



**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 <u>80-002669</u>	Instrument Location <u>Williston Jail</u>
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 (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 During Test).
- ☐ 7. Repair and/or Maintenance Performed (if any): N/A
- ☒ 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 <u>12/18/2025</u>
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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 <u>Anna Ingemansen</u> 	Certified Date <u>30Dec2025</u>
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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 80-002669  
Location = WILL      8164.14.00 09/16  
12/18/2025      13:32

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

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

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

Current Instrument Setup

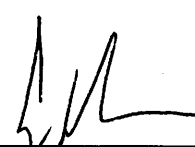
Data Entry Mode:      Enabled  
Start Test Sequence:      DABACABA  
Display Prelim Rslt?      Yes  
Display Third Digit?      Yes  
Inhib Printer(Y/N)?      No  
Display Volume?      No  
Disable On Memfull?      Yes  
# of Print Copies?      1  
Select Std (D/W/I)?      Dry  
Standard Value?      0.080  
Standard Lot #?      01524080A4  
Standard Cyl #?      24  
Standard Expiration?      03/05/2026  
Oper No?      030922

Flow Cal. Date:      06/14/2021  
Slope      616  
Intercept      -441889

IR Calibration Date:      06/14/2021

	3um	9um
0th Coef(*100):	-27364	-15040
1st Coef(*100):	280250	139895
2nd Coef(*100):	444	862
H2O adj(mg/l*10k):	479	256

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

  
\_\_\_\_\_  
Operator Signature  
COBY HUBBLE

Remarks:

Form 106-I8000

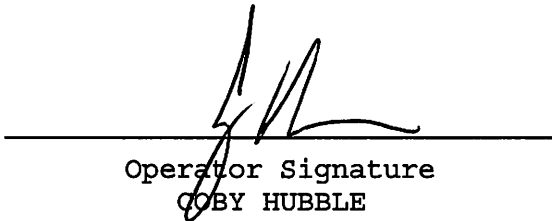
Intoxilyzer Test Record and Checklist  
NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer      Alcohol Analyzer  
North Dakota Model 8000      SN 80-002669  
Location = WILL      8164.14.00 09/16  
12/18/2025      13:32

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	13:33
02 Std. Gas	0.081	13:33
03 Room Air	0.000	13:34
04 Std. Gas	0.081	13:34
05 Room Air	0.000	13:35
06 Std. Gas	0.082	13:35
07 Room Air	0.000	13:36

Lot No = 01524080A4  
Cyl No = 24  
Exp Date = 03/05/2026  
County = 53      Oper No. = 030922

  
Operator Signature  
GOBY HUBBLE

Remarks:

Form 106-I8000

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

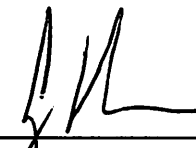
CMI, Inc. Intoxilyzer      Alcohol Analyzer  
North Dakota Model 8000      SN 80-002669  
Location = WILL      8164.14.00 09/16  
12/18/2025      13:38

DRY CAL CHECK

Test	AC	Time
01 Room Air	RFI*	13:38
02 Room Air	0.000	13:38

\*Invalid Test  
Inhibited - RFI

Lot No = 01524080A4  
Cyl No = 24  
Exp Date = 03/05/2026  
County = 53      Oper No. = 030922

  
\_\_\_\_\_  
Operator Signature  
COBY HUBBLE

Remarks:

Form 106-I8000