



**NORTH DAKOTA OFFICE OF ATTORNEY GENERAL  
CRIME LABORATORY DIVISION**

**INTOXILYZER® 8000 ANNUAL INSPECTION**

Intoxilyzer® 8000 Serial Number: 80-00 6502 Inspection Location: TOXL

**A. Pre-Inspection**

1. Items with Instrument:
  - Gas Cylinder  Yes or No (If Yes, Lot # 08425080A1 Cyl. # 9)
  - Keys  Yes or  No
  - Power Cord  Yes or  No
2.  Download Data
3.  Upload Operator File
4.  Current Location Code: STUT
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: 765 psi Regulator: 750 psi  
Display and Regulator ± 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 ≤ 0.03 AC: 0.025 AC  
Sim. Ser #: MP3063  
Lot #: 202509A  
Exp. Date: 9/10/27
2.  Results ± 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 #: MP3003

Lot #: 202408H

Exp. Date: 8/29/26

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 #: 1982508DA2

Cylinder #: 20

Exp. Date: 9/5/27

4.  Interferent Check (Level 1,B)

Known Value: 0.10 AC + 0.05% Acetone

Sim. Ser #: DR7352

Lot #: ICS9

Exp. Date: None

Display reads "Interferent Detect"

5.  Invalid Sample (Level 1,B)

Display reads "Invalid Sample"

6.  RFI Check (CMS Mode)

Display reads "RFI Detect"

7.  Dry Calibration Check (Level 1,C)

Test 1 0.080 Test 4 0.080 Test 7 0.081

Test 2 0.080 Test 5 0.079 Test 8 0.081

Test 3 0.086 Test 6 0.080 Test 9 0.081

Average 0.080

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.

Chris Lyngner  
Inspector Signature

07 April 2026  
Date

Janelle Pitschiller  
Reviewer

08 Apr. 2026  
Date

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

CMI, Inc. Intoxilyzer            Alcohol Analyzer  
North Dakota Model 8000            SN 80-006502  
Location = TOXL                    8164.14.00 09/16  
04/07/2026                            15:11

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

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

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

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 #?            9  
Standard Expiration?        05/05/2027  
Oper No?                    133237

Flow Cal. Date:            08/19/2015  
Slope                        674  
Intercept                    -654491

IR Calibration Date:        08/19/2015  
                                  3um                    9um  
-----  
0th Coef(\*100):            -24446                    -18103  
1st Coef(\*100):            267787                    135417  
2nd Coef(\*100):            3387                      1610  
H2O adj(mg/l\*10k):        740                        513

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



Operator Signature  
ANNA INGEMANSEN

Remarks: *Print Test*

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NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer      Alcohol Analyzer  
North Dakota Model 8000      SN 80-006502  
Location = TOXL      8164.14.00 09/16  
04/07/2026      15:12

WET CAL CHECK

| Test         | AC    | Time  |
|--------------|-------|-------|
| 01 Room Air  | 0.000 | 15:12 |
| 02 Std. Sol. | 0.025 | 15:13 |
| 03 Room Air  | 0.000 | 15:14 |
| 04 Std. Sol. | 0.025 | 15:15 |
| 05 Room Air  | 0.000 | 15:15 |
| 06 Std. Sol. | 0.025 | 15:16 |
| 07 Room Air  | 0.000 | 15:16 |

08 Sim Temp = 34.0°C

Simul Ser No = MP3063  
Std Sol No = 202509A  
County = 08      Oper No. = 133237

Operator Signature  
ANNA INGEMANSEN

Remarks: *Dry ac*  
*7Apr26*      *LOW AC Check*  
*0.025AC*

Form 106-I8000

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

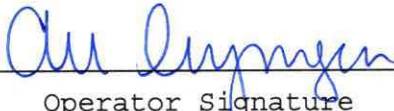
CMI, Inc. Intoxilyzer      Alcohol Analyzer  
North Dakota Model 8000      SN 80-006502  
Location = TOXL      8164.14.00 09/16  
04/07/2026      15:18

WET CAL CHECK

| Test         | AC    | Time  |
|--------------|-------|-------|
| 01 Room Air  | 0.000 | 15:19 |
| 02 Std. Sol. | 0.298 | 15:23 |
| 03 Room Air  | 0.000 | 15:24 |
| 04 Std. Sol. | 0.298 | 15:25 |
| 05 Room Air  | 0.000 | 15:25 |
| 06 Std. Sol. | 0.297 | 15:26 |
| 07 Room Air  | 0.000 | 15:27 |

08 Sim Temp = 34.0°C

Simul Ser No = MP3003  
Std Sol No = 202408H  
County = 08      Oper No. = 133237

  
\_\_\_\_\_  
Operator Signature  
ANNA INGEMANSEN

Remarks: High Ac check  
0.300Ac

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 80-006502  
Location = TOXL                    8164.14.00 09/16  
04/07/2026                            15:29

| Test             | AC    | Time  |
|------------------|-------|-------|
| 01 Room Air      | 0.000 | 15:30 |
| 02 *Subject Test | INT*  | 15:30 |
| 03 Room Air      | 0.000 | 15:31 |

\*Invalid Test  
Interferent Detected

Sub Name = TEST, DONOR2 NONE  
Sub DOB = 07/25/1998  
Sub Sex = Male                      Weight = NA  
Test = OTH                          Cit = INTERFERENT  
Dr. Lic. = ND/TES989643  
Lot No = 19825080A2  
Cyl No = 20  
Expiration Date = 09/05/2027  
County = 08                          Oper No. = 133237



Operator Signature  
ANNA INGEMANSEN

Remarks: Interferent check  
0.10AC + 0.05% Acetone

Form 106-I8000

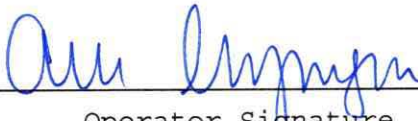
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NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer            Alcohol Analyzer  
North Dakota Model 8000        SN 80-006502  
Location = TOXL                8164.14.00 09/16  
04/07/2026                        15:31

| Test              | AC    | Time  |
|-------------------|-------|-------|
| 01 Room Air       | 0.000 | 15:32 |
| 02 Invalid Sample | X.XXX | 15:32 |
| 03 Room Air       | 0.000 | 15:33 |

\*Invalid Test - Mouth Alcohol

Sub Name = TEST, DONOR2 NONE  
Sub DOB = 07/25/1998  
Sub Sex = Male                    Weight = NA  
Test = OTH                        Cit = INVALID  
Dr. Lic. = ND/TES989643  
Lot No = 19825080A2  
Cyl No = 20  
Expiration Date = 09/05/2027  
County = 08                        Oper No. = 133237

  
\_\_\_\_\_  
Operator Signature  
ANNA INGEMANSEN

Remarks: Invalid Sample  
Mouth Alcohol

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NDOAG Crime Lab. Div., Bismarck, ND 58501


CMI, Inc. Intoxilyzer            Alcohol Analyzer  
North Dakota Model 8000        SN 80-006502  
Location = TOXL                8164.14.00 09/16  
04/07/2026                        15:34

| Test             | AC    | Time  |
|------------------|-------|-------|
| 01 Diagnostic    | OK    | 15:35 |
| 02 Room Air      | 0.000 | 15:36 |
| 03 *Subject Test | RFI*  | 15:37 |
| 04 Room Air      | 0.000 | 15:38 |

\*Invalid Test  
Inhibited - RFI

Sub Name = TEST, DONOR2 NONE  
Sub DOB = 07/25/1998  
Sub Sex = Male                    Weight = NA  
Test = OTH                        Cit = RFI  
Dr. Lic. = ND/TES989643  
Lot No = 19825080A2  
Cyl No = 20  
Expiration Date = 09/05/2027  
County = 08                        Oper No. = 133237

I followed the Approved Method and the instructions displayed by the Intoxilyzer in conducting this test.

  
\_\_\_\_\_  
Operator Signature  
ANNA INGEMANSEN

Remarks: RFI Check

Form 106-I8000

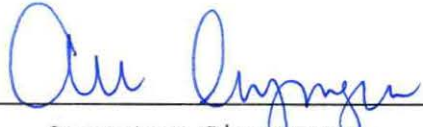
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NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer      Alcohol Analyzer  
North Dakota Model 8000      SN 80-006502  
Location = TOXL      8164.14.00 09/16  
04/07/2026      15:38

DRY CAL CHECK

| Test        | AC    | Time  |
|-------------|-------|-------|
| 01 Room Air | 0.000 | 15:39 |
| 02 Std. Gas | 0.080 | 15:40 |
| 03 Room Air | 0.000 | 15:40 |
| 04 Std. Gas | 0.080 | 15:40 |
| 05 Room Air | 0.000 | 15:41 |
| 06 Std. Gas | 0.080 | 15:41 |
| 07 Room Air | 0.000 | 15:42 |

Lot No = 19825080A2  
Cyl No = 20  
Exp Date = 09/05/2027  
County = 08      Oper No. = 133237

  
\_\_\_\_\_  
Operator Signature  
ANNA INGEMANSEN

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 80-006502  
Location = TOXL                    8164.14.00 09/16  
04/07/2026                            15:42

DRY CAL CHECK

| Test        | AC    | Time  |
|-------------|-------|-------|
| 01 Room Air | 0.000 | 15:43 |
| 02 Std. Gas | 0.080 | 15:43 |
| 03 Room Air | 0.000 | 15:44 |
| 04 Std. Gas | 0.079 | 15:44 |
| 05 Room Air | 0.000 | 15:45 |
| 06 Std. Gas | 0.080 | 15:45 |
| 07 Room Air | 0.000 | 15:46 |

Lot No = 19825080A2  
Cyl No = 20  
Exp Date = 09/05/2027  
County = 08                            Oper No. = 133237

  
Operator Signature  
ANNA INGEMANSEN

Remarks: Dry cal check  
#4-6

Form 106-I8000

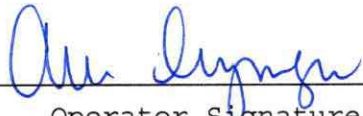
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NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer      Alcohol Analyzer  
North Dakota Model 8000      SN 80-006502  
Location = TOXL      8164.14.00 09/16  
04/07/2026      15:46

DRY CAL CHECK

| Test        | AC    | Time  |
|-------------|-------|-------|
| 01 Room Air | 0.000 | 15:47 |
| 02 Std. Gas | 0.081 | 15:47 |
| 03 Room Air | 0.000 | 15:48 |
| 04 Std. Gas | 0.081 | 15:48 |
| 05 Room Air | 0.000 | 15:49 |
| 06 Std. Gas | 0.081 | 15:49 |
| 07 Room Air | 0.000 | 15:50 |

Lot No = 19825080A2  
Cyl No = 20  
Exp Date = 09/05/2027  
County = 08      Oper No. = 133237

  
Operator Signature  
ANNA INGEMANSEN

Remarks: Dry Cal Check  
#7-9

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