

Interlock Removal Form

Participant Information

First name: _____ Surname: _____

Phone Number: _____

Vehicle Make: _____ Model: _____ Registration: _____

Third Party Request Information

Contact Person: _____ Phone: _____

Company Name: _____

Address: _____

Signature: _____

Reason For Removal

- Loss of Licence/Program Suspension
- Unauthorised Other
- Unauthorised Self Removal
- Unauthorised Absconded
- Deceased

Details/Reason: _____

Removal Information

Service Centre: _____ Technician: _____

Signature: _____ Removed: Off Site At Service Centre

Removal Acknowledgement

The participant has been advised they are not legally permitted to drive a motor vehicle that does not have an approved alcohol interlock device installed and that doing so is a serious offence that may carry large fines and possible imprisonment.

I _____ hereby understand and accept the implications of removing the device from my vehicle without authorisation

Participant Signature: _____ Date: _____

Head Office Use Only

Form Received By: _____ Date Received: _____

Device Received By: _____ Date Received: _____

Logged Data Saved: Y N

Fees Outstanding: Y N

Entered into Smartrac: Y N

Entered By: _____