



Administrative Driver's License Revocation Office ("ADLRO")

American Savings Bank Tower
1001 Bishop Street, Suite 500
Honolulu, Hawai'i 96813
Telephone: (808) 534-6800 / Fax: (808) 534-6888
Toll Free Number: 1-866-826-5656
Website: www.courts.state.hi.us/courts/administrative/adlro.html

APPLICATION FOR IGNITION INTERLOCK PERMIT

Instructions: Submit this application to the ADLRO along with 1) a copy of your Smart Start Ignition Interlock Lease Agreement as proof of installation of an ignition interlock device; and 2) proof of valid motor vehicle insurance or self-insurance for any vehicle in which an ignition interlock has been installed.

Respondent's Name: _____ ADLRO Case No.: _____

Residential Address: _____

City: _____ State: _____ Zip Code: _____

Mailing Address: _____

Year of Birth: _____ Telephone No(s): _____

I, the undersigned Respondent, understand that the ADLRO will not issue me an ignition interlock permit if:

1. My license is expired, suspended, or revoked as a result of action other than the instant revocation;
2. I did not hold a valid license at the time of my arrest for the violation of HRS §291E-61;
3. I hold a license that is a learner's permit or instruction permit;
4. I hold either a category 4 license under HRS §286-102(b) or a commercial driver's license under HRS §286-239(b) unless the ignition interlock permit is restricted to a category 1, 2, or 3 license under HRS §286-102(b); or
5. I am under the age of eighteen.

I also understand that:

1. If granted, the ignition interlock permit will allow me to drive only a vehicle equipped with an ignition interlock device;
2. While operating a motor vehicle equipped with the ignition interlock device, I must have a valid ignition interlock permit in my immediate possession;
3. My ignition interlock permit will expire on the last day of my revocation period or the expiration date of my driver license, whichever occurs first; and
4. If granted a valid ignition interlock permit, I may contact the County Division of Motor Vehicles driver's licensing section and request to take any tests necessary to apply for relicensing no sooner than thirty days prior to expiration of my revocation period, provided that a driver's license shall not be issued until the completion of my revocation period.

Respondent's Signature

Date

To schedule an installation appointment, call *Smart Start* at (800) 880-3394 or log-on to www.SmartStartInc.com

For ADLRO Use Only: Lease Agreement Submitted: _____		Valid License? Y N 18? Y N	
Revocation End Date: _____	DL Exp.: _____		
IIP Start Date: _____	IIP End Date: _____	Valid Ins? Y N	Issued By: _____