



IGNITION INTERLOCK EMPLOYMENT EXEMPTION AFFIDAVIT

FOR LAW ENFORCEMENT OFFICIALS: This Affidavit allows this person to drive an **employer-owned vehicle** not equipped with ignition interlock for employment purposes. It cannot be used to drive a school bus, school vehicle, a vehicle designed to transport more than 15 passengers or by certified inspection mechanics. **See Warnings on back.**

| DRIVER INFORMATION (Type or print information) | | | | | |
|---|---|---|--|----------------|------------------|
| A | LAST NAME | JR. ETC. | FIRST NAME | MI | DRIVER LICENSE # |
| | STREET ADDRESS | | | | |
| | CITY | STATE | ZIP CODE | | |
| EMPLOYER INFORMATION | | | | | |
| B | NAME OF EMPLOYER | | | | |
| | ADDRESS | | | | |
| | CITY | STATE | ZIP CODE | | |
| | SUPERVISOR NAME AND TITLE | | TELEPHONE NUMBER OF IMMEDIATE SUPERVISOR | | |
| VEHICLE INFORMATION | | | | | |
| List information on each vehicle this driver will operate for employment purposes | | | | | |
| C | Year | Make | Model | License Plate# | State |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| WORK/DRIVING SCHEDULE | | | | | |
| Explain how driver's position requires them to operate a company vehicle as part of their employment. Provide the territory or area in which they must drive, along with the days and hours they work. | | | | | |
| D | DRIVER'S POSITION | | | | |
| | TERRITORY/AREA | | WORK DAYS & HOURS | | |
| | | | | | |
| E | SUBSCRIBED AND SWORN | | | | |
| | TO BEFORE ME: MONTH DAY YEAR | | | | |
| | NOTARIZATION | X _____ SIGNATURE OF PERSON ADMINISTERING OATH | | | |
| | | S E A L | SIGN IN PRESENCE OF NOTARY | | |
| I hereby certify that the above named driver's job responsibilities require them to operate a company vehicle owned and registered to _____ | | | | | |
| I am aware that they are is currently restricted to drive vehicles equipped with an ignition Interlock device. I further understand that the Ignition Interlock Exemption is only valid for operating a company vehicle for business purposes and not for personal use. I certify that I have notified the employee of these restrictions. I swear or affirm that the statements made herein are true and correct, and that any statement made on or pursuant to this form are subject to the penalties of 18 PA C.S. Section 4903(a)(2) (relating to false swearing), which shall include punishment of a fine not exceeding \$5,000, or to a term imprisonment of not more than two years, or both. | | | | | |
| _____ Signature of Employer | | | | | |

WARNING

The Employment Exemption Affidavit allows an individual who holds an ignition interlock license to drive an **employer-owned vehicle** not equipped with ignition interlock for work purposes only. The Employment Exemption Affidavit **cannot** be used:

- to drive a school bus, school vehicle, or a vehicle designed to transport more than 15 passengers;
- if the employer-owned motor vehicle is owned by an entity which is wholly or partially owned or controlled by the person holding the ignition interlock license.
- if the employer-owned vehicle is made available to the employee for personal use.
- by certified inspection mechanics to test drive customer vehicles.

The Employment Exemption Affidavit must be completed **in its entirety** and be in the driver's possession while operating an employer-owned vehicle not equipped with ignition interlock. If driver does not have a completed Employment Exemption Affidavit in their possession they can be cited for driving without an ignition interlock.

INSTRUCTIONS

This form must be completed by the employer.

SECTION A - DRIVER INFORMATION

- Please type or print information as it appears on the employee's driver's license.

SECTION B - EMPLOYER INFORMATION

- Provide name address of your business.
- Provide name and phone number of driver's immediate supervisor.

SECTION C - VEHICLE INFORMATION

- Provide information on all employer-owned vehicles that the driver may operate during their normal course of business.

SECTION D - WORK/DRIVING SCHEDULE

- Provide detailed information on how the driver's position with your company requires them to drive an employer-owned vehicle.
- Provide detailed information on where the driver is required to drive for employment purposes.
- Provide the driver's work days and work hours.

SECTION E - NOTARIZATION

- Form must be signed by an officer of the company or immediate supervisor.
- Signature must be notarized.