

Alaska Scientific Crime Detection Laboratory

Change in Instrument Status Form

Issued: 6/11/2014
Effective: 6/11/2014

Version: CIISF 2014 R0
Status: Active

Date: _____ Instrument Serial Number: _____

Instrument Location: _____

Supervisor Name and Agency: _____

Describe the Status Change or Issue with the Instrument:

If instrument was placed in service or removed from service, fill out the appropriate sections below.

In Service Date/Time: _____

Out of Service Date/Time: _____

For Use by SCDL

Additional Notes

Email completed form to dps.scdl.toxicology@alaska.gov

For questions contact the Breath Alcohol Program at 907-269-5740