



STATE OF MICHIGAN
 JOCELYN BENSON, SECRETARY OF STATE
 DEPARTMENT OF STATE
 LANSING

APPLICATION FOR BAID INSTALLER CERTIFICATION

Please type or print legibly. Incomplete applications will be returned unprocessed.

Original Application Renewal Application

Name: (First) (Middle) (Last)			Date of Birth: (Month) (Day) (Year)		
Home Address: (Street)		(City)	(State)	(Zip)	
Email Address:			Phone Number:		
Driver License Number:		Driver License State of Issuance:		Mechanic Number (if known):	
Name of Ignition Interlock Manufacturer(s) you will be installing for:					

Have you been convicted of an alcohol-related driving offense in this or any other state within the last 5 years?

YES NO

Have you been convicted of a felony in this or any other state within the last 5 years? YES NO

You must submit a criminal history background check certified by the Michigan State Police and dated within 30 days of this application. The I-CHAT background check can be obtained from following website:

<https://apps.michigan.gov/>

Did you include an I-CHAT Criminal History with this application? YES NO

Certification and Signature:

I certify to the truth and accuracy of the representations made in this application, including all statements attached hereto. I hereby authorize the release of my driving record on file with the Michigan Department of State, and all criminal history information that pertains to me on file at the Michigan State Police Central Records Division or at any court of record.

Any misleading, incomplete, or false statement may be grounds for revocation, suspension, or denial of certification as a Michigan Breath Alcohol Ignition Interlock Device Installer.

Signature

Date

Completed applications must be submitted online by the Ignition Interlock Manufacturer.

Rev. 4/25/19