

**IGNITION INTERLOCK ACKNOWLEDGEMENT FROM EMPLOYER**

\_\_\_\_\_, is currently serving a (probation) (conditional discharge)  
(FULL NAME OF OPERATOR)  
sentence in \_\_\_\_\_ County to expire on \_\_\_\_\_.

This letter is to confirm that the Employer has been notified of the restricted nature of the driver's license held by \_\_\_\_\_ requiring installation and maintenance of  
(FULL NAME OF OPERATOR)  
an ignition interlock device in any motor vehicle he/she owns or operates in accordance with New York State Vehicle and Traffic Law Article 31. Pursuant to Vehicle and Traffic Law Section 1198(8), on behalf of the employer, I hereby give permission that \_\_\_\_\_ may operate the  
(FULL NAME OF OPERATOR)  
Employer's vehicle(s) without such a device only in the course and scope of his/her employment for business purposes. The Employer's motor vehicle(s) is/are not owned, or partly owned, or controlled by the Operator.

This statement of acknowledgement must be in his/her possession while operating the Employer's vehicle.

Employer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Employer (print name): \_\_\_\_\_

Company/Business: \_\_\_\_\_

Title: \_\_\_\_\_

Phone: \_\_\_\_\_

**Vehicle Information**

Year/Make/Model: \_\_\_\_\_

License Plate: \_\_\_\_\_

V.I.N.: \_\_\_\_\_

Monitoring Authority: \_\_\_\_\_

Phone: \_\_\_\_\_

**(ATTACH INFORMATION RELATED TO ADDITIONAL VEHICLES IF APPLICABLE)**

3 COPIES: ONE TO EMPLOYER, ONE TO EMPLOYEE, ONE TO MONITORING AGENT