

122 S.W. 7th Street
Topeka, KS 66603



phone: 785-296-6800
fax: 785-296-5956
www.KansasHighwayPatrol.org

Erik Smith, Superintendent

Highway Patrol

Laura Kelly, Governor

For Office Use Only		
Service ID _____	Date Rcd _____	<input type="checkbox"/> INSPIRE
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IGNITION INTERLOCK TECHNICIAN APPLICATION

New Application \$40.00 Background check (KBI) Renewal Application Fee \$30.00

Name:			
Last	Middle	First	Date of Birth
Address:			
Street	City	State	ZIP
Phone Number	Email	Social Security Number	
Do you currently have a valid driver license? <input type="checkbox"/> Yes <input type="checkbox"/> No			D.L. Number
If no, explain:			
Citizenship: <input type="checkbox"/> USA <input type="checkbox"/> Other	Do you read, speak, write & understand English?		
Specify:	<input type="checkbox"/> Yes <input type="checkbox"/> No		

Background	
Have your driving privileges ever been revoked, suspended, or cancelled in any State? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you ever been convicted of, forfeited bond, or are you currently on probation for any felony (or any equal offense under military law)? A felony is defined by K.S.A. 21-5102(a) <input type="checkbox"/> Yes <input type="checkbox"/> No	
Training	
Are you certified to install interlock devices?	
<input type="checkbox"/> Yes Breath-Alcohol Operators Permit No. _____	<input type="checkbox"/> No
The certification date and name of manufacturer of the ignition interlock device.	
Date	Manufacturer Name
Experience	



List any experience in providing the services of installation, removal, and servicing ignition interlock devices in other jurisdictions:

Training from Manufacturer: Yes No

Name of Manufacturer: _____ **Date of Training:** _____

(Use separate sheet if needed)

The Kansas Highway Patrol may deny, suspend, or revoke the privilege of installing an ignition interlock device or the privilege of being an installer for any violation of the law, rules, or regulations relating to the installation, removal, and servicing of such device thereof. The Department may deny, revoke or suspend the installer for the following:

1. Knowingly presenting false or misleading information to the Department.
2. Failure or refusal to permit the Department to inspect, audit or investigate the premises, the installation records, etc.
3. Failure to submit the application with supporting documentation within the prescribed time limit.
4. Failure to maintain Department approved standards in instruction, equipment, or facilities.
5. The presence of alcoholic beverages or narcotic drugs on the premises.
6. A valid license

I affirm that I have read and understand the obligations of the Ignition Interlock Device installer set forth in the *Rules of Ignition Interlock Device Program 92-56-1-9* and am fully capable of carrying out said obligations. I give consent for the Kansas Highway Patrol to conduct whatever investigations necessary to determine my eligibility. I understand that false, misleading, or incomplete information in my application may result in denial, cancellation, suspension, or revocation of my application, as well as possible criminal prosecution and civil action. Under penalty of perjury, I do hereby swear or affirm that the information contained within this application, and any statements made in connection therewith, are complete, true, and correct.

Signature: _____

Date: _____

All application must be sent to the Attn: Laurie Martinez, KHP Headquarters, 122 SW 7th St, Topeka KS 66603 or LMartinez@ks.gov 785-296-5966