



- MUST USE MOST **CURRENT** FORM
- **PRINT** CLEARLY IN BLACK INK
- MAKE SURE ENTIRE CIRCLE IS **FILLED**

EXAMPLE:

Yes  No

**Ignition Interlock Vendor's Information Change Form**

<b>General Information</b>		
I understand that this form is ONLY to be used to change mailing address, phone numbers, web address, devices, and services provided. If changing the physical location of the Vendor's Service Center, a new application and fee will be required.		
<b>Type of Change:</b>		
<input type="radio"/> Service Center Information	<input type="radio"/> Devices	<input type="radio"/> Services Provided

↑ THE ABOVE SPACE IS RESERVED FOR OFFICE USE ONLY ↓

<b>PART I. VENDOR'S INFORMATION</b>			
Previous Service Center Name: (if applicable)		Service Center Number (as indicated on certificate):	
New Service Center Name (as it appears on business license):			
New Toll - Free Phone Number:		New Service Center Email:	
New Web Address (if applicable):			
New Service Center Mailing Address (if different from physical address):			
City:		State (2- Letter Code):	ZIP:
New Printed First Name of Business Manager:		New Printed Last Name of Business Manager:	
New Business Manager Phone Number:		New Business Manager Email:	
New Printed First Name of Business Owner:		New Printed Last Name of Business Owner:	
New Business Owner Phone Number:		New Business Owner Email:	

<b>PART II. NEW AND CURRENT MANUFACTURERS' DEVICES SERVICED (SELECT ALL THAT APPLY)</b>	
<input type="radio"/> A & A Product Company - FIT228 LC <input type="radio"/> Alcohol Detection Systems - DM 904 and/or DM 909 <input type="radio"/> Alcolock - WR2 and/or LR <input type="radio"/> America's Alcohol Testing Inc. - Freedom 5 Interlock <input type="radio"/> B.E.S.T. Labs Inc. - FR 9000 <input type="radio"/> Blow And Drive Interlock - BDI 747 <input type="radio"/> Clean Start Systems - CSS APIID 700 <input type="radio"/> Drager - XT and/or 3530920 and/or Interlock 7000 <input type="radio"/> Guardian - 3060 and/or AMS 2000 <input type="radio"/> Instant Interlock - Bracaudit Lock I <input type="radio"/> Intoxalock - 1001A <input type="radio"/> Lifesafer - FC100 <input type="radio"/> Low Cost Interlock - LCI 750 and/or TAB 720 and/or LCI 777 <input type="radio"/> Monitech Ignition Interlock Systems - QT 1L <input type="radio"/> Simple Interlock - Co Pilot <input type="radio"/> Skyfine - AT588 <input type="radio"/> Smart Start Inc. - SSI1000 and/or SSI 20/20 and/or SSI 20/30 <input type="radio"/> Other (SPECIFY MANUFACTURE AND DEVICE): _____	

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**III. NEW AND CURRENT SERVICES PROVIDED (SELECT ALL THAT APPLY)**

<input type="radio"/> Device Installation <input type="radio"/> Fixed Location <input type="radio"/> Mobile    If offering mobile services, provide the number of mobile units _____
<input type="radio"/> Device Monitoring <input type="radio"/> Fixed Location <input type="radio"/> Mobile    If offering mobile services, provide the number of mobile units _____
<input type="radio"/> Device Maintenance <input type="radio"/> Fixed Location <input type="radio"/> Mobile    If offering mobile services, provide the number of mobile units _____
<input type="radio"/> Device Removal <input type="radio"/> Fixed Location <input type="radio"/> Mobile    If offering mobile services, provide the number of mobile units _____

**PART IV. AGREEMENT AND AFFIRMATION**

I verify the information provided is true and correct, and I understand any required fee is non-refundable. I also understand this is an official government record and any missing information and/or false statement made on this document or any other supplement provided to DPS may result in criminal prosecution. Signature of the applicant or authorized individual further grants the director or his designee, the right to enter and to inspect the premises or any records required to be kept by Texas Law and Department rule. Furthermore, I understand I must install, sell, service, and or monitor Ignition Interlock Devices approved by the Texas Department of Public Safety and adhere to manufacture's specifications.

Manager Signature \_\_\_\_\_ Date \_\_\_\_\_

Owner Signature (if different from Manager) \_\_\_\_\_ Date \_\_\_\_\_

This form and any attachments may be forwarded electronically to:

<https://www.dps.texas.gov/rsd/contact/default.aspx>

**Privacy Policy** Sec. 559.003. RIGHT TO NOTICE ABOUT CERTAIN INFORMATION LAWS AND PRACTICES (a) Each state governmental body that collects information about an individual by means of a form that the individual completes and files with the governmental body in a paper format or in an electronic format on an Internet site shall prominently state, on the paper form and prominently post on the Internet site in connection with the electronic form, that: (1) with few exceptions, the individual is entitled on request to be informed about the information that the state governmental body collects about the individual; (2) under Sections 552.021 and 552.023 of the Government Code, the individual is entitled to receive and review the information; and (3) under Section 559.004 of the Government Code, the individual is entitled to have the state governmental body correct information about the individual that is incorrect. (b) Each state governmental body that collects information about an individual by means of an Internet site or that collects information about the computer network location or identity of a user of the Internet site shall prominently post on the Internet site what information is being collected through the site about the individual or about the computer network location or identity of a user of the site, including what information is being collected by means that are not obvious. Please visit: <http://www.statutes.legis.state.tx.us/docs/GV/htm/GV.559.htm>