MINNESOTA DEPARTMENT OF PUBLIC SAFET



Ignition Interlock Participation Agreement



Minnesota Ignition Interlock Device Program

This form can be faxed to (651) 797-1299. You may also bring this form to any Driver Exam Station (Visit the DVS Website for all Office Locations) or mail this form to Driver and Vehicle Services, Ignition Interlock Unit, 445 Minnesota Street, Suite 177, St. Paul, Minnesota 55101. Please retain a copy for your own records. Your application will not be complete until all enrollment documents have been received by DVS. For questions, contact DVS at (651) 296-2948 or visit http://dvs.dps.mn.gov

Driver Information			
		_	State of Issue
First Name	Middle Name	Last Name	
Address		City/State/Zip	
Home Telephone Number/Cell Phone		Date of	Birth
Certification			

I understand that I must have an ignition interlock device in each vehicle that I operate during the entire time that I am subject to an ignition interlock restriction and that the device must be calibrated and maintained in accordance with Minnesota law. The only exception to this is an approved employment variance granted by Driver and Vehicle Services.

I acknowledge that I have received, reviewed and agreed to abide by the Minnesota Ignition Interlock Device Program Guidelines. I understand that any violation of the conditions outlined in the Program Guidelines may result in sanctions being imposed. These sanctions may include an extension of my time on the program and/or non-credit for the revocation time period spent using the ignition interlock device. Violations include:

- Tampering, circumventing or bypassing the device
- Operating a vehicle without the ignition interlock device
- Violation of the ignition interlock limited license
- Three (3) skipped rolling retests within a seven (7) day period
- An initial start alcohol reading at or greater than .02 with no retest or a retest at or greater than .02 within 15 minutes
- A rolling retest alcohol reading at or greater than .02 with no passing retest within 10 minutes
- Failure to provide at least 30 initial breath tests to verify abstinence each month a month is considered a 30-day period (verification of abstinence applies to canceled-IPS drivers only)
- Failure to bring the vehicle in for a service appointment every 30 days (or 60 days if the device is wireless)

I agree that the State of Minnesota, its representatives and employees are not liable for any result of property damage and/or injury or death to persons which may arise, directly or indirectly, during the use of an ignition interlock device. I verify the information on this document is truthful and accurate. I understand that any false information provided may result in termination of my participation in the Minnesota Ignition Interlock Device Program.

Signature Date

PS31202-5 Rev. 3/2014