



**INSTALLATION INFORMATION SHEET**

TODAY'S DATE \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**PERSONAL INFORMATION**

NAME: \_\_\_\_\_  
First
Middle Initial
Last

DATE OF BIRTH: \_\_\_\_ - \_\_\_\_ - \_\_\_\_ EMAIL: \_\_\_\_\_

ADDRESS OF RESIDENCE: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

DRIVERS LIC #: \_\_\_\_\_ REPORTING STATE: \_\_\_\_\_

WORK PHONE #: \_\_\_\_\_ CELL PHONE#: \_\_\_\_\_

EMPLOYMENT NAME & ADDRESS: \_\_\_\_\_

**EMERGENCY CONTACT PERSON**

NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE #: \_\_\_\_\_

**VEHICLE INFORMATION:**

YEAR: \_\_\_\_\_ MAKE: \_\_\_\_\_ MODEL: \_\_\_\_\_

COLOR: \_\_\_\_\_ LIC TAG #: \_\_\_\_\_ VIN #: \_\_\_\_\_

**Loss/Damage Wavier**

Accept  Decline

\$5/month covers handheld against loss/damage. A \$250 deductible will apply at time of claim. Ignition Interlock System replacement cost is \$1500 without wavier.

**How did you hear about First Choice?** \_\_ State \_\_ Attorney \_\_ Google \_\_ AA/Treatment  
(check one) \_\_ Direct Mail Flyer \_\_ Website

Print name:

I \_\_\_\_\_ authorize First Choice Interlock Systems to install an Ignition Interlock into the above listed vehicle and I state that the above information is true and correct to the best of my knowledge. I authorize disclosure and/or release, orally or in writing any information relating to my participation in the ignition interlock program.

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_