THE ARIZONA ADMINISTRATIVE CODE

Within the stated calendar quarter, this Chapter contains all rules made, amended, repealed, renumbered, and recodified; or rules that have expired or were terminated due to an agency being eliminated under sunset law. These rules were either certified by the Governor’s Regulatory Review Council or the Attorney General’s Office; or exempt from the rulemaking process, and filed with the Office of the Secretary of State. Refer to the historical notes for more information.

Please note that some rules you are about to remove may still be in effect after the publication date of this Supplement. Therefore, all superseded material should be retained in a separate binder and archived for future reference.

Title 13. Public Safety

Chapter 10. Department of Public Safety - Alcohol Testing

Supplement Release Quarter: 16-3

Sections, Parts, Exhibits, Tables or Appendices modified

Exhibits: E-1 through E-6 and F-1 through F-5

REMOVE Supp. 06-2

Pages: 1 - 31

REPLACE with Supp. 16-3

Pages: 1 - 21

The Council can answer questions about expired rules in Supp. 16-3:

Agency: Governor's Regulatory Review Council
Address: 100 N. 15th Ave #402
         Phoenix, AZ 85012-0250
Telephone: Phoenix, AZ 85007
Phone: (602) 542-2058

Disclaimer: Please be advised the council can only answer questions about the expired Exhibits listed above.
PREFACE

Under Arizona law, the Department of State, Office of the Secretary of State (Office), accepts state agency rule filings and is the publisher of Arizona rules. The Office of the Secretary of State does not interpret or enforce rules in the Administrative Code. Questions about rules should be directed to the state agency responsible for the promulgation of the rule.

Scott Cancelosi, Director
PUBLIC SERVICES DIVISION
September 30, 2016

RULES
A.R.S. § 41-1001(17) states: "'Rule' means an agency statement of general applicability that implements, interprets, or prescribes law or policy, or describes the procedures or practice requirements of an agency."

THE ADMINISTRATIVE CODE
The Arizona Administrative Code is where the official rules of the state of Arizona are published. The Code is the official codification of rules that govern state agencies, boards, and commissions. Virtually everything in your life is affected in some way by rules published in the Arizona Administrative Code, from the quality of air you breathe to the licensing of your dentist. This chapter is one of more than 230 in the Code compiled in 21 Titles.

ADMINISTRATIVE CODE SUPPLEMENTS
Rules filed by an agency to be published in the Administrative Code are updated quarterly. Supplement release dates are printed on the footers of each chapter:

- First Quarter: January 1 - March 31
- Second Quarter: April 1 - June 30
- Third Quarter: July 1 - September 30
- Fourth Quarter: October 1 - December 31

For example, the first supplement for the first quarter of 2016 is cited as Supp. 16-1.

HOW TO USE THE CODE
Rules may be in effect before a supplement is released by the Office. Therefore, the user should refer to issues of the Arizona Administrative Register for recent updates to rule Sections.

ARTICLES AND SECTIONS
Rules in chapters are divided into Articles, then Sections. The "R" stands for "rule" with a sequential numbering and lettering system separated into subsections.

HISTORICAL NOTES AND EFFECTIVE DATES
Historical notes inform the user when the last time a Section was updated in the Administrative Code. Be aware, since the Office publishes each quarter by entire chapters, not all Sections are updated by an agency in a supplement release. Many times just one Section or a few Sections may be updated in the entire chapter.

ARIZONA REVISED STATUTE REFERENCES
The Arizona Revised Statutes (A.R.S.) are available online at the Legislature’s website, www.azleg.gov. An agency’s authority note to make rules are often included at the beginning of a chapter. Other Arizona statutes may be referenced in rule under the A.R.S. acronym.

SESSION LAW REFERENCES
Arizona Session Law references in the introduction of a chapter can be found at the Secretary of State’s website, www.azsos.gov/services/legislative-filings.

EXEMPTIONS FROM THE APA
It is not uncommon for an agency to be exempt from the steps outlined in the rulemaking process as specified in the Arizona Administrative Procedures Act, also known as the APA (Arizona Revised Statutes, Title 41, Chapter 6, Articles 1 through 10). Other agencies may be given an exemption to certain provisions of the Act.

An agency’s exemption is written in law by the Arizona State Legislature or under a referendum or initiative passed into law by Arizona voters.

When an agency files an exempt rulemaking package with our Office it specifies the law exemption in what is called the preamble of rulemaking. The preamble is published in the Arizona Administrative Register online at www.azsos.gov/rules, click on the Administrative Register link.

In the Administrative Code the Office includes editor’s notes at the beginning of a chapter indicating that certain rulemaking Sections were made by exempt rulemaking. Exempt rulemaking notes are also included in the historical note at the end of a rulemaking Section.

The Office makes a distinction to certain exemptions because some rules are made without receiving input from stakeholders or the public. Other exemptions may require an agency to propose exempt rules at a public hearing.

EXEMPTIONS AND PAPER COLOR
If you are researching rules and come across rescinded chapters on a different paper color, this is because the agency filed a Notice of Exempt Rulemaking. At one time the office published exempt rules on either blue or green paper. Blue meant the authority of the exemption was given by the Legislature; green meant the authority was determined by a court order. In 2001 the Office discontinued publishing rules using these paper colors.

PERSONAL USE/COMMERCIAL USE
This chapter is posted as a public courtesy online, and is for private use only. Those who wish to use the contents for resale or profit should contact the Office about Commercial Use fees. For information on commercial use fees review A.R.S. § 39-121.03 and 1 A.A.C. 1., R1-1-113.

Public Services managing rules editor, Rhonda Paschal, assisted with the editing of this chapter.
TITLE 13. PUBLIC SAFETY

CHAPTER 10. DEPARTMENT OF PUBLIC SAFETY - ALCOHOL TESTING

(Artivity: A.R.S. §§ 28-1322 through 28-1326 and 41-1713)

Editor’s Note: This Chapter, consisting of Article 1, Sections R13-10-101 through R13-10-109, Exhibits A through D, Exhibits E-1, through E-6, F-1 through F-5, G-1 through G-6, and H-1, through H-4, made by final rulemaking at 12 A.A.R. 1916, effective May 18, 2006 (Supp. 06-2).

ARTICLE 1. DETERMINATION OF ALCOHOL CONCENTRATION

Article 1, consisting of Sections R13-10-101 through R13-10-109, Exhibits A through D, and Exhibits E-1 through E-6, F-1 through F-5, G-1 through G-6, and H-1 through H-4, made by final rulemaking at 12 A.A.R. 1916, effective 9:00 a.m., May 18, 2006 (Supp. 06-2).

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ARTICLE 1. DETERMINATION OF ALCOHOL CONCENTRATION

R13-10-101. Definitions

In this Article, unless the context otherwise requires:

1. “Alcohol concentration” or “AC” means grams of alcohol per 100 milliliters of blood or grams of alcohol per 210 liters of breath.

2. “Analyst” means an individual who has been issued an analyst permit by the Department to use approved methods to make alcohol concentration determinations from blood or other bodily substances.

3. “Analyst permit” means a document issued by the Department indicating the permit holder has been found qualified to utilize an approved method in the determination of alcohol concentrations.

4. “Analytical procedure” means a series of operations utilized by an analyst when employing an approved method in the determination of alcohol concentration.

5. “Calibration Check” means an operation utilizing a standard alcohol concentration solution to determine whether a device is accurately measuring alcohol concentrations that is performed as a Standard Calibration Check Procedure by a Quality Assurance Specialist at least every 31 days or performed as Concurrent Calibration Check Procedures by an Operator within a successfully completed test sequence bracketing a duplicate breath test.

6. “Concurrent Calibration Check Procedure” means an operation performed by an Operator, utilizing a standard alcohol concentration solution, within a successfully completed test sequence to determine whether a device is accurately measuring alcohol concentration during a duplicate breath test.

7. “Concurrent Quality Assurance Procedure” means operations performed by an Operator, including a Concurrent Calibration Check Procedure and diagnostic checks, within a successfully completed test sequence to determine whether a device is accurately and properly measuring alcohol concentration during a duplicate breath test.

8. “Deprivation period” means at least a 15-minute period immediately prior to a duplicate breath test during which period the subject has not ingested any alcoholic beverages or other fluids, eaten, vomited, smoked or placed any foreign object in the mouth.

9. “Determination” means an analysis of a specimen of blood, breath, or other bodily substance and expressing the results of the analysis in terms of alcohol concentration.

10. “Device” means a breath testing instrument.

11. “Duplicate breath test” means two consecutive breath tests that immediately follow a deprivation period, agree within 0.020 AC of each other, and are conducted at least five and no more than 10 minutes apart.

12. “Instructor” means a person approved by the Department to provide breath test training to prospective Operators and Quality Assurance Specialists on a specific approved device.

13. “Method” means an analytical technique utilized by an analyst or a device to make an alcohol concentration determination (e.g. gas chromatography, infrared spectrophotometry, or specific fuel cell detection.)

14. “Operator” means a person who has been issued an Operator permit from the Department to operate a specific approved device for the purpose of determining an alcohol concentration from a specimen of breath and to perform the Concurrent Quality Assurance Procedures, Concurrent Calibration Check Procedures, and diagnostic checks to determine whether a device is operating accurately and properly.

15. “Operator Permit” means a document issued by the Department indicating that the permit holder has been found qualified to operate and perform the associated Quality Assurance Procedures on a specific approved device.

16. “Periodic Maintenance” means a Quality Assurance Procedure consisting of either of the following, which determines whether a device is operating accurately and properly:
   a. Standard Calibration Check Procedure and Standard Quality Assurance Procedure, or
   b. Concurrent Calibration Check Procedures and Concurrent Quality Assurance Procedures performed within a successfully completed test sequence bracketing a duplicate breath test.

17. “Preliminary breath test” means a pre-arrest breath test.

18. “Preliminary breath tester” or “PBT” means any approved device used prior to an arrest for the purpose of obtaining a determination of alcohol concentration from a specimen of breath and includes any device included on Table 1 of the National Highway Traffic Safety Administration’s Conforming Products List of Evidential Breath Measurement Devices as incorporated by reference in R13-10-103(F).

19. “Procedure” means a series of operations used by an Operator or a Quality Assurance Specialist when employing an approved device in the determination of alcohol concentration or performing associated quality assurance testing.

20. “Quality Assurance Procedure” means Periodic Maintenance consisting of either of the following, which determines whether a device is operating accurately and properly:
   a. Standard Calibration Check Procedure and Standard Quality Assurance Procedure, or
   b. Concurrent Calibration Check Procedures and Concurrent Quality Assurance Procedures performed within a successfully completed test sequence bracketing a duplicate breath test.

21. “Quality Assurance Specialist” means a person who has been issued a Quality Assurance Specialist permit from the Department to perform the Standard Calibration Check Procedure and the Standard Quality Assurance Procedure to determine the accurate and proper operation of a specific approved device.

22. “Quality Assurance Specialist permit” means a document issued by the Department indicating that the permit holder has been found qualified to perform the Standard Calibration Check Procedure and the Standard Quality Assurance Procedure on a specific approved device.

23. “Standard Calibration Check Procedure” means operations performed by a Quality Assurance Specialist, at least every 31 days, to determine whether a device is accurately measuring alcohol concentration.

24. “Standard Operational Procedure” means operations performed by an Operator for the purpose of determining an alcohol concentration from a specimen of breath.

25. “Standard Quality Assurance Procedure” means operations performed by a Quality Assurance Specialist, at least every 90 days.
Historical Note
New Section made by final rulemaking at 12 A.A.R. 1916, effective 9:00 a.m., May 18, 2006 (Supp. 06-2).

R13-10-102. Analyst Methods: Approval of Additional Methods
A. An analyst shall use one of the following methods to analyze blood or other bodily substances to determine a person’s alcohol concentration:
   1. Gas chromatography, or
   2. Another method that has been approved by the Director under the procedure in subsections (B) and (C).
B. An applicant for an analyst permit may submit, with the permit application, a request that the Director approve a method other than a method approved under subsection (A)(1) or (2).
C. For a method to be approved by the Director, the method’s accuracy and reproducibility shall comply with the following standards:
   1. The test results of samples with a standard alcohol concentration shall agree with the established value within the limits of ± 0.01 grams per 100 milliliters of blood or ±10 percent, whichever is greater.
   2. The accuracy and precision shall be determined on the basis of ten measurements at four alcohol concentrations between 0.020 and 0.350 grams per 100 milliliters of blood, to include at least one value < 0.100 and one value > 0.250.

Historical Note
New Section made by final rulemaking at 12 A.A.R. 1916, effective 9:00 a.m., May 18, 2006 (Supp. 06-2).

R13-10-103. Breath-testing Devices
A. The Director may approve devices used to determine alcohol concentration from breath after the Department successfully tests a typical model of the device for compliance with the standards in subsection (B).
B. A device shall meet the following standards of performance:
   1. Breath specimens tested shall be alveolar in composition.
   2. The device shall be capable of analysis of a solution of known alcohol concentration with an accuracy limit of ± 0.005 grams per 210 liters of breath or ± 5 percent, whichever is greater, and a precision limit of ± 0.0042 grams per 210 liters of breath. The accuracy and precision of the device being evaluated shall be determined on the basis of 10 consecutive measurements at 4 alcohol vapor concentrations that are between 0.020 and 0.350 grams per 210 liters of breath, to include at least one value < 0.100 and one value > 0.250.
   3. The device shall be capable of testing a breath sample that results in alcohol concentrations of less than 0.01 grams per 210 liters of breath when alcohol-free subjects are tested.
C. The Department, upon specific findings that a device, method, or breath test procedure is inaccurate, unreliable, or is an unacceptable test for determining alcohol concentration or that its use has been discontinued in the state, shall disapprove in writing the device being added to subsection (E). The approval shall expire three years after its effective date unless subsection (E) is amended to include the approved device.
D. In addition to devices approved in subsection (E), the Director may approve, in writing, a device and related Standard Operational and Quality Assurance Procedures for use pending the new Conforming Products List being added to subsection (F).
E. The following devices are approved by the Director:

<table>
<thead>
<tr>
<th>Device/Model</th>
<th>Manufacturer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intoximeter Model 5000 with or without Vapor Recirculation and with or without Keyboard</td>
<td>CMI, Inc.</td>
</tr>
<tr>
<td>Intoximeter Model 5000EN</td>
<td>CMI, Inc.</td>
</tr>
<tr>
<td>Intoximeter Model 8000</td>
<td>CMI, Inc.</td>
</tr>
<tr>
<td>RBT AZ (Alco Sensor AZ/RBT AZ)</td>
<td>Intoximeter, Inc.</td>
</tr>
</tbody>
</table>


G. Devices listed in subsection (E) may be used to administer preliminary breath tests.
H. Except when a device is used as a PBT or for other non-evidential testing purposes, an Operator permit and Standard Operational Procedure are required for the operation of devices listed in subsection (E).
I. In addition to the devices approved in subsection (E), the Director may approve, in writing, a device and related Standard Operational and Quality Assurance Procedures after the device has been successfully tested for compliance with the standards in subsection (B) for use prior to and pending the device being added to subsection (E). The approval shall expire three years after its effective date unless subsection (E) is amended to include the approved device.

Historical Note
New Section made by final rulemaking at 12 A.A.R. 1916, effective 9:00 a.m., May 18, 2006 (Supp. 06-2).

R13-10-104. Testing Procedures
A. Law enforcement agencies or individuals acting independently of law enforcement agencies who conduct alcohol concentration determinations by means of devices shall utilize a quality assurance program that is conducted by Quality Assurance Specialists or Operators and generate records of periodic maintenance. This quality assurance program shall include:
   1. Criteria for ensuring the accurate and proper operation of devices by the regular performance of Calibration Checks and Quality Assurance Procedures as referenced in subsections (A)(2) and (A)(3);
   2. Calibration Checks of devices that are performed within 31 days of each other as Standard Calibration Check Procedures or during a test sequence bracketing a duplicate breath test as Concurrent Calibration Check Procedures and recorded according to the requirements of the appropriate Quality Assurance Procedures set forth in Exhibits E-2, E-3, F-2, F-3, G-2, G-3, G-6 and H-2 or as approved by the Director according to R13-10-103(I). These checks shall indicate that the device is capable of determining the value of a standard alcohol concentration...
The Department shall issue Analyst permits to qualified applicants who hold valid Operator and Quality Assurance Specialist permits and who qualify as an Instructor under R13-10-106(A) or (E). This permit authorizes the holder to perform Quality Assurance Procedures, including Standard Calibration Check Procedures and Standard Quality Assurance Procedures, on the device specified on the permit. Quality Assurance Specialist permits issued after the initial effective date of this Section shall remain in effect and be valid for five years from the initial effective date of this Section.

3. Operator and Quality Assurance Specialist permits may be renewed by application as required by R13-10-107 and successful completion of a recertification course approved by the Department.

4. The Department shall issue duplicate (replacement) permits upon request and upon verification of the qualifications set forth in R13-10-106.

D. Law enforcement agencies shall supply the Department, upon request, with a list of current Operator and Quality Assurance Specialist permit holders and shall update the list as required by the Department, but no more frequently than annually.

E. The Department shall issue Instructor certificates to qualified applicants who hold valid Operator and Quality Assurance Specialist permits and who qualify as an Instructor under R13-10-106(D) or (E). The Instructor certificate authorizes the holder to provide breath test training to prospective Operators and Quality Assurance Specialists on a specific approved device. Instructor certificates issued after the initial effective date of this Section shall remain in effect and be valid for five years from the initial effective date of this Section.

**Historical Note**
New Section made by final rulemaking at 12 A.A.R. 1916, effective 9:00 a.m., May 18, 2006 (Supp. 06-2).

**R13-10-105. Permits and Certificates**

A. The Department shall issue Analyst permits to qualified applicants, in accordance with R13-10-106(A), who have satisfactorily demonstrated through proficiency testing as specified in R13-10-108(A) their proficiency in conducting an alcohol concentration determination by one or more of the methods listed in R13-10-102. The Analyst permit shall:

1. State the method of alcohol concentration determination the permit holder is approved to utilize and the type of specimen the permit holder is approved to analyze (blood or other bodily substances); and

2. Be valid for one year.

B. An Analyst shall employ, in testing for alcohol concentration in matters arising under A.R.S. Title 28, Chapter 4, Article 3, the same analytical procedures as those employed by the analyst for proficiency testing.

C. The Department shall issue two categories of device permits.

1. Operator permits shall be issued to applicants who qualify under R13-10-106(B) or (E). This permit authorizes operation and performance of associated Quality Assurance Procedures, including Concurrent Calibration Check Procedures and Concurrent Quality Assurance Procedures, performed within a successfully completed test sequence bracketing a duplicate breath test on the device specified on the permit. Operator permits issued after the initial effective date of this Section shall remain in effect and be valid for five years after the initial effective date of this Section.

2. Quality Assurance Specialist permits shall be issued to applicants who hold a valid Operator permit and who qualify as a Quality Assurance Specialist under R13-10-106(C) or (E). This Quality Assurance Specialist permit authorizes the holder to perform Quality Assurance Procedures, including Standard Calibration Check Procedures and Standard Quality Assurance Procedures, on the device specified on the permit. Quality Assurance Specialist permits issued after the initial effective date of this Section shall remain valid for five years from the date of issue. Permits issued to Quality Assurance Specialists before the initial effective date of this Section shall remain in effect and be valid for five years after the initial effective date of this Section.

3. Operator and Quality Assurance Specialist permits may be renewed by application as required by R13-10-107 and successful completion of a recertification course approved by the Department.

4. The Department shall issue duplicate (replacement) permits upon request and upon verification of the qualifications set forth in R13-10-106.

**Historical Note**
New Section made by final rulemaking at 12 A.A.R. 1916, effective 9:00 a.m., May 18, 2006 (Supp. 06-2).

**R13-10-106. Qualifications**

A. To qualify for an Analyst permit, a person shall hold a degree from a college or university accredited by a regional accrediting body recognized by the United States Department of Education and have earned 15 or more semester credits, or the equivalent, of chemistry, including three or more credits in organic chemistry.

B. To qualify for an Operator permit, a person shall:

1. Be employed by a law enforcement agency or laboratory that has access to a device for the person’s use as set forth in R13-10-103; and

2. Complete a course in the determination of alcohol concentration approved by the Department with a score of 80 percent or better. The Department shall approve courses taught by an Instructor if they contain the following:

   a. Instruction on the effects of alcohol on the human body;

   b. Instruction on and demonstration of the operational principles of the selected device, which shall include a functional description and detailed operational description of the method;
To qualify for a Quality Assurance Specialist permit, a person shall possess a valid Operator permit to operate the approved device and complete a course of training approved by the Department with a score of 80 percent or better. The Department shall approve courses taught by an Instructor if they contain the following:

1. Review of the theory of breath testing and the operation of the particular testing device;
2. Standard Calibration Check Procedures approved by the Department;
3. Standard Quality Assurance Procedures approved by the Department;
4. Applicant participation with the appropriate device utilizing reference standards, testing of subjects, or other methods that will indicate the actual response of the device; and
5. Written and practical examination of the applicant for the purpose of determining the person’s understanding of the course material and proficiency in operating the device.

To qualify as an Instructor, a person shall hold valid Operator and Quality Assurance Specialist permits on the device for which instruction is given. In addition, except as provided in subsection (E), all applicants shall complete a comprehensive instructor examination approved and administered by the Department with a score of 90 percent or better. The Department shall approve instructor examinations that include the following:

1. The theory of breath testing and the operation of the specific device, and
2. Procedures for testing instrument accuracy and proper operation in accordance with Calibration Checks and Quality Assurance Procedures approved by the Department.

If a device is newly approved and no Operator and Quality Assurance Specialist permits have been issued for the device, a person may qualify to be an Operator, Quality Assurance Specialist, and Instructor for the specific device by completing a Department-administered, manufacturer-endorsed, instructor training course and a comprehensive examination with a score of 90 percent or better. The Instructor training course shall include the following:

1. Review of the theory of breath testing,
2. Instruction on the operation of the device, and
3. Procedures for testing instrument accuracy and proper operation in accordance with Calibration Checks and Quality Assurance Procedures approved by the Department.

Historical Note
New Section made by final rulemaking at 12 A.A.R. 1916, effective 9:00 a.m., May 18, 2006 (Supp. 06-2).

R13-107. Application Processes
A. An applicant for an initial Analyst permit or the renewal of an existing Analyst permit shall complete the form shown as Exhibit A and submit it to the Department. An application for renewal of an Analyst permit shall be submitted no later than 30 days prior to the date the current permit expires. If the applicant makes a written or verbal request and shows good cause, the Department shall extend this deadline.

B. An applicant for an initial Operator permit or the renewal of an existing Operator permit shall complete the form shown as Exhibit B and submitted to the Department. An application for renewal of an Operator permit shall be submitted no later than 30 days prior to the date the current permit expires. If the applicant makes a written or verbal request and shows good cause, the Department shall extend this deadline.

C. An applicant for an initial Quality Assurance Specialist permit or the renewal of an existing Quality Assurance Specialist permit shall complete the form shown as Exhibit C and submitted to the Department. An application for renewal of a Quality Assurance Specialist permit shall be submitted no later than 30 days prior to the date the current permit expires. If the applicant makes a written or verbal request and shows good cause, the Department shall extend this deadline.

D. An applicant for an initial Instructor approval or the renewal of an existing Instructor approval shall complete the form shown as Exhibit D and submitted to the Department. An application for renewal of an Instructor shall be submitted no later than 30 days prior to the date the current certificate expires. If the applicant makes a written or verbal request and shows good cause, the Department shall extend this deadline.

Historical Note
New Section made by final rulemaking at 12 A.A.R. 1916, effective 9:00 a.m., May 18, 2006 (Supp. 06-2).

R13-108. Examination and Quality Assurance Requirements for Analysts
A. The Department shall require an Analyst permit applicant to successfully demonstrate the applicant’s proficiency in making alcohol concentration determinations from test specimens in accordance with subsection (B). The applicant shall be examined only on the methods that relate to the type of determination for which the applicant desires a permit.

B. An applicant shall, before receiving an initial Analyst permit or renewal of an existing Analyst permit, participate in and successfully complete proficiency testing administered by the Department. An applicant shall successfully analyze samples by testing at least three suitable reference standards or control samples with a known alcohol concentration in the range of 0.00 to 0.40 grams per 100 milliliters of blood and having the results agree with the established value within the limits of ± 0.01 grams per 100 milliliters of blood or ±10 percent, whichever is greater. Proficiency testing shall be administered by the Department as follows:

1. An applicant shall correctly analyze all proficiency samples in the set provided by the Department.
2. When returning the results of analyses to the Department, the applicant shall attach an affidavit attesting that the applicant analyzed the proficiency samples without help or input from any other person.
3. An applicant failing to correctly analyze all proficiency samples in the set will be provided an opportunity to successfully analyze a second set of samples.
4. The Department shall deny the application of an applicant who declines or fails to correctly analyze the second set of proficiency samples and shall not issue a permit.
5. An applicant who fails to successfully analyze the second set of proficiency samples and whose application is denied may reapply for an analyst’s permit beginning 90 days from the date of denial.

C. An analyst who conducts alcohol concentration determinations shall implement and maintain a quality assurance program. This program shall be designed to ensure the validity of test results by providing for:
   1. Chain of custody,
   2. Quality control,
   3. Analytical procedures,
   4. Documentation of test results, and
   5. Participation in proficiency testing.

Historical Note
New Section made by final rulemaking at 12 A.A.R. 1916, effective 9:00 a.m., May 18, 2006 (Supp. 06-2).

R13-10-109. Revocation or Suspension of Permits; Appeals
A. The Department may suspend or revoke a permit for any of the following reasons:
   1. A false statement on the permit holder’s application,
   2. The neglect or refusal to examine and report the results of sample specimens given the Analyst permit holder for proficiency testing purposes,
   3. The failure of an Analyst to maintain quality control over equipment or reagents necessary for accuracy in reporting,
   4. Failure to obtain results on proficiency test samples as indicated in R13-10-108(B),
   5. Failure to operate a device according to approved procedures or the failure to analyze blood or other bodily substances according to approved methods, or
   6. The failure by a permit holder to maintain documentation required by this Article or to make it available to Departmental representatives for inspection for purposes of administering this Article.

B. When a permit has been suspended or revoked in one or more of the approved methods or devices and there remain one or more methods or devices for which the permittee is approved that are not affected by the revocation or suspension, the permit holder shall return the suspended or revoked permit to the Department. The Department shall issue a replacement permit that shows only those approved methods or devices unaffected by the event leading to the suspension or revocation.

C. The provisions of A.R.S. Title 41, Chapter 6, Article 10 are applicable to denials, revocations, suspensions and administrative appeals.

Historical Note
New Section made by final rulemaking at 12 A.A.R. 1916, effective 9:00 a.m., May 18, 2006 (Supp. 06-2).
Exhibit A.  Application for Blood Alcohol Analyst Permit

APPLICATION FOR BLOOD ALCOHOL ANALYST PERMIT

ARIZONA DEPARTMENT OF PUBLIC SAFETY

Scientific Analysis Bureau
2102 W Encanto Blvd
Phoenix, Arizona 85009
(602) 223-2394

Application for Analyst permit to perform analysis of blood or other bodily substances for alcohol concentration determinations.

TO BE COMPLETED BY APPLICANT - PLEASE PRINT CLEARLY
(ALL ITEMS MUST BE COMPLETED OR APPLICATION WILL NOT BE ACCEPTED)

IS THIS APPLICATION FOR? INITIAL PERMIT _____ RENEWAL ____ PERMIT NUMBER ______________

1. Name: ______________________________________________________________________________________________________
   (Full legal name)
   (Last) (First) (Middle) (Maiden)

   Name: ______________________________________________________________________________________________________
   (As you would like it to appear on permit) (Last) (First) (Middle - optional)

2. Date of Birth: ________________________________________________________________________________________________
   (Month) (Day) (Year)

3. Employer: ___________________________________________________________________________________________________
   (Name)
   ____________________________________________________________________________________________________
   (Address)
   ____________________________________________________________________________________________________
   (Phone) (Fax)

4. Email address:______________________________________________________________________________________________

5. Education: I have earned a degree from an accredited college or university with 15 or more semester credits or the equivalent of college chemistry, including at least 3 credits in organic chemistry. Yes _____ No _____
   College(s) attended ___________________________________________________________________________________________
   (City & State) (Year Graduated) (Degree)
   ___________________________________________________________________________________________
   (City & State) (Year Graduated) (Degree)

6. Check the analytical method(s) for which you require an Analyst permit:
   Gas Chromatography ______________  Other: _____________________________________________________________________

I hereby certify that the information submitted in this application is true and correct.

____________________________________________________________________________________________________
(Signature of Applicant) (Date)

DPS Form Exh A (Rev 05-1)

Historical Note
New Exhibit A made by final rulemaking at 12 A.A.R. 1916, effective 9:00 a.m., May 18, 2006 (Supp. 06-2).
Exhibit B. Application for Breath Alcohol Operator Permit

APPLICATION FOR BREATH ALCOHOL OPERATOR PERMIT

ARIZONA DEPARTMENT OF PUBLIC SAFETY

Scientific Analysis Bureau
2102 W Encanto Blvd
Phoenix, Arizona 85009
(602) 223-2394

Application for an Operator permit to perform alcohol concentration determinations and associated quality assurance procedures on an approved device.

TO BE COMPLETED BY APPLICANT - PLEASE PRINT CLEARLY

(ALL ITEMS MUST BE COMPLETED OR APPLICATION WILL NOT BE ACCEPTED)

IS THIS APPLICATION FOR? INITIAL PERMIT _____ RENEWAL _____

DO YOU HAVE AN OPERATOR PERMIT(S)? YES _____ NO _____

OPERATOR DEVICE(S) / PERMIT NUMBER(S) ___________________________________________________________

1. Name: ______________________________________________________________________________________________________
   (Full Legal Name) (Last) (First) (Middle) (Maiden)
   Name: ______________________________________________________________________________________________________
   (As you want it to appear on permit) (Last) (First) (Middle – optional)

2. Employer: ___________________________________________________________________________________________________
   (Name)
   ____________________________________________________________________________________________________
   (Address)
   ____________________________________________________________________________________________________
   (Phone) (Fax)

3. Email address: __________________________________________________________

4. Operator permit requested for what device(s): __________________________________________________________

I hereby certify that the information submitted in this application is true and correct.

______________________________ ______________________________ __________
(Signature of Applicant) Badge # (Date)

* * * * * * * * * * * * * * * * * * *

TO BE COMPLETED BY INSTRUCTOR

1. Agency Conducting Training: __________________________________________________________

2. Date and Location of Training: __________________________________________________________
   (Date) (Location)

3. Arizona Department of Public Safety course approval number: ___________________________

4. Did applicant successfully complete the course? Pass _____ Fail _____
   ______________________________ ____________________________________________
   (Signature of Instructor) (Print Name) (Date)

DPS Form Exh B (Rev 05-1)

Historical Note

New Exhibit B made by final rulemaking at 12 A.A.R. 1916, effective 9:00 a.m., May 18, 2006 (Supp. 06-2).
Exhibit C. Application for Breath Alcohol Quality Assurance Specialist Permit

APPLICATION FOR BREATH ALCOHOL QUALITY ASSURANCE SPECIALIST PERMIT  
ARIZONA DEPARTMENT OF PUBLIC SAFETY  
Scientific Analysis Bureau  
2102 W Encanto Blvd  
Phoenix, Arizona 85009  
(602) 223-2394  

Application for a QAS permit to perform quality assurance procedures on an approved device.

TO BE COMPLETED BY APPLICANT - PLEASE PRINT CLEARLY  
(ALL ITEMS MUST BE COMPLETED OR APPLICATION WILL NOT BE ACCEPTED)

IS THIS APPLICATION FOR? INITIAL PERMIT _____ RENEWAL _____

DO YOU HAVE AN OPERATOR PERMIT(S)? YES _____ NO _____

OPERATOR DEVICE(S) / PERMIT NUMBER(S) ________________________________

1. Name: ______________________________________________________________________________________________________
   (Full Legal Name)
   (Last) (First) (Middle) (Maiden)
   Name: ______________________________________________________________________________________________________
   (As you want it to appear on permit)
   (Last) (First) (Middle – optional)

2. Employer: ___________________________________________________________________________________________________
   (Name)
   ______________________________________________________________________________________________________________
   (Address)
   ______________________________________________________________________________________________________________
   (Phone) (Fax)

3. Email address: ______________________________

4. QAS permit requested for what device(s): __________________________________________

   I hereby certify that the information submitted in this application is true and correct.

   ______________________________
   (Signature of Applicant) Badge # (Date)

   * * * * * * * * * * * * * * * * * * *

   TO BE COMPLETED BY INSTRUCTOR

1. Agency Conducting Training: __________________________________________

2. Date and Location of Training: ______________________________
   (Date) (Location)

3. Arizona Department of Public Safety course approval number: ____________

4. Did applicant successfully complete the course? Pass _____ Fail _____

   ______________________________
   (Signature of Instructor) (Print Name) (Date)

DPS Form Exh C (Rev 05-1)

Historical Note
  New Exhibit C made by final rulemaking at 12 A.A.R. 1916, effective 9:00 a.m., May 18, 2006 (Supp. 06-2).
Exhibit D. Application for Breath Testing Instructor

APPLICATION FOR BREATH TESTING INSTRUCTOR
ARIZONA DEPARTMENT OF PUBLIC SAFETY

Scientific Analysis Bureau
2102 W Encanto Blvd
Phoenix, Arizona 85009
(602) 223-2394

Application for an Instructor certificate to provide Operator and QAS training on an approved device.

TO BE COMPLETED BY APPLICANT - PLEASE PRINT CLEARLY

(ALL ITEMS MUST BE COMPLETED OR APPLICATION WILL NOT BE ACCEPTED)

IS THIS APPLICATION FOR? INITIAL APPROVAL _____ RENEWAL _____

DO YOU HAVE AN OPERATOR PERMIT(S)? YES _____ NO _____

OPERATOR DEVICE(S) / PERMIT NUMBER(S)? _______________________________________________________________________

DO YOU HAVE QAS PERMIT(S)? YES _____ NO _____

QAS DEVICE(S) / PERMIT NUMBER(S) _______________________________________________________________________

1. Name: ______________________________________________________________________________________________________

   (Full Legal Name) (Last) (First) (Middle) (Maiden)

   Name: ______________________________________________________________________________________________________

   (As you want it to appear on certificate) (Last) (First) (Middle-optinal)

2. Employer: ___________________________________________________________________________________________________

   (Name)

   _______________________________________________________________________________________________________________

   (Address)

   _______________________________________________________________________________________________________________

   (Phone) (Fax)

3. Email address: ____________________________________________

4. Instructor certificate requested for what device: __________________________

I hereby certify that the information submitted in this application is true and correct.

______________________________________________________________________________

   (Signature of Applicant) (Date)

* * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * *

TO BE COMPLETED BY REGULATOR

1. Arizona Department of Public Safety examination approval number: ____________________________________________

2. Did applicant successfully attain Instructor approval? Pass _____ Fail _____

______________________________________________________________________________

   (Signature of Regulator) (Print Name) (Date)

DPS Form Exh D (Rev 05-1)

Historical Note

New Exhibit D made by final rulemaking at 12 A.A.R. 1916, effective 9:00 a.m., May 18, 2006 (Supp. 06-2).
Exhibit E-1. Expired

Historical Note
New Exhibit E-1 made by final rulemaking at 12 A.A.R. 1916, effective 9:00 a.m., May 18, 2006 (Supp. 06-2).
Exhibit E-1 expired under A.R.S. § 41-1056(J) at 22 A.A.R. 2054, effective May 31, 2016 (Supp. 16-3).

Exhibit E-2. Expired

Historical Note
New Exhibit E-2 made by final rulemaking at 12 A.A.R. 1916, effective 9:00 a.m., May 18, 2006 (Supp. 06-2).
Exhibit E-2 expired under A.R.S. § 41-1056(J) at 22 A.A.R. 2054, effective May 31, 2016 (Supp. 16-3).

Exhibit E-3. Expired

Historical Note
New Exhibit E-3 made by final rulemaking at 12 A.A.R. 1916, effective 9:00 a.m., May 18, 2006 (Supp. 06-2).
Exhibit E-3 expired under A.R.S. § 41-1056(J) at 22 A.A.R. 2054, effective May 31, 2016 (Supp. 16-3).

Exhibit E-4. Expired

Historical Note
New Exhibit E-4 made by final rulemaking at 12 A.A.R. 1916, effective 9:00 a.m., May 18, 2006 (Supp. 06-2).
Exhibit E-4 expired under A.R.S. § 41-1056(J) at 22 A.A.R. 2054, effective May 31, 2016 (Supp. 16-3).

Exhibit E-5. Expired

Historical Note
New Exhibit E-5 made by final rulemaking at 12 A.A.R. 1916, effective 9:00 a.m., May 18, 2006 (Supp. 06-2).
Exhibit E-5 expired under A.R.S. § 41-1056(J) at 22 A.A.R. 2054, effective May 31, 2016 (Supp. 16-3).

Exhibit E-6. Expired

Historical Note
New Exhibit E-6 made by final rulemaking at 12 A.A.R. 1916, effective 9:00 a.m., May 18, 2006 (Supp. 06-2).
Exhibit E-6 expired under A.R.S. § 41-1056(J) at 22 A.A.R. 2054, effective May 31, 2016 (Supp. 16-3).

Exhibit F-1. Expired

Historical Note
New Exhibit F-1 made by final rulemaking at 12 A.A.R. 1916, effective 9:00 a.m., May 18, 2006 (Supp. 06-2).
Exhibit F-1 expired under A.R.S. § 41-1056(J) at 22 A.A.R. 2054, effective May 31, 2016 (Supp. 16-3).

Exhibit F-2. Expired

Historical Note
New Exhibit F-2 made by final rulemaking at 12 A.A.R. 1916, effective 9:00 a.m., May 18, 2006 (Supp. 06-2).
Exhibit F-2 expired under A.R.S. § 41-1056(J) at 22 A.A.R. 2054, effective May 31, 2016 (Supp. 16-3).

Exhibit F-3. Expired

Historical Note
New Exhibit F-3 made by final rulemaking at 12 A.A.R. 1916, effective 9:00 a.m., May 18, 2006 (Supp. 06-2).
Exhibit F-3 expired under A.R.S. § 41-1056(J) at 22 A.A.R. 2054, effective May 31, 2016 (Supp. 16-3).

Exhibit F-4. Expired

Historical Note
New Exhibit F-4 made by final rulemaking at 12 A.A.R. 1916, effective 9:00 a.m., May 18, 2006 (Supp. 06-2).
Exhibit F-4 expired under A.R.S. § 41-1056(J) at 22 A.A.R. 2054, effective May 31, 2016 (Supp. 16-3).

Exhibit F-5. Expired

Historical Note
New Exhibit F-5 made by final rulemaking at 12 A.A.R. 1916, effective 9:00 a.m., May 18, 2006 (Supp. 06-2).
Exhibit F-5 expired under A.R.S. § 41-1056(J) at 22 A.A.R. 2054, effective May 31, 2016 (Supp. 16-3).
Exhibit G-1. Standard Operational Procedure, Intoxilyzer Model 8000

OPERATIONAL CHECKLIST

ARIZONA DEPARTMENT OF PUBLIC SAFETY
STANDARD OPERATIONAL PROCEDURE
INTOXILYZER MODEL 8000
DUPLICATE BREATH TEST

SUBJECT NAME __________________________________________ DATE __________________________

AGENCY ___________________________________ OPERATOR ______________________________________

INSTRUMENT SERIAL # __________________________ LOCATION ______________________________________

TEST RESULTS

0. _______________ AC TIME _______________ 
0. _______________ AC TIME _______________ 
0. _______________ AC TIME _______________

Immediately preceding administration of the tests, subject underwent at least a 15-minute deprivation period:

From _______________ to _______________ by __________________________________________

(Time) (Time) (Name)

( ) 1. Display reads “PUSH BUTTON TO START”.
( ) 2. Push Start Test button.
( ) 3. Follow automated instructions on instrument display.
( ) 4. If test record reads “Successfully Completed Test Sequence” go to step 5
   OR
   If test record reads “Not a Successfully Completed Test Sequence”, and subject will be tested again, remove test record and go to
   step 1
   OR
   If test record reads “Not a Successfully Completed Test Sequence”, and subject will not be tested again, go to
   step 5
( ) 5. Remove test record.

Note: Duplicate breath tests shall be administered at intervals of not less than 5 minutes nor more than 10 minutes apart and the two
consecutive tests shall agree within 0.020 alcohol concentration.

DPS Form Exh G-1 (Rev 05-1)

Historical Note
New Exhibit G-1 made by final rulemaking at 12 A.A.R. 1916, effective 9:00 a.m., May 18, 2006 (Supp. 06-2).
Exhibit G-2. Standard Calibration Check Procedure, Intoxilyzer Model 8000

THIS REPORT PREPARED PURSUANT TO DUTY IMPOSED BY A.A.C. R13-10-104(A)

ARIZONA DEPARTMENT OF PUBLIC SAFETY
STANDARD QUALITY ASSURANCE PROCEDURES
INTOXILYZER MODEL 8000
STANDARD CALIBRATION CHECK PROCEDURE

QA SPECIALIST ____________________________________________ AGENCY __________________________________________
DATE ______________________________________________ TIME ______________________________________________________
INTOXILYZER SERIAL # ___________________________ LOCATION _________________________________________________

( ) 1. Ensure that gas tank is attached to instrument and contains a standard alcohol concentration solution _______ AC.
    OR
    Pour a standard alcohol concentration solution _______ AC, into a clean dry simulator and assemble the simulator. Ensure
    that a tight seal has been made. Turn on the simulator and allow temperature to reach 34° C ± 0.2° C
( ) 2. Intoxilyzer 8000 display reads “PUSH BUTTON TO START”
( ) 3. Go to the “Control Testing Menu”. Select “D” for dry control test or “W” for wet control test. After selection is made press
    ENTER.
( ) 4. Air blank completed.
( ) 5. Calibration check completed. Test results 0._____________ AC.
( ) 6. Air blank completed.
( ) 7. Remove printed record. Attach the record to the completed checklist.

SIGNATURE ____________________________________________________________________________________________________

DPS Form Exh G-2 (Rev 05-01)

Historical Note
New Exhibit G-2 made by final rulemaking at 12 A.A.R. 1916, effective 9:00 a.m., May 18, 2006 (Supp. 06-2).
Exhibit G-3. Standard Calibration Check Procedure Intoxilyzer, Model 8000 (Option P)

THIS REPORT PREPARED PURSUANT TO DUTY IMPOSED BY A.A.C. R13-10-104(A)

ARIZONA DEPARTMENT OF PUBLIC SAFETY
STANDARD QUALITY ASSURANCE PROCEDURES
INTOXILYZER MODEL 8000
STANDARD CALIBRATION CHECK PROCEDURE
(OPTION P)

1. a. Ensure dry gas tank is attached to instrument and contains a standard alcohol concentration solution alcohol standard.

   OR

   b. Pour a standard alcohol concentration solution into a clean dry simulator and assemble the simulator.

      Ensure that a tight seal has been made. Turn on the simulator and allow temperature to reach 34°C ± 0.2°C

2. Intoxilyzer 8000 display reads “PUSH BUTTON TO START”

3. Go to the “Control Testing Menu”. Select “D” for dry control test or “W” for wet control test. After selection is made press ENTER.

4. Air blank completed.

5. Standard Calibration Check completed.

6. Air blank completed.

DPS Form Exh G-3 (Rev 05-01)

Historical Note
New Exhibit G-3 made by final rulemaking at 12 A.A.R. 1916, effective 9:00 a.m., May 18, 2006 (Supp. 06-2).
Exhibit G-4. Standard Quality Assurance Procedure Intoxilyzer, Model 8000

THIS REPORT PREPARED PURSUANT TO DUTY IMPOSED BY A.A.C. R13-10-104(A)

ARIZONA DEPARTMENT OF PUBLIC SAFETY

STANDARD QUALITY ASSURANCE PROCEDURES

INTOXILYZER MODEL 8000

STANDARD QUALITY ASSURANCE PROCEDURE

QA SPECIALIST ____________________________ AGENCY ____________________________

DATE ____________________________ TIME ____________________________

INTOXILYZER SERIAL # ____________________________ LOCATION ____________________________

( ) 1. Display Reads “PUSH BUTTON TO START”

DIAGNOSTIC TESTS

( ) 1. Clock time check.

( ) 2. Date check.

OPERATIONAL TESTS

( ) 1. Alcohol-free subject test result 0.__________ AC.

( ) 2. Error recognition logic system functioning.

Not a Successfully Completed Test Sequence printed

( ) 3. Proper sample recognition system.

Not a Successfully Completed Test Sequence printed

Deficient sample printed.

( ) 4. Standard Calibration Check standard 0.__________ AC. Result 0.__________ AC.

Instrument is operating properly and accurately. YES ______ NO ______

COMMENTS ____________________________________________________________________________________________________

_______________________________________________________________________________________________________________

_______________________________________________________________________________________________________________

_______________________________________________________________________________________________________________

SIGNATURE ____________________________________________________________________________________________________

DPS Form Exh G-4 (Rev 05-01)

Historical Note

New Exhibit G-4 made by final rulemaking at 12 A.A.R. 1916, effective 9:00 a.m., May 18, 2006 (Supp. 06-2).
Exhibit G-5. Standard Quality Assurance Procedure Intoxilyze, Model 8000 (Option P)

THIS REPORT PREPARED PURSUANT TO DUTY IMPOSED BY A.A.C. R13-10-104(A)
ARIZONA DEPARTMENT OF PUBLIC SAFETY

STANDARD QUALITY ASSURANCE PROCEDURES
INTOXILYZER MODEL 8000

STANDARD QUALITY ASSURANCE PROCEDURE
(OPTION P)

Display Reads “Push Button to Start”

DIAGNOSTIC TESTS
1. Clock time check.
2. Date check.

OPERATIONAL TESTS
1. Alcohol-free subject test result.
2. Error recognition logic system functioning.
   Not a Successfully Completed Test Sequence printed or recorded.
3. Proper sample recognition system.
   Not a Successfully Completed Test Sequence printed or recorded.
   Deficient sample printed or recorded.

DPS Form Exh G-5 (Rev 05-01)

Historical Note
New Exhibit G-5 made by final rulemaking at 12 A.A.R. 1916, effective 9:00 a.m., May 18, 2006 (Supp. 06-2).
**Exhibit G-6. Standard Operational and Quality Assurance Procedure, Intoxilyzer Model 8000**

THIS REPORT PREPARED PURSUANT TO DUTY IMPOSED BY A.A.C. R13-10-104(A)

ARIZONA DEPARTMENT OF PUBLIC SAFETY

STANDARD OPERATIONAL AND QUALITY ASSURANCE PROCEDURES INTOXILYZER MODEL 8000

DUPLICATE BREATH TEST WITH CONCURRENT QUALITY ASSURANCE PROCEDURES

<table>
<thead>
<tr>
<th>SUBJECT NAME</th>
<th>DATE</th>
</tr>
</thead>
</table>

<table>
<thead>
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<th>AGENCY</th>
<th>OPERATOR</th>
</tr>
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<table>
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<tr>
<th>INSTRUMENT SERIAL #</th>
<th>LOCATION</th>
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</thead>
</table>

<table>
<thead>
<tr>
<th>SUBJECT TESTS</th>
<th>DIAGNOSTIC CHECKS</th>
<th>CALIBRATION CHECKS</th>
</tr>
</thead>
<tbody>
<tr>
<td>0. ____________ AC TIME ___________</td>
<td>PASS</td>
<td>FAIL</td>
</tr>
<tr>
<td>0. ____________ AC TIME ___________</td>
<td>PASS</td>
<td>FAIL</td>
</tr>
<tr>
<td>0. ____________ AC TIME ___________</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Immediately preceding administration of the tests, subject underwent at least a 15-minute deprivation period:

From ___________________ to ____________________    by _________________________________________________________

(     )  1. Display reads “PUSH BUTTON TO START”.
(     )  2. Push Start Test button.
(     )  3. Follow automated instructions on instrument display.
(     )  4. If test record reads “Successfully Completed Test Sequence” go to step 5

**OR**

If test record reads “Not a Successfully Completed Test Sequence”, and subject will be tested again, remove test record and go to step 1

**OR**

If test record reads “Not a Successfully Completed Test Sequence”, and subject will not be tested again, go to step 5

(     )  5. Remove test record.

Note: A successfully completed test sequence includes the following:
- At least a 15-minute deprivation period.
- Successful concurrent diagnostic checks
- Successful Concurrent Calibration Check Procedures bracketing the duplicate breath test
- Duplicate breath test administered at intervals of not less than 5 minutes nor more than 10 minutes apart and the two consecutive tests agreeing within 0.020 alcohol concentration.

DPS Form Exh G-6 (Rev 05-01)

**Historical Note**

New Exhibit G-6 made by final rulemaking at 12 A.A.R. 1916, effective 9:00 a.m., May 18, 2006 (Supp. 06-2).
Exhibit H-1. Standard Operational Procedure Alco Sensor RBT AZ

OPERATIONAL CHECKLIST

ARIZONA DEPARTMENT OF PUBLIC SAFETY

STANDARD OPERATIONAL PROCEDURE

ALCO SENSOR RBT AZ

DUPLICATE BREATH TEST

SUBJECT NAME ________________________________ DATE ________________________

AGENCY ____________________________ OPERATOR ______________________________

LOCATION _____________________________________________________________________________________________________

RBT AZ SERIAL # _______________________________ ALCO SENSOR AZ SERIAL # _______________________________

TEST RESULTS 0. ________________ AC TIME ______________
0. ________________ AC TIME ______________
0. ________________ AC TIME ______________

Immediately preceding administration of the tests, subject underwent at least a 15-minute deprivation period:

From ___________________ to ____________________    by _________________________________________________________

1. Depress RBT AZ ON button.
2. Depress zero set button, select subject or quick test.
3. Follow RBT AZ and AS AZ display instructions.
4. Enter case # &/or DL # if required.
5. Device temperature registers between 10° C and 40° C.
6. a. If quick test, go to step 7.
   b. If subject test, repeat steps 3 – 6 for duplicate test.
   c. If the second subject test is not within 0.020 of the first test, repeat steps 3-6.
   d. If the second subject test is within 0.020 of the first test, go to step 7.
   e. If the third subject test, go to step 7.
7. Remove test record when printout is complete.
8. Turn off RBT AZ.

Note: Duplicate breath tests shall be administered at intervals of not less than 5 nor more than 10 minutes and the two consecutive tests shall agree within 0.020 alcohol concentration.

DPS Form Exh H-1 (Rev 05-01)

Historical Note
New Exhibit H-1 made by final rulemaking at 12 A.A.R. 1916, effective 9:00 a.m., May 18, 2006 (Supp. 06-2).
Exhibit H-2. Standard Calibration Check Procedure Alco Sensor RBT AZ

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Have a standard alcohol concentration solution ready. This may be a simulator (at 34° C ± 0.2° C) or a dry gas alcohol standard. Standard value: 0.__________ AC.</td>
</tr>
</tbody>
</table>
| 2. | Depress RBT AZ ON button.  
Depress Time button.  
Enter PIN #.  
Depress zero button. |
| 3. | Follow RBT AZ and AS AZ display instructions. |
| 4. | Device temperature registers between 10° C and 40° C. |
| 5. | When AS AZ display reads “CHEK”, introduce standard for 7 seconds; depress the MANUAL button on the AS AZ at 5 seconds (while continuing to introduce the standard for another 2 seconds.) |
| 6. | Test results 0.__________ AC. |
| 7. | Remove test record when printout is complete. |
| 8. | Turn off RBT AZ. |

**COMMENTS**

__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________

**SIGNATURE**

__________________________________________________________________________________________________

DPS Form Exh H-2 (Rev 05-01)

**Historical Note**

New Exhibit H-2 made by final rulemaking at 12 A.A.R. 1916, effective 9:00 a.m., May 18, 2006 (Supp. 06-2).

THIS REPORT PREPARED PURSUANT TO DUTY IMPOSED BY A.A.C. R13-10-104(A)
ARIZONA DEPARTMENT OF PUBLIC SAFETY
STANDARD QUALITY ASSURANCE PROCEDURES
ALCO SENSOR RBT AZ
STANDARD QUALITY ASSURANCE PROCEDURE

AGENCY _______________________________________________________________ DATE __________________________________
QA SPECIALIST ____________________________________________ LOCATION __________________________________________
RBT AZ SERIAL # _______________________________ ALCO-SENSOR AZ SERIAL # _______________________________

1. Have a standard alcohol concentration solution ready. This may be a simulator (at 34° C ± 0.2° C) or a dry gas alcohol standard. Standard value: 0.___________ AC.

2. Depress RBT AZ ON button. Depress Time button. Enter PIN #. Depress zero button.

3. Follow RBT AZ and AS AZ display instructions.

4. Device temperature registers between 10° C and 40° C.

5. When AS AZ display reads “CHEK”, introduce standard for 7 seconds; depress the MANUAL button on the AS AZ at 5 seconds (while continuing to introduce the standard for another 2 seconds.)

6. Test results 0. ___________ AC.

7. Remove test record when printout is complete.

8. Turn off RBT AZ.

1. Date and time correct.

2. Alcohol-free subject test result 0.______________ AC.

3. Proper sample recognition system.


5. Controls, displays, and printer worked correctly during the above quality assurance procedures.

COMMENTS ____________________________________________________________________________________________________
_______________________________________________________________________________________________________________
_______________________________________________________________________________________________________________
_______________________________________________________________________________________________________________

SIGNATURE ____________________________________________________________________________________________________

DPS Form Exh H-3 (Rev 05-01)

Historical Note
New Exhibit H-3 made by final rulemaking at 12 A.A.R. 1916, effective 9:00 a.m., May 18, 2006 (Supp. 06-2).
Exhibit H-4. Standard Calibration Procedure Alco Sensor RBT AZ

THIS REPORT PREPARED PURSUANT TO DUTY IMPOSED BY A.A.C. R13-10-104(A)
ARIZONA DEPARTMENT OF PUBLIC SAFETY
STANDARD QUALITY ASSURANCE PROCEDURES
ALCO SENSOR RBT AZ
CALIBRATION

AGENCY __________________________ DATE __________________________

QA SPECIALIST __________________________ LOCATION __________________________

RBT AZ SERIAL # __________________________ ALCO-SENSOR AZ SERIAL # __________________________

( ) 1. Have a standard alcohol concentration solution ready.
   This may be a simulator (at 34° C ± 0.2° C) or a dry gas alcohol standard. Standard value: 0._________ AC.

( ) 2. Depress RBT AZ ON button.

( ) 3. Depress Time button, enter PIN #, depress #1 button.

( ) 4. Follow RBT AZ and AS AZ display instructions.

( ) 5. Device temperature registers between 23° C and 27° C.

( ) 6. After a blank reading of 0.000 is displayed and the standard value is displayed, depress F3.

( ) 7. When AS AZ display flashes “CAL”, introduce standard for 7 seconds; depress the MANUAL button on the AS AZ at 5 seconds (while continuing to introduce the standard for another 2 seconds.)

( ) 8. Remove test record when printout is complete.

( ) 9. Run a calibration check on the Standard Calibration Check Procedure.
   Test results: _______________ AC.

COMMENTS ________________________________________________________________________________________________

______________________________________________________________________________________________________________

______________________________________________________________________________________________________________

SIGNATURE __________________________________________________________________________________________________

DPS Form Exh H-4 (Rev 05-01)

Historical Note
New Exhibit H-4 made by final rulemaking at 12 A.A.R. 1916, effective 9:00 a.m., May 18, 2006 (Supp. 06-2).