MINNESOTA DEPARTMENT OF PUBLIC SAFETY

Voluntary Withdrawal from the Ignition Interlock Device Program

Instructions: If you are voluntarily withdrawing from the Ignition Interlock Device Program, you must use this form to notify Driver and Vehicle Services (DVS). Credit will be given for time spent on the 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 dvs.dps.mn.gov.

I, _____, am voluntarily withdrawing from the
(First Name) (Middle Name) (Last Name)

Minnesota Ignition Interlock Device Program. I understand that my driving privilege will no longer be valid and/or limited.

☐ – ☐☐☐ – ☐☐☐ – ☐☐☐ – ☐☐☐

Driver's License Number

_____

First Name **Middle Name** **Last Name**

_____

Address **City/State/Zip**

_____ _____

Home Telephone Number/Cell Phone **Date of Birth**

_____

Signature **Date**