

## Smart Start Interlocks Client Report Release Form

### Client Information

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_

Email \_\_\_\_\_

### Alcohol Education Agency Information

Alcohol Education Agency \_\_\_\_\_

Contact Name \_\_\_\_\_

Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_

Appointment Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Court Date \_\_\_\_/\_\_\_\_/\_\_\_\_

First time to Court for the Removal Order: Y      N

Under the current re-licensing scheme Smart Start Interlocks, Victoria is required to release alcohol interlock data to clients selected Victorian Accredited Driver Education Agency, who are responsible for providing assessments to the courts & Vic Roads. By Filling in this form and signing it, I hereby authorise Smart Start Interlocks Victoria to release reports that contain data on the use of the equipment and any other information pertaining to the client's participation in, or compliance or non-compliance with the requirements of the Victorian Court Ordered Interlock Program.

Client Signature \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**\*Please be aware Smart Start does not supply reports directly to the courts.**

