



Ignition Interlock Operator's Affidavit

All drivers who are required to have an Ignition Interlock Device installed in all vehicles that they own, lease, or operate must complete this entire affidavit and submit it to the Registry of Motor Vehicles.

A. Operator's Information (Please print)

Last Name		First Name	Middle Name	Suffix
Date of Birth (MM/DD/YYYY)		License #	Phone #	
Residential Address (Where you actually reside)				
Street	Apt. #	City	State	Zip Code
Mailing Address <input type="checkbox"/> (same as above)				
Street	Apt. #	City	State	Zip Code
Email				

B. List All Licensed Drivers Residing with the Operator

For these purposes, "residing" shall mean living in the same household, apartment, or unit number. Use additional pages to list other licensed drivers, if necessary.

Name	DOB (MM/DD/YYYY)	License #
Name	DOB (MM/DD/YYYY)	License #
Name	DOB (MM/DD/YYYY)	License #
Name	DOB (MM/DD/YYYY)	License #
Name	DOB (MM/DD/YYYY)	License #
Name	DOB (MM/DD/YYYY)	License #
Name	DOB (MM/DD/YYYY)	License #

C. List Each Vehicle Owned, Leased, or Driven by the Operator (Use additional pages to list if necessary)

Make	Model	Registration #	VIN #
Make	Model	Registration #	VIN #
Make	Model	Registration #	VIN #
Make	Model	Registration #	VIN #
Make	Model	Registration #	VIN #
Make	Model	Registration #	VIN #
Make	Model	Registration #	VIN #

Continued on Next Page

D: Sanctions for Violating the Ignition Interlock Requirements: Criminal Penalties

- 1) _____
Initial
Massachusetts General Law (MGL) Chapter 90, Sec. 24S: Ignition Interlock Device – Failure to Use: I understand that, as long as I have an Ignition Interlock Device restriction, I may NOT operate ANY vehicle that does not have a functioning Ignition Interlock Device. This includes any vehicle I own, lease, rent, borrow, use in employment, or have access to. If, after a hearing, it is found that I have violated this provision, then my license will be revoked for the remainder of my hardship period, plus an additional 10 years. In the event my license has been fully reinstated, it will be revoked for 10 years. I also understand that the criminal penalties for doing so are a fine of \$1,000 to \$15,000, and not less than 180 days or up to 2 ½ years in the house of correction for a first offense, and not less than 2 ½ years or up to 5 years in state prison for a second or subsequent offense. I understand that anyone who allows me to operate a vehicle without an Ignition Interlock Device may be subject to criminal penalties.
-
- 2) _____
Initial
540 Code of Massachusetts Regulations (CMR) 25.08: Conditions of Hardships, Licenses, and License Reinstatements: I have listed all licensed drivers at my residence, and have informed them of the requirements of an Ignition Interlock Device as a condition of my license. I also understand I have an ongoing obligation to update this information with the Registry of Motor Vehicles.
-
- 3) _____
Initial
540 CMR 25.09: Lockouts: I understand that a device lockout will occur if: 1) I miss or am late to a service visit appointment. 2) I fail two (2) startup tests with a blood alcohol concentration greater than .02 within one service period. 3) I miss two (2) rolling re-tests within one service period. 4) I fail one (1) rolling re-test. I understand that when any of these events has triggered a lockout, I have 48 hours to bring the vehicle to my service provider, and that failure to address the lockout within this 48 hour period will result in the vehicle being locked permanently, except that a lockout for a missed or late service visit will commence immediately after the 30th day following my previous monthly service visit, and I understand that only the service provider may release my vehicle at this time, and I am responsible for any and all charges associated with getting the vehicle to the service provider in a lawful manner, in addition to any re-set charges incurred for the lockout.

If my Ignition Interlock Device is locked out, I understand that the Registry will consider any lockout of the device to have been caused by me, and also understand that it is my responsibility to inform anyone using my vehicle(s) of that. Since any lockout of my vehicle will be assessed against me, I accept responsibility for any lockouts of the vehicles I own.
-
- 4) _____
Initial
540 CMR 25.09: Lockouts: I understand that my service provider is required to immediately report all lockouts to the Registry. I understand that I have 30 days from the date of any lockout to appear before a Registry Hearings Officer to contest the lockout if I believe that the lockout should not be held against me. Failure to appeal a lockout within this 30 day period will extinguish all my rights to contest the circumstances of this lockout at any future time or at any future Registry hearing.
-
- 5) _____
Initial
540 CMR 25.07: Cost and Maintenance: I understand that each vehicle with an Ignition Interlock Device that I own, operate, or lease must be brought into a service center within 25-30 days of the previous visit, or a lockout will be registered upon the device. I understand that late service visits are logged as missed service visits. I understand that the RMV and service providers are unable to offer a grace period on this maintenance requirement.

Section 58 of Chapter 227 of the Acts of 2020. I understand that, if the RMV requires me to install an Ignition Interlock Device for reinstatement, I may be able to apply for an indigency waiver of certain costs to obtain, maintain, and provide monitoring. Please see <https://www.mass.gov/guides/ignition-interlock-device-program> for more details.
-
- 6) _____
Initial
Massachusetts General Law (MGL) Chapter 90, Sec. 24T and 24S: Ignition Interlock Device – Tampering and Misuse: I understand that it is a criminal offense to circumvent, interfere with, or tamper with a certified Ignition Interlock Device with the intent to disable such device, punishable by imprisonment in the house of correction for not less than 6 months nor more than 2 ½ years, or in State Prison for not less than 3 years nor more than 5 years.
-
- 7) _____
Initial
540 CMR 25.10 Ignition Interlock Violations; 540 CMR 25.11 - Ignition Interlock Sanctions: I understand that having any other person blow into the Ignition Interlock Device, use any device other than my own mouth to provide a sample, or otherwise tamper with, remove, or compromise the Ignition Interlock Device in any way constitutes a violation of my restricted license. If cause is found after a hearing, my license will be revoked for the remainder of my hardship period, plus an additional 10 years. In the event my license has been fully reinstated, it will be revoked for 10 years.
-
- 8) _____
Initial
540 CMR 25.10 Ignition Interlock Violations; 540 CMR 25.11 - Ignition Interlock Sanctions: I understand that a “failed test” is one with a blood alcohol concentration greater than .02. Two (2) failed startup tests and/or one (1) failed rolling retest within one service period will result in a lockout.

Upon a second lockout for a failed rolling retest, if cause is found after a hearing, my license will be revoked for the remainder of my hardship period, plus an additional 10 years to lifetime. In the event my license has been fully reinstated, it will be revoked for 10 years to lifetime. Upon a second lockout over the life of the program for two (2) lockouts due to two (2) failed startup tests within one service period, if cause is found after a hearing, my license will be revoke for the remainder of my hardship period, plus six months for a first offense, five years for a second offense, or ten years for a third or subsequent offense.
-
- 9) _____
Initial
540 CMR 25.10 Ignition Interlock Violations; 540 CMR 25.11 - Ignition Interlock Sanctions: I understand that, after I start my vehicle, the Ignition Interlock Device will require one or more “rolling re-tests.” When the Ignition Interlock Device alerts me to perform a rolling re-test, I will be required to do so within five (5) minutes. Failure to do so will cause a missed rolling re-test. Two missed rolling re-tests will result in a lockout of the vehicle. For two (2) lockouts, if cause is found after a hearing, my license will be revoked for the remainder of my hardship period, plus an additional 10 years. In the event my license has been fully reinstated, it will be revoked for 10 years.
-
- 10) _____
Initial
540 CMR 25.09 Scope and Applicability: I understand that I cannot operate a motorcycle, as Ignition Interlock Devices will NOT be installed on motorcycles. Motorcycle license must be downgraded to a class “D” license only. I will be required to take a full exam to obtain a new motorcycle license, once the interlock program is completed.

- 11) _____
Initial
540 CMR 25.12 Removal of Ignition Interlock Restriction: I understand that I may not have an Ignition Interlock Device removed without written, stamped authorization of the Registrar. To have a device(s) removed, I understand that once my time is complete in the interlock program, I must demonstrate to a Registry Hearings Officer that I have had no ignition interlock infractions and no ignition interlock violations for the six months immediately preceding my application for removal. I understand that, if I cannot so prove, the ignition interlock restriction will be extended until I make an application that meets this requirement, as well as all other licensure requirements.
-
- 12) _____
Initial
540 CMR 25.08 (11): Conditions of Hardships, Licenses, and License Reinstatements: I understand that the early removal of the Ignition Interlock Device will result in an immediate revocation of my license. I may NOT operate any motor vehicle in the Commonwealth of Massachusetts, regardless of license status of another jurisdiction, until the interlock requirements as prescribed by Massachusetts law are fulfilled. I further acknowledge that any suspension or revocation time assessed during my interlock program will be added to the initial interlock term end date. Whenever my license/right to drive is suspended or revoked, I am no longer active in the program and will NOT receive credit toward the interlock program.
-
- 13) _____
Initial
540 CMR 25.08 (11): Conditions of Hardships, Licenses, and License Reinstatements: I understand that, if my vehicle becomes disabled, totaled, or repossessed, it is my immediate responsibility to report to a Registry Hearings Officer for an early removal. I will need to provide proof of new installation and complete new affidavits in order to continue time in the interlock program.
-
- 14) _____
Initial
I understand that ingestion of any alcoholic beverages within a reasonable period of time, prior to operation of a motor vehicle may result in breath test violations, e.g. failed initial start-ups and failed rolling retests. Drinking the night before and operating the following morning may cause these violations.
-
- 15) _____
Initial
I acknowledge that this affidavit and any required Additional Resident Affidavits must be returned to the RMV prior to approval in order to receive credit towards the interlock program.
-
- 16) _____
Initial
I understand that, in order to receive credit in the program, I must reinstate my right to operate and obtain a permit or license.
-
- 17) _____
Initial
I understand that, in order to participate in the Ignition Interlock Program, I must have an active license/permit from Massachusetts or an active Out of State license, and the Ignition Interlock Vendor must be an approved service provider under 540 CMR 25.05 in Massachusetts and must provide real time data through the Registry interface. I understand that failure of a service provider to comply with this criteria may result in my need to demonstrate there have been no infractions or violations, and an extension of my time in the interlock program.
-
- 18) _____
Initial
I have read the above terms and conditions, and agree to them. I understand that failure to abide by them will subject me to additional loss of license and potential criminal penalties as stated. I also understand that, if any of the information provided by me is false or incorrect, my restricted license may be subject to revocation.
-
- 19) _____
Initial
I also understand I have an ongoing obligation to notify the Registry of Motor Vehicles of any changes with my interlock status. Updated information shall include, but is not limited to, change of address, transfer to a new vehicle, adding an Ignition Interlock Device to an additional vehicle, totaled or disabled vehicles, additional licensed residents, and changes in Interlock Vendor/Service providers.
-

E. Signature

I certify under the penalty of perjury that the information I have provided is true and correct to the best of my knowledge.

Operator's Signature: _____ Date: _____

Parent/Guardian's Signature: _____ Date: _____