

**Operator**

**Permit Number 47045**

This is to certify that

**Nyckalis A Ivanoff**

has met the requirements for issuance of this permit for the  
operation of the **Intoxilyzer 8000**

**First Issued: 9/6/2013**

**Issued: 9/6/2013**

**Expires: 9/6/2018**



*[Signature]*  
**Director, Arizona Department of Public Safety**