

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY BREATH ALCOHOL PROGRAM

INTOX EC/IR II MAINTENANCE REPORT

REPORT #3

Complete this report at the time	ne of the regular month	ly preventive maint	enance check (not	to exceed 35	
days). Complete this report whenever the instrument is serviced or repaired and whenever it is placed					
into service. Retain the original and send a copy within 15 days to the		Breath Alcohol Program, DHSS.			
INTOX EC/IR II SN	NAME OF AGENCY		DATE OF INSPECTION		
12822	Harrisonville Police		06/17/2020		
LOCATION OF INSTRUMENT (STREET AND CITY)			TIME OF INSPECTION		
205 N. Lexington Harrisonvi		14:09 CDT			
CHECKLIST: Place a mark in the box by each item if found to be satisfactory or is operating within					
established limits. (Write in observed values where determined). Unmarked items must be corrected					
before using instrument.					
X DIAGNOSTIC RECORD					
X BLANK CHECK X CO2 CHECK					
X FC 1 TEMP X FLOW CHECK					
X SRC TEMP X FCB CHECK					
X DET TEMP X CRC COMP CHECK					
X BT TEMP X CRC CAL CHECK					
X STD 2 TEMP					
X ETH CHECK					
BREATH ANALYZER ACCURACY ST.	ANDARDS				
SIMULATOR SOLUTION X COMPRESSED ETHANOL-GAS MIXTURE					
X STANDARD SUPPLIER IN	LOT# AG911506	EXP. DATE 04/25/2021			
SIMULATOR TEMP (34°C +0.2			SIM. NIST EXP		
	DIM.	JIN .	SIM. NIST EAF	DATE	
X CALIBRATION CHECK - (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)					
Run three tests using a standard solution. All three tests must be within +5% of the standard value					
and must have a spread of .005 or less. Mark the box corresponding to the standard solution being					
used.					
0.10% STANDARD - MUST READ BETWEEN 0.095% AND 0.105% INCLUSIVE					
X 0.08% STANDARD = MUST READ BETWEEN 0.076% AND 0.084% INCLUSIVE					
0.04% STANDARD = MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE					
TEST 1 0.078 g/210L	EST 1 0.078 g/210L TEST 2 0.078 g/210L		TEST 3 0.078 g/210L		
INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:					
				·	
REFUSALS 0 004 0		.1014 0	.1519 0	OVER .19 0	
LIST ANY NEW PARTS AND DESCRIBE ANY SATISFACTORILY AND WITHIN ESTABLISH			STORE THE INSTRUMENT	TO OPERATE	
	DIMITE (ODB OTHER BIDE	II NECESSARI/			
INSPECTING OFFICER					
SIGNATURE		PRINT FULL NAME			
The house land		DAVIS, MICHAEL			
,	O /17/2020	TELEPHONE NUMBER			
280238 08/17/2020 (816)380-8940					
RETURN COMPLETED REPORT TO THE:					
Breath Alcohol Program, Missouri Department of Health and Senior Services					

by mail, fax, or e-mail



Airgas USA LLC (LAB)

3500 Bernard Street

St. Louis, Mo. 63103

Ph: (314) 533-3100

Fax: (314) 533-7328

Certificate of Analysis

Customer Name

Exclusive Supplier Intoximeters, Inc. 2081 Craig Road St. Louis, Mo 63146 Test Date: 30-Apr-2019

Lot # AG911506 Model 108cacd

Exp. Date

Cyl. Type

Component

Certified Concentration

25-Apr-2021

Ethanol Nitrogen

0.080 ± 0.002 BrAC (218 ppm)

Balance

Certification Traceable to N.I.S.T. RGM and to CRM Ethanol Standards:

RGM Serial No. Concentration EB0010581 RGM Serial No. 392.1 ppm EB0010570 EB0010603 259.8 ppm EB0010559 EB0010285 208.0 ppm EB0010561 EB0010595 103.6 ppm EB0010681 EB0010562 52.12 ppm EB0010579

CRM Serial No. CC434668 CC234503

Concentration 800.0 ppm 253.0 ppm

CRM Serial No. 0056649 0056662

Concentration 390.1 ppm 150.2 ppm

Concentration

393.0 ppm

258.2 ppm

208.3 ppm

104.2 ppm

52.81 ppm

Analytical Method:

NDIR

Digitally signed by Quality Control Date: 2019.04,30 10:50:52 -05:00 Reason; Dry gas standard certification of analysis Location; Alirgas USA LLC (Lab)

Approved for Release:

ISO 17025:2005 A2LA accredited. Certificate Number 3082.06 ISO 17034:2016 A2LA accredited. Certificate Number 3082.07



STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM



PERMIT TYPE II

MICHAEL DAVIS

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

ALCO-SENSOR IV WITH PRINTER, INTOX EC/IR II

for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

DATE 8/17/2018	We with
NUMBER 280238	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
EXPIRES 8/17/2020	for Ulle
0.580-0771 (6-10)	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

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