

**IGNITION INTERLOCK PROGRAM
NON-OWNED VEHICLE INSTALLATION APPROVAL**



Under [Washington Administrative Code \(WAC\) 204-50](#), when an ignition interlock device is to be installed into a vehicle not owned or registered to the restricted driver, a letter of authorization from the registered owner of the vehicle to which the ignition interlock device is to be installed must be obtained, approving the ignition interlock device installation.

When completed properly, this form will be accepted by all certified ignition interlock service centers in Washington State as a letter of authorization under WAC 204-50.

Restricted Driver

First Name	Last Name
Driver's License Number	() Phone Number

Vehicle/Registered Owner

Vehicle License	State	Make	Model	Color
First Name	Last Name			
Street Address	City	State	ZIP	

Manufacturer of Ignition Interlock Device

- CST/Intoxalock Draeger Guardian LifeSafer Simple Smart Start

Authorization Statement

As the registered owner of the above-identified vehicle, I hereby authorize the above-named restricted driver to have an ignition interlock device installed in this vehicle. I understand that I am not responsible for any fees or charges associated with the installation and lease of the ignition interlock device in my vehicle. I understand that I may request the removal of the ignition interlock device at any time, which may subject me to paying a removal fee. I understand that an ignition interlock device may only be removed by a service center associated with the ignition interlock device installed in my vehicle.

I understand that if I attempt to circumvent or tamper with the ignition interlock device installed in my vehicle, I may be criminally prosecuted.

Signature of Registered Owner	Date
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