IGNITION INTERLOCK PROGRAM

SERVICE CENTER NETWORK CHANGE NOTICE

As required by Washington Administrative Code 204-50-120(1)(d), written notification is being provided to the Washington State Patrol (WSP) of the following service center network change in Washington State by interlock manufacturer ☐ Draeger ☐ Intoxalock ☐ LifeSafer ☐ Simple ☐ Smart Start

Service Center Name _____ WSP Cert. ID _____ Effective Date _____

☐ The service center is voluntarily surrendering its WSP certification and ending interlock service.

OR

☐ The service center is relocating* to: _____

*Any physical address change requires a new application and inspection by the WSP.

Interlock service technicians currently assigned to this service center who will be impacted by this change are:

Name (First, MI, Last)	WSP Cert. ID (ex. InteT0123)	Status (Voluntarily decertifying, Relocating to…)

*If more space is needed, attach additional sheets in the same format. ☐ Check if additional sheets are attached.

How many active interlock clients are impacted by this change? _____

Does this change impact the seventy-five mile coverage area requirement in WAC 204-50-120(1)(b)?
☐ Yes ☐ No

I certify (or declare) under penalty of perjury under the laws of the state of Washington, that the foregoing and all included documents are true and correct (RCW 9A. 72.085).

Printed Name of Manufacturer Representative _____ Date _____

Signature of Manufacturer Representative* _____ Location Signed (City, State) _____

*(Electronic signature is acceptable if name matches e-mail account)

A completed copy of this form must be e-mailed to interlock.applications@wsp.wa.gov within seven days of the above-described change.