MINNESOTA DEPARTMENT OF PUBLIC SAFETY



Employment Exemption for Ignition Interlock



Minnesota Ignition Interlock Device Program

This form can be faxed to (651) 797-1299. You may also bring this form to any Driver Exam Station (Visit the DVS Website for all Office Locations) or mail this form to Driver and Vehicle Services, Ignition Interlock Unit, 445 Minnesota Street, Suite 177, St. Paul, Minnesota 55101. For questions, contact DVS at (651) 296-2948 or visit http://dvs.dps.mn.gov.

NOTE: Eligibility for the employment exemption is restricted to participants in the Ignition Interlock Device Program that went into effect on July 1, 2011. Persons in the pilot program are not eligible for the employment exemption.

Address		City/State/Zip
Home Telephone Number/Cell Pho	one	Date of Birth
EMPLOYER SECTION (to	be filled out by the applicant's emplo	yer)
Name of Employer/Company		

CERTIFICATION

The employment exemption variance allows the program participant to drive an employer-owned vehicle not equipped with ignition interlock for employment purposes. The employment exemption variance will not be granted to:

- a program participant who is self employed; or
- who wholly or partially owns an entity that owns an employer owned motor vehicle.

A program participant, who is granted an employment exemption variance, shall not drive, operate, or be in physical control of any of the following:

- a Type III vehicle within the meaning of Minnesota Statutes 169.011, for transporting children under age 18 or vulnerable adults within the meaning of Minnesota Statutes, section 626.5572, subdivision 21;
- an employer-owned motor vehicle for personal use; or
- a rental car in the normal course and scope of employment duties.

1	Please Mark the Appropriate Box	
□ Drives company vehicle to and from	work for employment purposes only.	
□ Drives company vehicle on-the-job	or employment purposes only.	
□ Drives company vehicle to and from	work and on-the-job for employment purposes only.	
aware that he/she is currently restricted to d that this Employment Exemption is only valid use. In the event this employee is subject	is job responsibilities require him/her to operate a company vehicle. I am rive vehicles equipped with an ignition interlock device. I further understand d for operating a company vehicle for business purposes and not for personal to license plate impoundment, he/she will be required to display specials he/she operates including any employer-owned vehicles.	
Signature	Date	
	Witnessed by:	
	Subscribed and sworn to before me this day of 20 NOTARY PUBLIC	
	COUNTY	
	MY COMMISSION EXPIRES	
	Witness may be a representative of the Department of Public Safety or a Notary	
	Public.	