

SELF-CERTIFICATION OF VEHICLE(S) OWNED/OPERATED (PLEASE TYPE OR PRINT IN INK ALL INFORMATION)

A	DRIVER INFORMATION								
	Name				Drive	r Licen	se Number		
	Address	· · · · · · · · · · · · · · · · · · ·			0	Stata	Zin Codo		
	Address: A P.O. Box number may be used in addition to the actual residence be used as the only address.	address, but cannot Oily	<u> </u>			State	Zip Code		
D	VELUCI E INFORMATION (15-4 - III - III - III		-4->						
В	Plate # Title #	HICLE INFORMATION (List all vehicles owned or permitted to operate) te # VIN # Year/Make							
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	Plate # Title #	VIN # Year/Make							
	Plate # Title #	# Title # VIN #				Year/Make			
	Violation occured prior to 10/1/03								
C	STATEMENT OF OWNERSHIP/NON-OWNERSHIP (Check appropriate box and complete statement)								
	С			, hereby state that I own/or have permission to operate					
	PLEASE PRINT NAME	T NAME		the vehicle(s) listed above. _, hereby state that I do not own any vehicle(s).					
			, hereb						
	PLEASE PRINT NAME	h a va la v							
	PLEASE PRINT NAME				hereby state that my income meets the guideline established for an economic hardship.				
	I certify that all information given on this statement is true and correct. I hereby authorize the Department to furnis Ignition Interlock Vendor with my vehicle record for the purpose of processing this form.								
	SIGNATURE IN INK DATE								
	WARNING: Misstatement of fact is a misdemeanor of the third degree punishable by fine of up to \$2,500.00 and/or imprisonment up to one year (18 PA C.S. Section 4904(b)								
D	STATEMENT OF VENDOR (Complete statement after verifying Section B)								
	Vendor Name			(Phone Nur	mber			
				()					
	Vendor Address	City	<u>'</u>		Stat	te	Zip Code		
	I, hereby state that I verified with PENNDOT records and installed an ignition interlock system on the vehicle(s) listed in Section B.								
	PRINT NAME	that I verified their name.	at I verified with PENNDOT records, and the driver has no vehicles eir name.						
, hereby state that I reviewed the attached financial do						cumentation presented by the			
	PRINT NAME customer and have installed an ignition interlock system on only one I certify that all information given in this statement is true and correct.								
	Signature in Ink				ate				
	WARNING: Misstatement of fact is a misdemeanor of	f the third degree	nunishahle l			nnrieio	nment un to		
	one year (18 PA C.S. Section 4904(b).	a acgree	onabie i	.,ο αρ το ψ <u>2</u> ,000					

TAKE THIS FORM TO:

An ignition interlock vendor who will install an approved ignition interlock device on your vehicle(s). A list of vendors is available at PennDOT's Website at www.dmv.state.pa.us.

Please select Interlock Fact Sheet to obtain this information.

INSTRUCTIONS FOR COMPLETING THIS FORM

This form is to be completed when you are notified that you are eligible for restoration. Your eligibility date can be found on the right corner of the front page of your restoration requirements letter. DO NOT CONTACT A VENDOR TO INSTALL AN IGNITION INTERLOCK DEVICE IF AN ELIGIBILITY DATE IS NOT LISTED. You may contact a Vendor and complete Sections A, B, and C only if an eligibility date is listed. The Vendor completes Section D after the ignition interlock system has been installed.

SECTION A - DEFENDANT INFORMATION

List full name and driver number. You will find your driver number listed in your restoration requirements letter. You can call 1-800-932-4600 (for out-of-state calls) or 717-391-6190 (for in-state calls) to obtain a Restorations Requirements letter.

SECTION B - VEHICLE INFORMATION

List all vehicles that you own or that you have permission to drive. The title #, tag #, VIN #, and make of vehicle can be found on the registration card. The vendor will verify the information that you supply. You may be required to show current registration and proof of insurance. For additional vehicles, please attach a seperate listing to this form. If the violation occured prior to 10/1/03 you do not have to list vehicle information. Just check the block indicating violation occured prior to 10/1/03.

SECTION C - STATEMENT OF OWNERSHIP/NON-OWNERSHIP

Check the appropriate box indicating owner or non-owner. Complete this section by printing your name, signing your name and dating. Misstatement of fact could result in fines or imprisonment.

If your adjusted gross income is below 200% of the poverty level guidelines, you may be eligible for a hardship exemption. A hardship exemption allows you to install the ignition interlock on only one vehicle. You can obtain detailed information on the financial guidelines for a hardship exemption on PennDOT's website at www.state.pa.us or from an ignition interlock vendor. If you are applying for a hardship exemption, please check the third block and attach a copy of your most recently filed income tax return.

SECTION D - STATEMENT OF VENDOR

Verify the information supplied in Section B. Install the ignition interlock system on the vehicle(s) listed in Section B. Complete Section D by printing your name, signing your name and dating. Forward this form to:

PENNDOT Bureau of Driver Licensing P.O. Box 68693 Harrisburg, PA 17106-8693