



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 80-006679	Instrument Location HILL
Reason for Install/Repair <input checked="" type="checkbox"/> Install After Receiving From Crime Laboratory <input type="checkbox"/> Install After Location Change <input checked="" type="checkbox"/> Other (Specify) Annual Inspection at Crime Lab.	

Check When Done: **Install after**

- ☒ 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): **NA**
- ☒ 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
21May25

Field Inspector Signature AW 21	Date 5-17-25
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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	Certified Date 21May2025
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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 80-006679
Location = HILL 8164.14.00 09/16
05/17/2025 16:51

***** 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 #? 08425080A1
Standard Cyl #? 15
Standard Expiration? 05/05/2027
Oper No? 131630

Flow Cal. Date: 09/06/2016
Slope 701
Intercept -682926

IR Calibration Date: 09/06/2016
 3um 9um

0th Coef(*100):	-18983	-23165
1st Coef(*100):	280986	134481
2nd Coef(*100):	2443	1290
H2O adj(mg/l*10k):	569	553

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



Operator Signature
AUSTIN BARIL

Remarks:

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

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-006679
Location = HILL 8164.14.00 09/16
05/17/2025 16:51

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	16:52
02 Std. Gas	0.081	16:53
03 Room Air	0.000	16:53
04 Std. Gas	0.082	16:53
05 Room Air	0.000	16:54
06 Std. Gas	0.081	16:54
07 Room Air	0.000	16:55

Lot No = 08425080A1

Cyl No = 15

Exp Date = 05/05/2027

County = 49

Oper No. = 131630



Operator Signature
AUSTIN BARIL

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 80-006679
Location = HILL 8164.14.00 09/16
05/17/2025 16:58

Test	AC	Time
01 Room Air	RFI*	17:01
02 Room Air	0.000	17:01

*Invalid Test
Inhibited - RFI

Sub Name = RFI TEST, RFI TEST RFI TEST
Sub DOB = 01/01/1999
Sub Sex = Unknown Weight = NA
Test = OTH Cit = NA
Dr. Lic. = ND/NA
Lot No = 08425080A1
Cyl No = 15
Expiration Date = 05/05/2027
County = 49 Oper No. = 131630



Operator Signature
AUSTIN BARIL

Remarks:

Form 106-I8000