Effective: July 30, 2019

New Information

This memo clarifies the information provided in the OLIN 2019-04 New Statewide IID Pilot Program memo issued on January 1, 2019.

Effective January 1, 2019, through December 31, 2025, new legislation (Senate Bill 1046, Chapter 783, Statutes of 2016) requires the Department of Motor Vehicles (DMV) to establish a Statewide Ignition Interlock Device (IID) Pilot Program.

Procedures

To clarify provisions of the new program, DMV adopted regulations effective May 21, 2019, to do the following:

- Require all current certified IID manufacturers to complete and submit a Fee Schedule Acknowledgement (OL 160) form to DMV (Attachment A).
- Require IID installers to verify a person’s eligibility to install or remove an IID.
- Specify a new requirement for IID installers to submit to DMV a noncompliance, if the driver failed to service the IID within 60 days from their last appointment.
- Specify revisions to the following forms:
  —Verification of Installation Ignition Interlock (DL 920) form (Attachment B).
  —Notice of Noncompliance Ignition Interlock (DL 921) form (Attachment C).
  —Ignition Interlock Notice of Removal (DL 922) form (Attachment D).
  —Ignition Interlock Device (IID) Installation and Removal Request (DL 925) form (Attachment E).

Fee Schedule Acknowledgement

*California Vehicle Code* (CVC) §13386 requires all certified manufacturers and manufacturer’s agents to provide functioning, certified IIDs to applicants at the costs described in CVC §23575.3(k) and acknowledge that failure to comply with CVC §23575.3(k) will result in suspension or revocation of the approval for the manufacturer to market IIDs in California.

All current certified IID manufacturers must comply with the fee schedule requirements outlined below and submit a completed and signed acknowledgement and certification on an OL 160, no later than **October 1, 2019**, to DMV. Manufacturers will be removed from the certification list if DMV does not receive the OL 160 by **October 1, 2019**. The OL 160 is available on the DMV website at [dmv.ca.gov](http://dmv.ca.gov).

**NOTE:** All new IID manufacturer certification applicants must include the completed and signed OL 160, with all other required documents in the application package.

Refer to OLIN 2019-04 New Statewide IID Pilot Program for detailed information on federal poverty level guidelines.

IID Installation

IID installers must verify a person’s eligibility to install an IID, by first contacting the Mandatory Actions Unit (MAU). Once eligibility is verified and the IID is installed, all IID installers must provide the participant with an original and copy of the completed and signed DL 920 (Attachment B).
Revised DL 920
The DL 920 is updated with a 1/2019 revision date and contains the following revisions to ensure compliance with statute and the California Code of Regulations (CCR):

- Section 2—Manufacturer/Installer Information: requires the IID installer to provide the device name and model/serial number, in addition to the manufacturer name, installer name, license number, and installer address.

- Section 8—DMV Use Only: allows DMV to verify receipt of an original copy of the DL 920. IID installers must not complete this portion of the form.

**IMPORTANT:** IID installers must begin ordering and using the DL 920 (REV. 1/2019) immediately. DL 920 forms with a 1/2019 revision date are available for ordering through DMV’s Forms and Accountable Items Section. DL 920 forms with a revision date of 6/2014 are obsolete and must be destroyed immediately. DMV will not accept obsolete DL 920 forms for installation dates on or after October 1, 2019.

IID Noncompliance
IID installers must complete and submit a DL 921 (Attachment C) to DMV within three working days after noncompliance is noted, if one of the following occurs:

- The driver failed to service the IID within 60 days from the last appointment.
- The driver failed 3 or more times to comply with the requirement for maintenance or calibration of the IID.
- The IID showed evidence of an attempt(s) to bypass.
- The IID showed evidence of tampering.
- The IID showed evidence of an attempt(s) to remove.

Revised DL 921
The DL 921 is updated with a 1/2019 revision date and contains the following revisions to ensure compliance with statute and CCR:

- Section 2—Manufacturer/Installer Information: provides the IID installer an option to check, if licensed through the Bureau of Household Goods and Services (BHGS).
IID Noncompliance, continued

- Section 3—Ignition Interlock Device Information: requires the IID installer to provide the device name and model/serial number in addition to the date of installation.

<table>
<thead>
<tr>
<th>DEVICE NAME</th>
<th>MODEL/SERIAL NUMBER</th>
<th>DATE OF INSTALLATION</th>
</tr>
</thead>
</table>

- Section 5—IID Noncompliance Information: provides the IID installer with the following options:
  — If the driver failed to service the device within a 60-day interval (for example, the driver last serviced the IID on 12/1/18 and the current date is 2/2/19), check the first box in Section 5, and indicate the date of the last appointment and current date.
  — If the driver has repeatedly missed appointments for servicing, check the second box in Section 5, and indicate the date of the third missed appointment.

**NOTE:** The first and second failure to comply fields have been removed because DMV does not take action against a person’s driving privilege until the third failure to comply.

— All other fields remain the same. Check the appropriate box and enter the dates on which noncompliance occurred.

<table>
<thead>
<tr>
<th>Section 5 — IID NON-COMPLIANCE INFORMATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ The driver failed to service the device within 60 days.</td>
</tr>
<tr>
<td>☐ The above driver failed three or more times to comply with the requirement for maintenance or calibration of the IID on:</td>
</tr>
</tbody>
</table>

The IID installed in the above vehicle shows evidence of:

- Attempt(s) to bypass on: | DATE |
- Tampering on: | DATE |
- Attempt(s) to remove on: | DATE |

**IMPORTANT:** The revised DL 921 is available on the DMV website at [dmv.ca.gov](http://dmv.ca.gov). DL 921 forms with a revision date of 8/2013 are obsolete and will not be accepted by DMV for noncompliance dates on or after July 30, 2019.

IID Removal

IID installers must verify a person’s eligibility to remove an IID by first contacting MAU. Once eligibility is verified and the IID is removed, all IID installers must submit a DL 922 (Attachment D) to DMV, within three working days after the device is removed.

Revised DL 922

The DL 922 is updated with a 1/2019 revision date and contains the following revisions to ensure compliance with statute and CCR:

- Section 2—Manufacturer/Installer Information: requires the IID installer to provide the device name and model/serial number, in addition to the manufacturer name, installer name, license number, and installer address. This section provides the IID installer with an option to check if licensed through BHGS.
IID Removal, continued

**IMPORTANT:** IID installers must begin ordering and using the DL 922 (REV. 1/2019) immediately. DL 922 forms with a 1/2019 revision date are available for ordering through DMV’s Forms and Accountable Items Section. DL 922 forms with a revision date of 4/2012 are obsolete and must be destroyed immediately. DMV will not accept obsolete DL 922 forms for removal dates on or after October 1, 2019.

IID Installation and Removal Request

IID installers may fax a DL 925 (Attachment E) to MAU as an alternative to contacting MAU by phone. The DL 925 is updated with a 1/2019 revision date. Section 3 no longer indicates the checkbox for submitting the Department of Motor Vehicles Ordered Verification of Ignition Interlock (DL 924) form because this form is obsolete.

**IMPORTANT:** The revised DL 925 is available on the DMV website at dmv.ca.gov. DL 925 forms with a revision date of 3/2011 are obsolete and will not be accepted by DMV for noncompliance dates on or after July 30, 2019.

Ordering Revised Forms

IID providers can order supplies of the revised DL 920 and DL 922 forms through normal supply channels. The OL 160, DL 921, and DL 925 forms are available at dmv.ca.gov.

Background

Changes were made to the IID program procedures, publications, and forms to comply with new regulations effective May 21, 2019.

References

*California Vehicle Code §§13352, 13352.1, 13353.2, 13353.6, 13353.75, 13386, 23573, 23575, and 23575.3*

OLIN 2019-04 New Statewide IID Pilot Program

Distribution

Notification that this memo is available at dmv.ca.gov was made via California DMV’s Automated Email Alert System in July 2019 to the following:

- Ignition Interlock Device Program

Contact

Questions regarding this memo may be directed to the Occupational Licensing Compliance Unit at (916) 229-3154

Attachments (5)
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

<table>
<thead>
<tr>
<th>NAME OF MANUFACTURER</th>
</tr>
</thead>
<tbody>
<tr>
<td>STREET ADDRESS</td>
</tr>
<tr>
<td>CITY</td>
</tr>
<tr>
<td>STATE</td>
</tr>
<tr>
<td>ZIP CODE</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>TITLE</th>
</tr>
</thead>
</table>

SIGNATURE

X

STREET ADDRESS

| CITY | STATE | ZIP CODE |

EMAIL

<table>
<thead>
<tr>
<th>FAX NUMBER</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>TELEPHONE NUMBER</th>
</tr>
</thead>
</table>
INSTRUCTIONS FOR COMPLETING INSTALLATION VERIFICATION FORM

INSTRUCTIONS TO THE INSTALLER

When completing this form, you must check the box to indicate if you are licensed through Bureau of Automotive Repair (BAR) or Bureau of Household Goods and Services (BHGS). Be sure to retain a photocopy of the completed form for your records. Submit a photocopy to the manufacturer or the manufacturer’s agent. The original and one (1) photocopy must be given to the driver.

If the driver has devices installed on two or more vehicles, complete a separate installation verification form for each vehicle. Complete each form in its entirety with the required manufacturer’s stamp. Information from this form will become part of the driver’s DMV record. The form could be used as evidence in court. For this reason, it is very important that the information on this form be easy to read, complete, and accurate.

If this installation is replacing an installation that occurred on a vehicle that has become unavailable due to theft, fire, or other means, complete Sections 2, 3 and 4 on the replacement vehicle and Section 6 on the unavailable vehicle.

If a previous Notice of Non-Compliance (DL 921) or Ignition Interlock Notice of Removal (DL 922) form was submitted to DMV for a customer who has been ordered to maintain an IID and the customer is now back in compliance with the IID requirements, please contact Mandatory Actions Unit regarding eligibility to re-impose the remainder of the IID restriction. If the customer is eligible for an IID restriction, then complete Sections 1-4 of this form with information regarding the original installation, and complete Section 5 “Installer Inspection after Notice of Non-Compliance” to verify that the device remains installed, is functioning properly, and the driver is again in compliance with the IID requirements.

NOTE: Customers are to retain a photocopy of this form for their records. If applicable, instruct the customer to submit the original documents and all applicable fees in person to the nearest DMV office or mail to:

Original: Department of Motor Vehicles
Mandatory Actions Unit, M/S J233
PO Box 942890
Sacramento, CA 94290-0001

Copy: Driver
Copy: Installer
Copy: Manufacturer or Manufacturer’s Agent

If you have any questions regarding how to complete this form and/or if a customer needs to obtain information about applicable fees call Mandatory Actions Unit (916) 657-6525.

NOTE TO CUSTOMER

If you are applying for an initial IID-restricted driver license, you must bring this original form and all applicable fees in person to the nearest DMV office or mail to the address above.
### Attachment C

**NOTICE OF NON-COMPLIANCE**

**IGNITION INTERLOCK**

---

**SECTION 1 — DRIVER INFORMATION**

<table>
<thead>
<tr>
<th>DRIVER NAME (FIRST, MIDDLE, LAST)</th>
<th>SUFFIX ( Sr., Jr., III)</th>
</tr>
</thead>
<tbody>
<tr>
<td>MAILING ADDRESS (STREET)</td>
<td>APARTMENT/SUITE NUMBER</td>
</tr>
<tr>
<td>RESIDENCE ADDRESS (IP DIFFERENT FROM MAILING ADDRESS)</td>
<td>APARTMENT/SUITE NUMBER</td>
</tr>
<tr>
<td>BIRTH DATE (MONTH, DAY, YEAR)</td>
<td>HOME TELEPHONE NUMBER</td>
</tr>
<tr>
<td></td>
<td>WORK TELEPHONE NUMBER</td>
</tr>
</tbody>
</table>

---

**SECTION 2 — MANUFACTURER/INSTALLER INFORMATION** *(The following installer previously installed this device manufactured by)*

<table>
<thead>
<tr>
<th>MANUFACTURER</th>
<th>INSTALLER NAME</th>
<th>INSTALLER ADDRESS</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

---

**SECTION 3 — IGNITION INTERLOCK DEVICE INFORMATION** *(The following device was in non-compliance)*

<table>
<thead>
<tr>
<th>DEVICE NAME</th>
<th>MODEL/Serial NUMBER</th>
<th>DATE OF INSTALLATION</th>
</tr>
</thead>
</table>

---

**SECTION 4 — VEHICLE INFORMATION** *(This ignition interlock device was in the following vehicle)*

<table>
<thead>
<tr>
<th>MAKE</th>
<th>YEAR</th>
<th>LICENSE PLATE NUMBER</th>
<th>VEHICLE IDENTIFICATION NUMBER</th>
</tr>
</thead>
</table>

---

**SECTION 5 — IID NON-COMPLIANCE INFORMATION**

- [ ] The driver failed to service the device within 60 days.  DATE OF LAST APPOINTMENT  CURRENT DATE
- [ ] The above driver failed three or more times to comply with the requirement for maintenance or calibration of the IID on:  DATE

The IID installed in the above vehicle shows evidence of:

- [ ] Attempt(s) to bypass on:  DATE
- [ ] Tampering on:  DATE
- [ ] Attempt(s) to remove on:  DATE

---

**SECTION 6 — INSTALLER USE ONLY**

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

<table>
<thead>
<tr>
<th>INSTALLER PRINTED NAME</th>
<th>DAY/TIME TELEPHONE NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>( )</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>INSTALLER SIGNATURE</th>
<th>DATE SENT TO DMV</th>
<th>DATE SIGNED</th>
</tr>
</thead>
</table>

---

**NOTE:**

DL 821 (REV. 1/2019)
INSTRUCTIONS FOR NON-COMPLIANCE FORM

INSTRUCTIONS TO INSTALLER

When completing this form, you must check the box to indicate if you are licensed through Bureau of Automotive Repair (BAR) or Bureau of Household Goods and Services (BHGS). This form must be mailed to DMV at the address below within three working days after non-compliance is noted. You may also fax a copy of this form to (916) 857-8513. Provide a copy to the driver, installer, manufacturer or manufacturer’s agent.

Department of Motor Vehicles
Mandatory Actions Unit, M/S J233
PO Box 942890
Sacramento, CA 94290-0001

If you have any questions regarding how to complete this form, including what constitutes non-compliance, call (916) 857-8525.

IMPORTANT: All non-compliance (bypass, tampering, removal attempt, three or more missed appointments, or failure to service the device within a sixty day interval) must be reported to DMV. Non-compliance by a driver may result in suspension or revocation of the driving privilege, and/or a pause in the IID restriction term.

INSTRUCTIONS FOR SECTION 5

Enter the dates on which the non-compliance occurred. If the non-compliance (bypass, tampering, removal attempt) was recorded by the ignition interlock data recorder, put the dates recorded on the blank lines. If the tampering was noticed when you checked the vehicle, but was not recorded on the data recorder, use the date you saw the evidence of tampering.

IMPORTANT: Whenever you report non-compliance based on information recorded on the ignition interlock device, print out a copy of any non-compliance incidents recorded. Attach this printout to your copy of the non-compliance form and keep for your records. These documents could be subpoenaed in a court case and DMV could request copies.

If the driver has failed to service the device within a sixty day interval, check the box that indicates the driver failed to service within sixty days, indicate the date of the customer’s last appointment, and the current date in Section 5. If the driver has repeatedly missed appointments for servicing, indicate the date of the third missed appointment.
## Attachment D

### Ignition Interlock
**Notice of Removal**

(See back for instructions)

---

**SECTION 1 — DRIVER INFORMATION**

<table>
<thead>
<tr>
<th>Driver Name (First, Middle, Last)</th>
<th>Suffix (Sr., Dr., Jr.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mailing Address (Street)</td>
<td>Apartment/Space Number</td>
</tr>
<tr>
<td>City</td>
<td>State</td>
</tr>
<tr>
<td>Residence Address (If different)</td>
<td>Apartment/Space Number</td>
</tr>
<tr>
<td>City</td>
<td>State</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Birth Date (Month, Day, Year)</th>
<th>Home Telephone Number</th>
<th>Work Telephone Number</th>
</tr>
</thead>
</table>

---

**SECTION 2 — MANUFACTURER/INSTALLER INFORMATION**

<table>
<thead>
<tr>
<th>Manufacturer</th>
<th>Device Name</th>
<th>Model/Serial Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Installer Name</td>
<td>License Number</td>
<td>BAR Number</td>
</tr>
<tr>
<td>Installer Address (Street)</td>
<td>City</td>
<td>State</td>
</tr>
</tbody>
</table>

---

**SECTION 3 — REMOVAL/INSTALLATION INFORMATION**

The ignition interlock device installed in the vehicle described below was removed on:

<table>
<thead>
<tr>
<th>Vehicle Make</th>
<th>Year</th>
<th>License Plate Number</th>
<th>Vehicle Identification Number</th>
</tr>
</thead>
</table>

An ignition interlock device was installed on-hands installed in another vehicle described below:

<table>
<thead>
<tr>
<th>Vehicle Make</th>
<th>Year</th>
<th>License Plate Number</th>
<th>Vehicle Identification Number</th>
</tr>
</thead>
</table>

Date of Installation: Date of Next Monitor Check:

---

**SECTION 4 — INSTALLER USE ONLY**

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

Installer Printed Name: Daytime Telephone Number:

<table>
<thead>
<tr>
<th>Installer Signature</th>
<th>Date Sent to Day</th>
<th>DateSent to Day</th>
</tr>
</thead>
</table>

---

**Distribute copies as follows:**

- **Original:** Mail the original document to:
  - Department of Motor Vehicles
  - Mandatory Actions Unit, MVS J233
  - P.O. Box 942880
  - Sacramento, CA 94290-0001

- **Photocopy:** Driver

- **Photocopy:** Installer

- **Photocopy:** Manufacturer or Manufacturer’s Agent

---

DL 922 (REV. 12/2015)
INSTRUCTIONS FOR NOTICE OF REMOVAL

INSTRUCTIONS TO INSTALLER

IMPORTANT: You must contact the Mandatory Actions Unit to verify removal eligibility prior to removing the device and submitting this form.

The original document must be mailed to DMV at the address below within three working days after the device is removed. You may also fax a copy of this form to (916) 657-6001.

Department of Motor Vehicles
Mandatory Actions Unit, M/S J233
P.O. Box 942890
Sacramento, CA 94290-0001

If you have any questions regarding how to complete this form, call (916) 657-6525.

INSTRUCTIONS FOR SECTION 3

Note: Do not use this form when another device is immediately installed as a replacement in the same vehicle.

Note the date the device was removed. If you are installing the device in another vehicle, or if another device will remain installed in a different vehicle, please provide all the information requested about this separate installation. This will alert DMV that a device has been installed in a different vehicle, or another device remains installed in a second vehicle. This information is critical for the customer to continue driving. If DMV is not notified of the new installation, or is not aware of the device’s installation in a second vehicle, the customer’s driving privilege will be suspended or revoked. There is no “grace period” allowed between removal of one device and installation of another. For this reason, installation of a replacement device should occur on the same date (or before) the removal of an ignition interlock device occurs.

WARNING TO DRIVER

You are required to maintain an ignition interlock device at all times for the duration of the ignition interlock restriction. There is no “grace period”, therefore installation on another vehicle is required to avoid suspension or revocation.
# Ignition Interlock Device (IID) Installation & Removal Request

**CLEARLY PRINT** information and fax to DMV at (916) 657-9042

## SECTION 1 — DRIVER INFORMATION

<table>
<thead>
<tr>
<th>DRIVER LICENSE NUMBER</th>
<th>BIRTH DATE (MM/DD/YYYY)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>FULL NAME (FIRST, MIDDLE, LAST)</th>
</tr>
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<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

## SECTION 2 — INSTALLER INFORMATION

<table>
<thead>
<tr>
<th>DATE OF REQUEST (MM/DD/YYYY)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>REQUEST IS FOR:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Installation</td>
</tr>
<tr>
<td>Removal</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>ID INSTALLER NAME</th>
<th>INSTALLER LICENSE NO.</th>
</tr>
</thead>
<tbody>
<tr>
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<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>STREET ADDRESS</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CITY</th>
<th>STATE</th>
<th>ZIP CODE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>CONTACT NAME</th>
<th>PHONE NUMBER ( )</th>
<th>EXT</th>
<th>FAX NUMBER ( )</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## SECTION 3 — FOR DMV USE ONLY — ELIGIBILITY FOR INSTALLATION OR REMOVAL

**For IID Installation**

<table>
<thead>
<tr>
<th>ELIGIBLE ON</th>
<th>NUMBER OF MONTHS IID REQUIRED</th>
<th>ELIGIBLE ON</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Submit

- [ ] DL 920
- [ ] ID-110
- [ ] Not eligible
- [ ] Court ordered

*Unsung requests are only entitled to the information above.*

## SECTION 4 — DRIVER AUTHORIZATION

I hereby authorize the Department of Motor Vehicles to provide the information listed below for a full assessment of the IID eligibility requirements to:

<table>
<thead>
<tr>
<th>ID INSTALLER NAME</th>
<th>DRIVER SIGNATURE</th>
<th>DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## SECTION 5 — FOR DMV USE ONLY — ADDITIONAL REQUIREMENTS

If not eligible for IID installation, driver needs:

- [ ] Suspension/Revocation not completed
- [ ] Enrollment for _____-month program
- [ ] Completion of 12 months of 18-month program
- [ ] Completion of 12 months of 30-month program
- [ ] SR 22 proof of financial responsibility
- [ ] Fee $_____

If not eligible for IID removal, driver needs:

- [ ] Completion of _____-month program
- [ ] IID term not completed
- [ ] Contact county court (see below)
- [ ] Other:

- [ ] Other outstanding action: customer must contact DMV at (916) 657-6525 for additional information
- [ ] This request contains insufficient/incorrect information. Please provide items checked above and resubmit.

<table>
<thead>
<tr>
<th>MAU Technician ID</th>
<th>Date Faxed to Installer</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

DL 925 (REV. 1/2019)