



INSTRUCTIONS:

INSTALLER: After installation of device, please fax a copy of the completed form to (518) 473-8229 or email to dmv.sm.interlock@dmv.ny.gov and return the original to the motorist.

MOTORIST: Bring this completed form, along with all other required paperwork, to a Motor Vehicles office to obtain a New York State license with a Problem Driver Interlock Restriction.

TO BE COMPLETED BY MOTORIST:

NOTE: You must present a NYS Non-driver ID Card or other photo ID to the installer at the time of installation.

Motorist's Name: _____

Address: _____

Date of Birth: _____ NYS Client ID: _____

List all vehicles you personally own or operate (do not include vehicles driven for employment):

Table with 3 columns: YEAR, MAKE, VEHICLE IDENTIFICATION NUMBER

CERTIFICATION: I understand that I am required to have an interlock device installed on any vehicles I own or operate, including any subsequent vehicles I may obtain. I certify that the information I have given on this form is true. I understand that the NYS DMV may contact the installer indicated to validate the information provided.

IMPORTANT: Making a false statement on this disclosure, or in any proof or statement in connection with it, or deceiving or substituting, or causing another person to deceive or substitute in connection with this disclosure, may subject you to criminal prosecution for a misdemeanor or felony under the Vehicle & Traffic Law and/or Penal Law.

Motorist Signature: X _____ Date: _____

TO BE COMPLETED BY INSTALLER:

On _____, I installed an Ignition Interlock Device Model, _____ certified by the NYS Department of Health and approved by NYS Division of Criminal Justice Services (DCJS), in the above named motor vehicle(s). All vehicle operators have been trained in the proper use of the device and of all maintenance requirements..

IMPORTANT: Making a false statement on this disclosure, or in any proof or statement in connection with it, or deceiving or substituting, or causing another person to deceive or substitute in connection with this disclosure, may subject you to criminal prosecution for a misdemeanor or felony under the Vehicle & Traffic Law and/or Penal Law.

Installer Name: _____

Installer Address: _____

Phone Number: _____

Installer Signature: X _____ Date: _____