

## 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 80-607095 Instrument Location	)			
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).				
9 6. Run Tests:				
A., Print Test (Level1, 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 Du	ring Test).			
7. Repair and/or Maintenance Performed (if any):				
8. Complete the Top Portion of the Intoxilyzer® Record (SFN50496, Form 120-G) and Place it by the In	ntoxilyzer® 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 C 104-G), Print Test, ACA Test, and RFI Test.	heckout (SFN59281, Form			
Field Inspector Signature	Date			
Moun if in	3/12/25			
Crime Laboratory Use Only	•			
This installation has been reviewed and the instrument is approved to be used for the analysis of breath to determ the date the Field Inspector performed the installation. This record on file at the Office of Attorney General, Crin County of Burleigh, North Dakota, is certified to be a true and correct copy of the documents received.				
Reviewed/Certified By Anna Narehood	Certified Date 19May2025			

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

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-007095
Location = OKPD 8164.16.00 09/18
05/12/2025 07:29

\*\*\*\*\*\*\* Printer Test \*\*\*\*\*\*\*\*

abcdefghijklmnopqrstuvwxyz1234567890-=|
ABCDEFGHIJKLMNOPQRSTUVWXYZ!@#\$%^&\*()\_+?

abcdefghijklmnopqrstuvwxyz1234567890-=|
ABCDEFGHIJKLMNOPQRSTUVWXYZ!@#\$%^&\*()\_+?

Current Instrument Setup

Enabled Data Entry Mode: Start Test Sequence: DABACABA
Display Prelim Rslt? Yes
Display Third Digit? Yes Display Third Digit? Inhib Printer(Y/N)? No Display Volume? No Yes Disable On Memfull? # of Print Copies? # OF Print Copies.
Select Std (D/W/I)? Dry 0.080 Standard Value? Standard Lot #? Standard Cyl #? 08425080A1 001 Standard Expiration? 05/05/2027 130690 Oper No?

Flow Cal. Date: 09/27/2018 Slope 683 Intercept -637452

H20 adj (mg/l\*10k): 921

IR Calibration Date: 06/21/2023
3um 9um

Oth Coef(\*100): -38728 -15234
1st Coef(\*100): 250485 139595
2nd Coef(\*100): 2553 1269

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

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Operator Signature MATTHEW O'BRIEN

Remarks:

Form 106-I8000

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

CMI, Inc. Intoxilyzer
North Dakota Model 8000
Location = OKPD
05/12/2025

Alcohol Analyzer SN 80-007095 8164.16.00 09/18 07:29

## DRY CAL CHECK

$T\epsilon$	est		AC	Time
01	Room	Air	0.000	07:30
02	Std.	Gas	0.079	07:31
03	Room	Air	0.000	07:31
04	Std.	Gas	0.080	07:31
05	Room	Air	0.000	07:32
06	Std.	Gas	0.079	07:32
07	Room	Air	0.000	07:33

Lot No = 08425080A1

Cyl No = 001

Exp Date = 05/05/2027

County = 11

Oper No. = 130690

Operator Signature MATTHEW O'BRIEN

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 80-007095
Location = OKPD	8164.16.00 09/18
05/12/2025	08:24

Test	AC	Time
01 Room Air	0.000	08:25
02 *Subject Test	RFI*	08:25
03 Room Air	0.000	08:25

\*Invalid Test Inhibited - RFI

Sub Name = RFI, NA NA Sub DOB = 01/21/1999 Sub Sex = Unknown

Weight = NA Cit = NA

Test = OTH

Dr. Lic. = ND/NALot No = 08425080A1

Cyl No = 001

Expiration Date = 05/05/2027

County = 11

Oper No. = 130690

Operator Signature MATTHEW O'BRIEN

Remarks:

Form 106-I8000