Tennessee Department of Safety and Homeland Security



Ignition Interlock Program

TECHNICIAN APPLICATION

Affiliated Service Center:				Original
				Renewa
Name:				Date of Birth:
Last Address:	Middle	Firs	t	
Street		City		State ZIP
Phone Number: ()			D : 1:	
Do you currently have a valid driver l If no, explain:	icense?	Yes 🗌 No 🗌	Driver Licens	se Number & State
Background				
Background Have you ever been convicted, forfeited bond, or are you currently on probation for any felony (or any				
equal offense under military law)? A felony is defined as an offense punishable by imprisonment for a term of one year or greater. Yes I No I				
If yes, explain (use separate sheet if needed):				
Are you an employee of the Department of Safety and Homeland Security? Yes No If yes, explain:				
Training				
Are you certified to install interlock d	evices?		Yes 🗌	No 🗌
Certification Date: Manufacturer Name:				
List any experience in providing the services of installation, uninstallation, and servicing ignition interlock devices in other jurisdictions (use separate sheet if needed):				
The Ignition Interlock Program may any violation of the law, rules, or reg Interlock Program may deny, revoke	Julations	s relating to the Ig	nition Interlock	Program. The Ignition
 Conviction of a felony or any moral turpitude; 		U	•	· · · · •
 Knowingly presenting false or misleading information to the Ignition Interlock Program; or The presence of alcoholic beverages or narcotic drugs on the premises. 				

I affirm that I have read and understand the obligations of the Ignition Interlock Device technician set forth in the *Rules of Ignition Interlock Device Program T.C.A.* §1340-03-06 and am fully capable of carrying out said obligations. I give consent for the Ignition Interlock Program to conduct whatever investigations necessary to determine my eligibility. I understand that false, misleading, or incomplete information in my application may result in denial, suspension, or revocation of my application, as well as possible criminal prosecution and civil action. Under penalty of perjury, I do hereby affirm that the information contained within this application, and any statements made in connection therewith, are complete, true, and correct.

Signature:

Date: