## Virginia Alcohol Safety Action Program vasap.virginia.gov

## **Ignition Interlock Consent to Install Form**

Client Name:					
Vehicle Make:				Vehicle Model	:
Vehicle Year:				Vehicle Color:	
Vehicle License	e Plate #:				
VIN Number:					
company-owned interlock system interlock vendor.  I understand the installed in my value in the event that owner, agree to removal of the dwritten permissi	purpose of the client bring the clevice. I a on from the	of the ignition dispersion agree to a referenced vehicle(s) in the court of	(Interpretation on interlock abide by the relational data above leaved dentified above the interpretation).	I, hereby give my's (Client N rlock Service Pro device and the co requirements of the s the ignition inte ve to an interlock lock will not be a if a court ordered	cribed above, or (in the case of a consent to have an ignition ame) independently chosen ignition vider Name).  Inditions under which it is being the ignition interlock vendor contract. The program, I, the registered a service center within five days for authorized for removal without restricted license is still in effect. In
the ignition inte	rlock requ	irement.			my vehicle until the client satisfies may lead to permanent loss of the
ignition interloc immediately in		_		-	ovider and my ASAP case manager
(Printed Name of	of Person l	Providing F	Permission)		
(Signature of Pe	erson Prov	iding Perm	ission)	(Date)	_
(Notary Signatu	re)			(Date)	_