



# Ignition Interlock Participation Agreement

DEPARTMENT OF MOTOR VEHICLES  
Agency of Transportation

120 State Street  
Montpelier, Vermont 05603-0001  
802.828.2061  
Toll Free: 888-99-VERMONT  
TTD: 711

[dmv.vermont.gov](http://dmv.vermont.gov)

<b>Name:</b>		
<b>Last</b>	<b>First</b>	<b>Middle</b>
<b>License Number</b>	<b>License issued in</b>	
	<input type="checkbox"/> Vermont <input type="checkbox"/> Other:	

**Address Where You Get Your Mail (mailing address)** - Include Street Number and Name (If PO or Private Box, also fill in "Address Where You Live" below)

	City or Town	State	Zip Code
--	--------------	-------	----------

**Address of Residence (physical address)** – This address will be printed on your license

	City or Town	State	Zip Code
--	--------------	-------	----------

<b>Social Security Number:</b>	<b>Date of Birth (MM/DD/YYYY):</b>	<b>Place of Birth (City, State &amp; Country):</b>

The disclosure of your social security or federal identification number is mandatory, is solicited by the authority granted by 42 U.S.C. § §405(c)(2)(C) and/or 666(a)(13) and will be used by the Department of Motor Vehicles in the administration of motor vehicle, tax and child support laws, to identify individuals affected by such laws.

<b>Phone</b>	<b>Email</b>

## Certification

I understand this Agreement shall include my commitment to fulfill the program requirements, which shall include completing the program **in its entirety**, for the required length of time. If I choose to participate in the program by installing an IID, I will not remove the IID from my vehicle until I have fulfilled the terms of restoration described in this Agreement.

I understand I must have an Ignition Interlock Device (IID) in each vehicle I operate during the entire time I am subject to the requirements of an Ignition Interlock Device Restricted Driver’s License (RDL).

I understand if I remove the IID from my vehicle before I am eligible to do so, I will be suspended until I have an IID re-installed in my vehicle. I understand the suspension will have a ten (10) day lead time and the suspension will be mailed to me. The time that I am under suspension will **not** count towards the required length of time I need the IID and the violation will result in an extension of my IID requirements.

I understand the device must be calibrated (or swapped out, if applicable) in accordance with Vermont Ignition Interlock Laws and the Ignition Interlock Program Rules.

I understand that any violation of the terms outlined in the Vermont Ignition Interlock Laws and the Ignition Interlock Program, may result in sanctions being imposed.

I have reviewed, and understand, the Vermont Ignition Interlock Program Frequently Asked Questions.

I fully understand I am entering into an agreement with the Vermont Department of Motor Vehicles, for which I agree I will abide by the Vermont Ignition Interlock Laws, and the Ignition Interlock Program Rules.

**Violations / Extensions**

I understand the following violations will result in an extension of my IID requirements: If you make **three (3)** attempts to **start** a vehicle with a BAC of .04 or above, your IID requirements will be extended for a period of three (3) months.

- ♦ Any **subsequent** 3 attempts to start a vehicle with a BAC of .04 or above, will result in additional three (3) month extensions which will run consecutively (following one after the other).
    - **Example:** If your IID requirements were to end on January 1, 2016; but you made 3 attempts to start a vehicle with a BAC of .04 or above, your IID requirements would have been extended until April 1, 2016. If you make another 3 attempts to start a vehicle with a BAC of .04 or above, your IID requirements will be extended another 3 months; until July 1, 2016.
1. If you fail **one (1) random retest** due to a **BAC of .04 or above, but less than .08**, your IID requirements will be extended for a period of three (3) months.
    - ♦ Any **subsequent** random retest failures due to a BAC of .04 or above, but less than .08, will result in additional three (3) month extensions which will run consecutively (following one after the other).
      - **Example:** If your IID requirements were to end on January 1, 2016; but you failed a random retest due to a BAC of .04 or above, but less than .08, your IID requirements would have been extended until April 1, 2016. If you fail another random retest due to a BAC of .04 or above, but less than .08, your IID requirements will be extended another 3 months; until July 1, 2016.
  2. If you fail **one (1) random retest** due to a **BAC of .08 or above**, your IID requirements will be extended for a period of six (6) months.
    - ♦ Any **subsequent** random retest failures due to a BAC of .08 or above will result in additional six (6) month extensions which will run consecutively (following one after the other).
      - **Example:** If your IID requirements were to end on January 1, 2016; but you failed a random retest due to a BAC of .08 or above, your IID requirements would have been extended until July 1, 2016. If you fail another random retest due to a BAC of .08 or above, your IID requirements will be extended another 6 months; until January 1, 2017.
  3. If you (a) operate a motor vehicle not equipped with an IID, or (b) attempt to tamper with or circumvent the device, or (c) failure to pullover after failing a random retest; your IID requirements will be extended for a period of six (6) months.
  4. If you miss a required service visit to have the IID calibrated, your IID requirements will be extended for a period of sixty (60) days.

**License Restoration**

I agree to the terms of restoration of a non-IID restricted Driver's License as follows:

♦ **For Driving Under the Influence offenses:**

- ✓ If this was your 1<sup>st</sup> offense: Operate under the terms and requirements of an RDL for 90 days, as well as completion of CRASH, etc.
- ✓ If this was your 2<sup>nd</sup> offense: Operate under the terms and requirements of an RDL for 18 months, as well as completion of CRASH, etc.
- ✓ If this was your 3<sup>rd</sup> or subsequent offense: Operate under the terms and requirements of an RDL for 3 years, **plus** prove Total Abstinence (see below).

▪ **For applicants under 21 suspended under 23 V.S.A. § 1216:**

- ✓ If this was your 1<sup>st</sup> offense: Operate under the terms and requirements of an RDL for 6 months, as well as completion of CRASH, etc.
- ✓ If this was your 2<sup>nd</sup> or subsequent offense: Operate under the terms and requirements of an RDL for 1 months or until reaching the age of 21, whichever is longer; as well as completion of CRASH, etc.

♦ **For Refusal to Consent to Breath Test offenses:**

- ✓ If this was your 1<sup>st</sup> offense: Operate under the terms and requirements of an RDL for 6 months, as well as completion of CRASH, etc.
- ✓ If this was your 2<sup>nd</sup> offense: Operate under the terms and requirements of an RDL for 18 months, as well as completion of CRASH, etc.
- ✓ If this was your 3<sup>rd</sup> or subsequent offense: Operate under the terms and requirements of an RDL for 3 years, **plus** prove Total Abstinence (see below).

♦ **For applicants under the age of 21:**

- ✓ If this was your 1<sup>st</sup> offense: Operate under the terms and requirements of an RDL for 6 months, as well as completion of CRASH, etc.
- ✓ If this was your 2<sup>nd</sup> or subsequent offense: Operate under the terms and requirements of an RDL for 18 months or until reaching the age of 21, whichever is longer; as well as completion of CRASH, etc.

♦ **For Total Abstinence applicants:**

- ✓ If you apply for reinstatement through the Total Abstinence program, you will be required to either:
  - Operate under the terms of an RDL during your three (3) years of abstinence, or
  - Operate under the terms of an RDL for one (1) year after having proved three (3) years of abstinence.
- ✓ If you regained your Driver's License under the Total Abstinence program, but were subsequently found to have consumed **any amount of alcohol**, you will be required to have an IID in your vehicle **permanently**.



# Ignition Interlock Participation Agreement

DEPARTMENT OF MOTOR VEHICLES  
Agency of Transportation

[dmv.vermont.gov](http://dmv.vermont.gov)

120 State Street  
Montpelier, Vermont 05603-0001  
802.828.2061  
Toll Free: 888-99-VERMONT  
TTD: 711

## Agreement of Terms

I agree that the State of Vermont, its representatives and employees are not liable for any result of property damage and/or injury or death to persons which arise, directly or indirectly, during the use of an IID. I understand that any false information provided may result in the termination of my participation in the Ignition Interlock Program. My signature on this Agreement signifies that I have read, understand and agree with this Agreement in its entirety.

\_\_\_\_\_  
**Signature of Applicant** **Date Signed**

## Notarization

State of Vermont, \_\_\_\_\_ County, ss

On this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_ personally appeared

\_\_\_\_\_, and acknowledged this Agreement, by

him/her signed and sealed to be his/her free act and deed.

Before me \_\_\_\_\_

Notary Public

My commission expires \_\_\_\_\_, 20 \_\_\_\_\_

Notary Seal