

Permission of Ignition Interlock Installation by Registered Vehicle Owner

I duly certify this letter as official authorization and acceptance of the installation of an ignition interlock alcohol breath analyzer system on the below-described vehicle and that said vehicle is currently registered in my name or the company for which I am the official representative. As the owner and/or company officer responsible for the below-described vehicle, I hereby understand and accept all requirements, restrictions, policies and procedures pertaining to the vehicle and its operation as set forth by the Arizona Department of Transportation And Quick Start Ignition Interlock, for the duration of the Interlock Installation.

vehicle and its opera	tion as set forth by the Arizo	na Department of Transpo	rtation And Quick
Start Ignition Interlo	ck, for the duration of the Inf	terlock Installation.	
		_Shall be the primary oper	rator of the vehicle
described below.		. , , .	
VIN #:	Lic. Ta	g #:	
	· ·		
Make:	Model:	Color:	Year:
Owner (company na	me if applicable):		
Owner's Signature (r	epresentative if applicable):		
Date:			
Interlock User's Nam	e (please print):		
Interlock User's Drivers License #:			State: