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ID-110

SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	*FOR COURT USE ONLY*
NAME OF DEFENDANT: STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: HOME TELEPHONE NO.: WORK TELEPHONE NO.: DRIVER'S LICENSE NO.:	
DATE OF COURT ORDER:	
IGNITION INTERLOCK INSTALLATION VERIFICATION	CASE NUMBER:

1. Manufacturer:
2. Facility location *(address):*
3. Vehicles:

	Make	Model	Year	Color	License Plate No.	VIN:
a.						
b.						
c.						

4. Serial Nos. of units: a. b. c.
5. Odometer reading: a. b. c.
6. Date of installation: a. b. c.
7. Date of next monitor check: a. b. c.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

▶ _____
(TYPE OR PRINT NAME OF INSTALLER)

▶ _____
(SIGNATURE OF INSTALLER)

Original sent to *(name of court):*

For installer use only:

Form Approved for Optional Use
Judicial Council of California
ID-110 [Rev. July 1, 2005]

IGNITION INTERLOCK INSTALLATION VERIFICATION
(Ignition Interlock Device)

Vehicle Code, § 23575
www.courtinfo.ca.gov

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