1st Coef(*100):	257947	133671
2nd Coef(*100):	3268	1535
H2O adj(mg/l*10k):	529	419

\*\*\*\*\* 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 80-004939  
Location = TOXL      8164.14.00 09/16  
04/17/2025      13:40

WET CAL CHECK

Test	AC	Time
01 Room Air	0.000	13:40
02 Std. Sol.	0.021	13:41
03 Room Air	0.000	13:42
04 Std. Sol.	0.021	13:42
05 Room Air	0.000	13:43
06 Std. Sol.	0.021	13:44
07 Room Air	0.000	13:44

08 Sim Temp = 34.0°C

Simul Ser No = MP5321  
Std Sol No = 202311D  
County = 08      Oper No. = 133237



Operator Signature  
ANNA NAREHOOD

Remarks: LOW AC Check - 0.020 AC

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 80-004939  
Location = TOXL      8164.14.00 09/16  
04/17/2025      13:45

WET CAL CHECK

Test	AC	Time
01 Room Air	0.000	13:46
02 Std. Sol.	0.299	13:48
03 Room Air	0.000	13:48
04 Std. Sol.	0.300	13:49
05 Room Air	0.000	13:50
06 Std. Sol.	0.300	13:50
07 Room Air	0.000	13:51

08 Sim Temp = 34.0°C

Simul Ser No = MP6035

Std Sol No = 202402C

County = 08

Oper No. = 133237



Operator Signature  
ANNA NAREHOOD

Remarks: High AC check - 0.300AR

Form 106-I8000

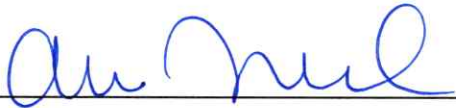
Intoxilyzer Test Record and Checklist  
NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer      Alcohol Analyzer  
North Dakota Model 8000      SN 80-004939  
Location = TOXL      8164.14.00 09/16  
04/17/2025      13:56

Test	AC	Time
01 Room Air	0.000	13:57
02 *Subject Test	INT*	13:58
03 Room Air	0.000	13:58

\*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 = 14323080A1  
Cyl No = 25  
Expiration Date = 06/05/2025  
County = 08      Oper No. = 133237

  
Operator Signature  
ANNA NAREHOOD

Remarks: Interferent Check  
0.10Ac + 0.05% Acetone

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 80-004939  
Location = TOXL      8164.14.00 09/16  
04/17/2025      13:59

Test	AC	Time
01 Diagnostic	OK	14:00
02 Room Air	0.000	14:00
03 *Subject Test	RFI*	14:00
04 Room Air	0.000	14:01

\*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 = 14323080A1  
Cyl No = 25  
Expiration Date = 06/05/2025  
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

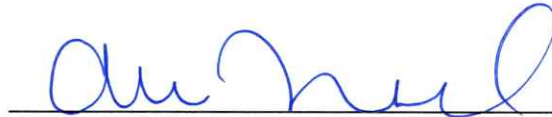
Intoxilyzer Test Record and Checklist  
NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer      Alcohol Analyzer  
North Dakota Model 8000      SN 80-004939  
Location = TOXL      8164.14.00 09/16  
04/17/2025      14:01

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	14:01
02 Std. Gas	0.082	14:02
03 Room Air	0.000	14:02
04 Std. Gas	0.081	14:03
05 Room Air	0.000	14:03
06 Std. Gas	0.082	14:04
07 Room Air	0.000	14:04

Lot No = 14323080A1  
Cyl No = 25  
Exp Date = 06/05/2025  
County = 08      Oper No. = 133237



Operator Signature  
ANNA NAREHOOD

Remarks: Dry Cal Check #1-3

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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 80-004939  
Location = TOXL      8164.14.00 09/16  
04/17/2025      14:05

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	14:06
02 Std. Gas	0.082	14:06
03 Room Air	0.000	14:07
04 Std. Gas	0.082	14:07
05 Room Air	0.000	14:08
06 Std. Gas	0.082	14:08
07 Room Air	0.000	14:09

Lot No = 14323080A1  
Cyl No = 25  
Exp Date = 06/05/2025  
County = 08      Oper No. = 133237



Operator Signature  
ANNA NAREHOOD

Remarks: Dry Cal check #4-6

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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 80-004939  
Location = TOXL      8164.14.00 09/16  
04/17/2025      14:15

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	14:16
02 Std. Gas	0.082	14:16
03 Room Air	0.000	14:16
04 Std. Gas	0.082	14:17
05 Room Air	0.000	14:17
06 Std. Gas	0.082	14:18
07 Room Air	0.000	14:18

Lot No = 14323080A1  
Cyl No = 25  
Exp Date = 06/05/2025  
County = 08      Oper No. = 133237



Operator Signature  
ANNA NAREHOOD

Remarks: Dry cal check #7-9

Form 106-I8000