



## FEE SCHEDULE ACKNOWLEDGEMENT

**Commencing January 1, 2019 through December 31, 2025, all ignition interlock device (IID) manufacturers must complete and sign this form and return to the Department of Motor Vehicles (DMV), pursuant to California Vehicle Code (CVC) §13386(h) and Title 13, Article 2.55, Section 125.02 of the California Code of Regulations.**

### SECTION 1 — MANUFACTURER INFORMATION

NAME OF MANUFACTURER \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

MAILING ADDRESS (IF DIFFERENT FROM STREET ADDRESS) \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

### SECTION 2 — FEE SCHEDULE ACKNOWLEDGEMENT *Certifications below must be initialed.*

I agree to provide functioning, certified IIDs to applicants at the costs described in CVC §23575.3(k). \_\_\_\_\_

I acknowledge that if the above named manufacturer, its agents, or its authorized installers fails to comply with providing functioning, certified IIDs to applicants at the costs described in CVC §23575.3(k), then DMV shall suspend or revoke the approval for the manufacturer to market IIDs in California. \_\_\_\_\_

### SECTION 3 — CERTIFICATION

***I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.***

***I further certify that I am the authorized representative of the program for the above named manufacturer and I understand that the information provided is subject to a thorough investigation by DMV. I understand that a false, fictitious or fraudulent claim may subject me and/or the manufacturer to administrative action to deny, suspend, or revoke certification of the ignition interlock device.***

AUTHORIZED MANUFACTURER REPRESENTATIVE PRINTED NAME \_\_\_\_\_

TITLE \_\_\_\_\_

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

**X**

STREET ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

EMAIL \_\_\_\_\_ FAX NUMBER ( ) TELEPHONE NUMBER ( )