

Installation Form

YOUR CONTACT INFORMATION

First Name	<input type="text"/>	Last Name	<input type="text"/>
Address	<input type="text"/>		
City/State	<input type="text"/>	Zipcode	<input type="text"/>
Phone	<input type="text"/>	Date of Birth	<input type="text"/>

DMV INFORMATION

What form of identification do you have?

☐ Driver License ☐ State ID ☐ Passport Number:

Is your car registered? If so, to whom?

☐ No ☐ Yes Name / State

VEHICLE INFORMATION

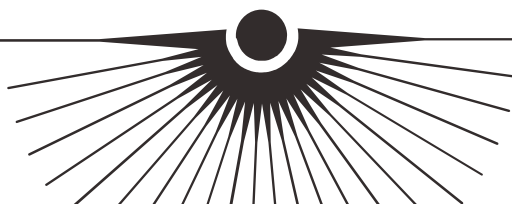
Vehicle Information Number:	<input type="text"/>		
Color	<input type="text"/>	Plate:	<input type="text"/>
Year	<input type="text"/>	State:	<input type="text"/>
Make	<input type="text"/>		
Model	<input type="text"/>		

Have you previously had an ignition interlock system? ☐ No ☐ Yes

If so, what company were you with?

Acknowledgement: I understand that the installation of the ignition interlock device is a requirement for the reinstatement of my driver's license, and that I am responsible for all fees associated with the installation and maintenance of the device. I also understand that tampering with or attempting to circumvent the device is a violation of the law and may result in legal penalties.

Signature



Date

Release of Liability Form



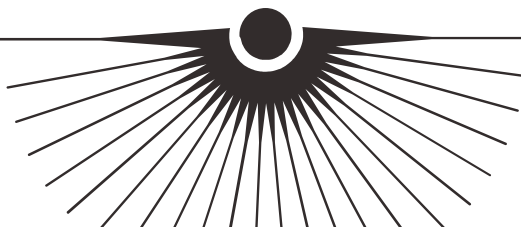
I, _____, understand that the installation of an ignition interlock device in my vehicle is required for the reinstatement of my driver's license. I acknowledge that I am responsible for all fees associated with the installation and maintenance of the device.

I hereby release [**InterlockGO-NOCO**] and its officers, directors, employees, agents, and affiliates from any and all liability, claims, damages, or expenses arising out of or in any way related to the installation or use of the ignition interlock device in my vehicle.

I understand that tampering with or attempting to circumvent the device is a violation of the law and may result in legal penalties. I agree to comply with all laws, regulations, and requirements related to the installation and use of the ignition interlock device.

I certify that I have read and fully understand the terms of this release of liability form, and that I am signing it voluntarily and without coercion.

Signature



Date

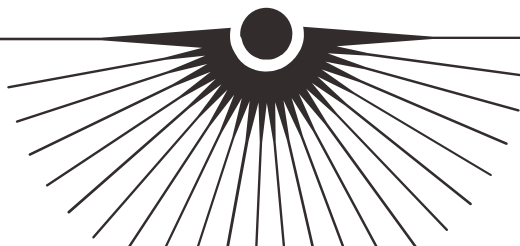
I, [_____], understand and agree to the following:

I acknowledge that [**InterlockGO-NOCO**] may be required to submit personal information, including but not limited to driver's license number and social security number, to the Department of Revenue or other relevant government agency, and that this information may be used to verify the personal information provided by the customer.

I further acknowledge that [**InterlockGO-NOCO**] may be required to reveal information regarding the current status of the customer's driving privilege to the Department of Revenue or other relevant government agency.

I certify that the information provided in this attestation document is true and accurate to the best of my knowledge.

Signature



Date