



**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 <i>80-005950</i>	Instrument Location <i>SKER</i>
Reason for Install/Repair <input type="checkbox"/> Install After Receiving From Crime Laboratory <input type="checkbox"/> Install After Location Change <input checked="" type="checkbox"/> Other (Specify) <i>Annual Inspection at Crime Lab</i>	

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): \_\_\_\_\_
- 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 <i>[Signature]</i>	Date <i>04/02/2026</i>
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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 <i>Anna Ingemansen</i>	Certified Date <i>08April2026</i>
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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 80-005950  
Location = SHER      8164.14.00 09/16  
04/02/2026      16:45

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

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

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

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 #?      19825080A2  
Standard Cyl #?      029  
Standard Expiration?      09/05/2027  
Oper No?      020320

Flow Cal. Date:      06/20/2013  
Slope      713  
Intercept      -723515

IR Calibration Date:      06/20/2013

	3um	9um
0th Coef(*100):	-37081	-23816
1st Coef(*100):	290549	133411
2nd Coef(*100):	552	1090
H2O adj(mg/l*10k):	683	502

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



Operator Signature  
TRENT NASER

Remarks:

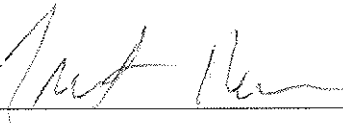
Intoxilyzer Test Record and Checklist  
NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer      Alcohol Analyzer  
North Dakota Model 8000      SN 80-005950  
Location = SHER      8164.14.00 09/16  
04/02/2026      16:57

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	16:58
02 Std. Gas	0.082	16:59
03 Room Air	0.000	16:59
04 Std. Gas	0.081	16:59
05 Room Air	0.000	17:00
06 Std. Gas	0.081	17:00
07 Room Air	0.000	17:01

Lot No = 19825080A2  
Cyl No = 029  
Exp Date = 09/05/2027  
County = 42      Oper No. = 020320

  
\_\_\_\_\_  
Operator Signature  
TRENT NASER

Remarks:

Form 106-18000

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

CMI, Inc. Intoxilyzer      Alcohol Analyzer  
North Dakota Model 8000      SN 80-005950  
Location = SHER      8164.14.00 09/16  
04/02/2026      17:04

DRY CAL CHECK

Test	AC	Time
01 Room Air	RFI*	17:04
02 Room Air	RFI*	17:04

\*Invalid Test  
Inhibited - RFI

Lot No = 19825080A2  
Cyl No = 029  
Exp Date = 09/05/2027  
County = 42      Oper No. = 020320



Operator Signature  
TRENT NASER

Remarks:

Form 106-I8000