

## APPLICATION FOR CERTIFICATION OF IGNITION INTERLOCK DEVICE

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SECTION 1 — TO BE COMP	LETED BY THE	MAIN OFFICE	<b>.</b>				
NAME OF INDIVIDUAL, PARTNERSHIP, OR CORPORATION					TELEPHONE NUMBER		
					( )		
FIRM OR TRADE NAME	BUSINI	BUSINESS NAME OF MARKETED DEVICE NAME/MODEL			NUMBER OF DEVI	CE	
STREET ADDRESS		CITY			STATE ZIF	PCODE	
SECTION 2 — OWNERSHIP	INFORMATION	ı					
List the name and title of the indivi	dual; each partne	r (designate whe	ther general or limited);	each princi	pal officer, dir	ector, or stockholde	
participating in the direction, cont Section 3, 4, or 5 below dependir	rol, and manager	nent of the policy	of the business. Attac	h additional	sheets, if nee		
NAME (Last, First, Middle)		ADDRESS TITLE			EMAIL ADDRESS		
SECTION 3 — INDIVIDUAL (	CERTIFICATIO	N					
I certify under penalty of perju							
of Motor Vehicles and its offic injury to persons or property w the installation, service, repair, SIGNATURE	hich may arise,	directly or indire	ectly out of any act or	r omission			
		"ION					
SECTION 4 — PARTNERSHI							
I certify under penalty of perbusiness, and that all statemer indemnify and hold harmless the from all claims, demands, and indirectly, out of any act or omignition interlock device.	nts made on this he State of Califo actions, as a re	application and ornia, the Depart esult of damage	and that no other per all attachments to to ment of Motor Vehiclo or injury to persons	rson is asso he applicat les and its o s or proper	ociated in th ion are true officers, emp ty which ma	e ownership of th and correct. I sha loyees, and agent y arise, directly o	
SIGNATURE <b>X</b>	DATE SIGNED		X SIGNATURE		DATE SIGNED		
SIGNATURE <b>X</b>	DATE SIGNED		SIGNATURE X		DATE SIGNED		
SECTION 5 — CORPORATION	ON CERTIFICA	TION					
l certify under penalty of	perjury unde	r the laws o				corporate name	
our corporate number is		and that all sta	is incorporated in Atements made on th			attachments to th	
application are true and correc and its officers, employees, an property which may arise, dire service, repair, use, and remov	t. I shall indemn d agents from a ectly or indirectl	ify and hold hard Il claims, demar y, out of any ac	mless the State of Ca nds, and actions, as a t or omission by the	lifornia, the a result of c	e Departmen damage or ir	t of Motor Vehicle njury to persons o	
SIGNATURE	•		RPORATE OFFICER AUTHORIZ	ZED TO SIGN	DATE SIGNED		