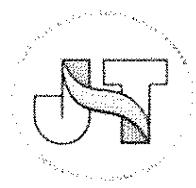


John Tyler ASAP

ALCOHOL SAFETY ACTION PROGRAM



HENRICO OFFICE
4116 East Parham Road
Henrico, VA 23228
804.914.2181
jtasap.com

CHESTERFIELD OFFICE
9620 Iron Bridge Road #101
Chesterfield, VA 23832
804.914.2181
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Ignition Interlock Request for Installation Form

Full Name: _____

(First)

(Middle)

(Last)

(Suffix)

Driver's License Number: _____ **State Licensed:** _____ **Date of Birth:** _____

Mailing Address: _____

(Street)

(City)

(State)

(Zip Code)

Primary Phone Number: _____ - _____ - _____ **Secondary Phone Number:** _____ - _____ - _____

Email Address: _____ (a)

Referral information:

VASAP Office Use Only Referral Type (Court) or (DMV)

Ignition Interlock Vendor: Draeger/Roadguard Life Safer Smart Start

Length: _____ months

Offense Date: 1st 2nd 3rd Camera: Mandatory

Court Jurisdiction: _____

Offense Date: _____ Conviction Date: _____ Pre-enroll: Yes/ No

Alcohol Determination Method (circle one): Blood Breath Refusal DUI-Drug

Reason for Stop (circle one): *Accident *Checkpoint Detail * Citizen Alert *Erratic Driving

*Texting *Speeding *No Headlight *Expired Inspection/Registration *Failure to Obey Highway Sign

*Disability Vehicle/ Welfare Check *Domestic Disturbance *Other

Vehicle Information:

Vin: _____ Make: _____ Model: _____ Year: _____

Tag: _____ Hybrid: * Yes * No Push Start: * Yes * No Is Registered Owner same as client? * Yes * No

If no (Owner's Written consent Required)

Owner's First Name: _____ Middle Name: _____ Last Name: _____

**Ignition Interlock Participation Agreement**

VIRGINIA ALCOHOL SAFETY ACTION PROGRAM

www.vasap.virginia.gov

Participant Information**Driver's License Number**

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State of Issue

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First Name:

Middle Name:

Last Name:

Address:

City / Zip

Phone Number:

Date of birth:

Email address:

Agreement

By signing below, I acknowledge that I have reviewed and agree to abide by the terms of the VASAP Ignition Interlock Participation Agreement and all laws related to the Virginia Interlock program published in the Virginia Code.

All VASAP ignition interlock participants are required to abide by the following conditions:

1. ASAP clients convicted of a DUI 1st offense must install an ignition interlock on any vehicle they operate, unless otherwise ordered by the court. ASAP clients convicted of a DUI 2nd or subsequent offense must install an ignition interlock on any vehicle they operate, and any vehicle registered or titled to them, in whole or in part. _____
2. Both court-ordered and DMV administrative interlock clients are required to complete enrollment with a local ASAP to open a case for ASAP interlock monitoring services. _____
3. For DMV administrative interlock cases, the ASAP interlock monitoring fee is \$50 per month. The ASAP will not successfully satisfy any interlock requirement with the DMV in which the ASAP fee balance is not paid in full. Clients who have an ASAP fee balance 60-days or more in arrears are subject to having their interlock monitoring services terminated by the ASAP. _____
4. Clients under any ignition interlock requirement must notify the ASAP immediately if they register or title a new vehicle. The new vehicle must have an ASAP approved interlock device installed within 10 calendar days of registering or titling the vehicle, if related to a DUI 2nd or subsequent conviction, a DUI 1st where the court required interlock installed on all vehicles, or a DUI 1st conviction where the client intends to operate the vehicle. Failure to install ignition interlock on all required vehicles may result in a DMV license suspension, an interruption in client eligibility to earn installed interlock credit, or the loss and reset of all previously accrued installed interlock credit. The client will not be eligible to begin earning installed interlock credit until an interlock is installed on all required vehicles and the client is once again in a compliant status with Virginia DMV ("Licensed" for Virginia drivers, "Not Licensed-No Fees Owed" for out of state license holders). _____
5. Court-ordered ASAP clients seeking an exemption to drive an employer's vehicle without an interlock installed must have the employer petition the court. The client must not be in control or ownership of the business in whole or in part. If an employer exemption is granted within a restricted license issued by the Court, the client is still required to install an interlock in a personal vehicle, achieve proper licensure with Virginia DMV, and achieve compliance with their home state of licensure to satisfy the requirement. If approved by the court, ASAP clients, and their employer, must complete the VASAP Ignition Interlock Program Employment Exemption Application in full and promptly return it to their servicing ASAP. _____
6. The Court-ordered interlock device must be installed within 30 days of the effective date on the DC-266 Ignition Interlock Order Form. The interlock device must be calibrated at least every 30 days per Virginia Code 18.2-270.1. _____
7. ASAP clients installing interlock in a vehicle they do not own must submit a completed "VASAP Ignition Interlock Consent to Install Form" to the interlock technician at installation. The document must be notarized unless the owner of the vehicle will be present at the installation appointment. _____
8. ASAP clients are not permitted to change interlock vendors after device installation unless approved by the Commission on VASAP. _____

9. Installed ignition interlock credit for court-ordered interlock clients cannot be earned if a client has a suspended, revoked, or not eligible status with Virginia DMV or their home state of licensure. ASAP clients under a court-ordered interlock requirement must comply with all terms of the court-issued restricted license order (DC265) and all licensing requirements of the DMV to earn installed interlock credit. _____
10. The court-issued restricted license order (DC265) document shall expire 60 days from the effective date on the originally issued order unless accompanied by a valid hard copy license from Virginia DMV. Driver's licensed in another state at the time of the Virginia DUI conviction must also meet the 60-day compliance requirements with Virginia DMV by achieving a "Not Licensed-No Fees Owed" status with the Virginia DMV and by obtaining a valid hard-copy picture driver's license from their home state of licensure. _____
11. Installed ignition interlock credit for DMV administrative clients cannot be earned if a client has a suspended, revoked, or not eligible status with Virginia DMV or their home state of licensure. In addition, ASAP clients under a DMV interlock requirement, cannot begin to earn installed interlock credit until the date they obtain a valid, hard copy picture driver's license from the Virginia DMV. Clients licensed another state must comply with all requirements of the Virginia DMV for out-of-state drivers, by achieving a "Not Licensed-No Fees Owed", status with the Virginia DMV and obtaining a valid hard-copy picture driver's license from their home state of licensure before they can begin earning installed interlock credit. _____
12. For all installed ignition interlock clients, failure to maintain compliance with DMV requirements in Virginia, and in your home state of licensure, can result in a suspension of license and an interruption of earned installed ignition interlock credit. Clients will begin earning installed ignition interlock credit once they have complied with all outstanding requirements of the DMV in Virginia and their home state of licensure. The days of ineligibility to earn installed ignition interlock credit will be tolled upon the end of the initial required term of ignition interlock. _____
13. ASAP clients, while in proximity of the ignition interlock, are required to avoid substances which may contain alcohols and avoid using any substances, whatsoever, other than water, within 15 minutes prior to providing a breath test into the interlock device. In addition, all smoking substances should be avoided while using the ignition interlock to prevent potential damage to the fuel cell. _____
14. Breath test readings above the fail point of 0.02%, and skipped rolling re-tests, are considered violations. Clients are required to provide a second breath sample within 15 minutes of any failed or skipped test. The second breath sample provides the ASAP with additional information to determine if the failed, or skipped, breath test was due to consumed alcohol. _____
15. ASAP clients are solely responsible for all activity on the interlock device. The photos collected by the camera installed in the vehicle may be used to prove otherwise. All situations in which the person providing a breath sample on the device, or the device itself, are not clearly visible and identifiable in the photos captured by the interlock camera will be considered interlock violations. ASAP clients who permit another person to supply a breath test on the interlock device, in an attempt to start the vehicle on behalf of the client or an attempt to clear a violation breath sample given by the client, violate Virginia Code 18.2-270.1. The client and any involved parties may be charged with a Class 1 misdemeanor. _____
16. If requested, ASAP clients are required to submit formal documentation from any vehicle maintenance or repair facility to the ASAP documenting the type of service performed along with the vehicle's dates and times in and out of the repair facility. _____
17. Pursuant to Va. Code § 17.1-612, ASAP clients who directly or indirectly, subpoena staff members of the VASAP state office for testimony at any court hearing may be subject to payment of the witness's daily mileage and toll expenses. _____
18. ASAP clients agree that ASAP is the custodian of record of ignition interlock reports generated from the interlock device data contained in the interlock provider's server, which is made at or near the time of the occurrence of the event(s) set forth therein, and that such reports and records are kept in the ordinary course of regularly conducted business activity of monitoring ASAP interlock clients, and that such records are made by ASAP caseworkers as a regular practice in monitoring a client's compliance with the interlock. _____
19. ASAP clients are required to complete their final calibration on or after their interlock compliance end date. No interlock device shall be removed without ASAP authorization. _____
20. These conditions and terms will remain in effect until successful completion of all court and/or DMV ignition interlock requirements. By signing below, I acknowledge that I have received a copy of and understand all conditions and information contained in this Ignition Interlock Participation Agreement. _____
21. If you have pre-enrolled for ignition interlock services, the ASAP will send a letter to the court on the date of your DUI hearing providing the court with the date of your ASAP pre-enrollment, the date of your interlock installation, and any interlock violations if incurred. _____

Notice

The Virginia Alcohol Safety Action Program (VASAP) collects the information on this form for identification purposes, to enroll you in the Virginia Alcohol Safety Action Program. You are not legally required to complete this form. You can refuse; however, VASAP cannot enroll you in the Ignition Interlock program. Program participants are subject to the terms and conditions set forth in this form. For Program enrollees, violations of the conditions outlined in the Program Guidelines may result in consequences including, but not limited to, an extension of time on the program, a return to court non-compliant, a referral for a treatment assessment, and/or termination from the program. VASAP will not share this form with other entities; however, through the program, VASAP collects driver's information that may be released to the following: state and federal enforcement agencies; licensing boards and agencies; state and federal courts; law enforcement agencies and prosecutorial authorities; persons and entities named pursuant to a court order; and any other person or entity authorized by state or federal law.

Signature

Date

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DMV REQUIREMENTS INFORMATIONAL SHEET

All information is subject to change

If you have been placed in the ASAP program by the Court and are granted a **Restricted License**, you must do the following within **60 days of your court date** so that DMV will not suspend your Restricted License:

1. You must have surrendered your license to the Court Clerk or Judge on the day of your conviction.
2. You may be issued a Restricted Driver's License (green copy-form DC265, DC266, Dc269) by the Court. After you enroll in the program, you are allowed to drive on this order (unless there is an Ignition Interlock requirement) until such time you apply to DMV for the second part (photo copy) of your restricted license, as long as there are no other problems with your driving record. YOU MUST WAIT AT LEAST 30 DAYS FROM YOUR COURT DATE BEFORE YOU CAN GO TO DMV, BUT YOU ARE REQUIRED TO GO WITHIN 60 DAYS OF YOUR COURT DATE.
3. If you are required to have the Ignition Interlock Device, you are required to install this device on your primary vehicle (unless the court has ordered all vehicles titled in your name) and all vehicles titled in your name if this is a second DUI. The Ignition Interlock Device must be installed in your vehicle(s) within 30 days of the court order. You may not operate a vehicle if you are required to have the interlock device until the device is installed.
4. DMV may be mailing you a letter requesting that you do the following:
 - A. Provide proof to DMV that you have filed for FR-44 insurance. This is assigned risk insurance, and the FR-44 form is obtained from your insurance company. Ask the insurance agent to make a special note on the FR-44 form, showing that it is being filed as a result of your DUI conviction. This will help DMV process your license much faster.
 - B. You must pay a Reinstatement Fee to your local DMV. Save your receipt. *(As of July 1, 2011, in addition to the reinstatement fee, Virginia law requires payment of a \$5 fee for each additional suspension or revocation order in effect when reinstating driving privileges.)*

REMEMBER, EVEN IF YOU DO NOT RECEIVE A LETTER FROM DMV, IT IS YOUR RESPONSIBILITY TO OBTAIN THE PLASTIC PHOTO PART OF YOUR RESTRICTED LICENSE FROM DMV WITHIN 60 DAYS OF YOUR COURT DATE. If you do not obtain the photo part of your Restricted License from DMV within 60 days of your court date, your license is **REVOKED. You cannot drive.**

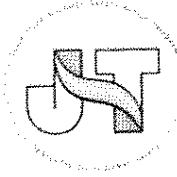
If you need to correct information or make changes on your green restricted driver's license, you must go to the Clerk of Court to have this done. ASAP does not have the authority to make any changes on your restricted license. If you receive a new ROL, you must come to John Tyler ASAP to have it signed and sealed on the back. Should you have further questions regarding your restricted license or the filing of the FR-44 insurance form, you must contact DMV or your insurance agent. You may need legal proof of your identity at DMV, i.e. birth certificate, Social Security card. For further information, please contact DMV.

Signature _____ Date: _____

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DMV Administrative Enrollment & ASAP Interlock Monitoring Fee

Clients are required to enroll with the local ASAP in order to begin ASAP interlock monitoring services for a DMV interlock requirement. The enrollment requirement applies even in case where a client is transitioning from a court interlock requirement to a DMV administrative interlock requirement at the expiration of the restricted license order. Enrollment requires that the client sign the Commission on VASAP "Authorization for Release of Confidential Information Form" and provide an updated (within past 30 days) "DMV Compliance Summary".

The ASAP is permitted to charge a \$50 per month ignition interlock monitoring fee. This \$50 per month service fee begins the day you enroll with ASAP as a DMV administrative interlock requirement or the date of your restricted license expiration, if originally court ordered. Service fees that become 60 days overdue will result in unsuccessful closure of your case and a suspension of your driver's license through Virginia DMV. If this occurs, you will be required to re-start DMV administrative interlock requirement after paying all outstanding ASAP monitoring fees.

By signing below, I acknowledge that I understand and agree to abide by all requirements

Signature: _____

Date: _____

VASAP CONSENT FOR THE RELEASE OF CONFIDENTIAL INFORMATION - GENERAL

Probationer: _____ Date of Birth: _____

I hereby grant the Virginia Alcohol Safety Action Program (VASAP) consent to exchange information related to my ASAP requirements with:- the court of record/referral

- the Commonwealth Attorney's office
- attorney(s) of record
- local, state and federal law enforcement agencies
- other criminal justice entities
- the Virginia Department of Motor Vehicles
- applicable VASAP ignition interlock service providers and remote alcohol service providers

For the purpose of facilitating, supervising, verifying and reporting my participation in, and compliance with ASAP requirements.

I understand that I am being referred to the Alcohol Safety Action Program **by a court**. Information concerning my participation will be reported to the court, and my consent for that purpose will terminate upon successful completion of my ASAP probation. In the event of noncompliance, this Consent for Release of Confidential Information will not expire until the referring court formally terminates the Alcohol Safety Action Program's oversight of the case.

I understand that I am enrolling in the Alcohol Safety Action Program to complete a **DMV requirement**. This Consent for the Release of Confidential Information shall expire automatically upon termination of my ASAP participation.

I understand that my records are protected under Federal Confidentiality Regulations (42CFR Part 2) and cannot be disclosed without my written consent unless otherwise provided for in the regulations. I further understand that all **treatment** information is protected under HIPPA and cannot be released by the ASAP without my consent; however, should I elect to transfer to another ASAP, all records to include treatment records will be sent to the supervising ASAP in order to effectively administer my case. A copy of this Consent for Release of Confidential Information form shall be considered to be valid as the original.

Executed this _____ day of _____, 20_____

Participant's Signature: _____

Parent/Guardian Signature (required if under the age of 18): _____

To revoke consent for release of information, complete this section.

Date Revoked: _____

Participant's Signature: _____

Parent/Guardian Signature (if required): _____

PROHIBITION ON RE-DISCLOSURE: This information has been disclosed to you from records protected by Federal Confidentiality Rules (42 CFR Part 2). The Federal Rules prohibit you from making any further disclosure of this information unless further disclosure is expressly permitted by the written consent of the person to whom it pertains or as otherwise permitted by 42 CFR Part 2. A general authorization for the release of medical or other information is not sufficient for this purpose.

Virginia Alcohol Safety Action Program

Electronic Communication Authorization Consent Form

I understand that due to the risk of electronic communications being misdirected, hacked or intercepted by unintended parties, the Virginia Alcohol Safety Action Program (VASAP) cannot guarantee that confidential messages sent over the Internet will not be subject to unintended disclosure or other privacy breaches.

I understand that electronic communications to/from VASAP may contain personnel information that is protected by federal confidentiality guidelines.

I further understand that electronic communications sent to/from work devices may be subject to review by my employer.

I consent to the use of electronic devices such as but not limited to mobile phone, tablets, laptop, etc.

Acknowledging the above, I hereby authorize the Virginia Alcohol Safety Action Program to communicate with me via electronic communications regarding my case until such time as my ASAP case is closed, or this authorization is rescinded by me.

Signature: _____

Printed Name: _____

Date: _____

DOB: _____