LifeSafer Pe rmission of Ignition Interlock Installation by Registered Ve hicle Owner

Iduly certify this letter as official authorization and acceptance of the installation of an ignition interlock alcohol breath analyzer system on the below-described vehicle and that said vehicle is currently registered in my name or the company for which I am the authorized representative.

I reserve the right to require removal of the ignition interlock system by the interlock service provider at any time upon reasonable notification, or reasonable effort to notify, the below-named ignition interlock participant. Such notification shall not be necessary should the below-named participant be found in violation of his /her restricted driving privileges or other requirements, restrictions, policies and procedures æ set forth by the MTO and/or the Ignition Interlock Service Provider. The interlock service provider shall be required to remove the interlock system by appointment upon presentation of the vehicle by owner at the LifeSafer designated service centre.

In lieu of returning the vehicle to an ignition interlock service centre, I reserve the option to have the interlock system removed by LifeSafer service personnel or other LifeSafer approved technician at the vehicle location. Any reasonable service charges for onsite removal shall be paid by me to the service provider at the time of removal.

I understand and accept responsibility for making the interlock-equipped vehicle available to the ignition interlock service provider for the unit removal should the below-named ignition interlock participant fail to return the vehicle for the prescribed service and/or removal due to loss of his /her driving privilege. I shall not be responsible for any costs of removal of the systemins uch a circumstance.

Under no circumstance shall I be responsible for lease fees as accrued by the below-named interlock participant so long as vehicle is returned and/or made available to service provider for interlock removal on a timely basis.

VIN #:	Lic. Plate#:	Province of Reg:		
Make: Model:		Colour:	Year:	
Owner(companynameifapplicable):				
Owner's Signature (representative	if applicable):		Date:	-
Interlock User's Name (please print)_				
Interlock User's Drivers License #:		Province:		
	Province of			
I, F F also acknowledged the due execut	personally appeared bef	fore me this day and aff		ation is true and
Witness my hand and initial s	seal, this the day of	,20		
(OFFICIAL SEAL)	Notar	y Public:		
My commission expires				

Notary only required if registered owner is not present at interlock installation