STATE OF CALIFORNIA
Department of Motor Vehicles

Occupational Licensing Industry News
OLIN 2023–07
Revised DL 9

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New Information

The Application for Certification of Ignition Interlock Device (DL 9, REV, 6/2022) has been revised and is available at **dmv.ca.gov/portal/uploads/2022/07/dl9.pdf.**

DL 9 Changes

The revised form has the following changes:

- SECTION 2 – OWNERSHIP INFORMATION
  — The email address field has been added as a new requirement.
- SECTION 5 – CORPORATION CERTIFICATION
  — "Affix Corporate Seal" in the lower left corner has been removed.

Background

Changes have been made to the DL 9 to comply with new regulations effective July 2023.

Contact

For further clarification of this memo, email DMVPolicyOLCompliance@dmv.ca.gov.

Attachment

Attachment

STATE OF CALIFORNIA
DMV
Department of Motor Vehicles

APPLICATION FOR CERTIFICATION OF IGNITION INTERLOCK DEVICE

SECTION 1 — TO BE COMPLETED BY THE MAIN OFFICE

NAME OF INDIVIDUAL, PARTNERSHIP, OR CORPORATION			TELEPHONE NUMBER
			( )
FIRM OR TRADE NAME	BUSINESS NAME OF MARKETED DEVICE	NAME/MODEL NUMBER OF DEVICE	
STREET ADDRESS	CITY	STATE	ZIP CODE

SECTION 2 — OWNERSHIP INFORMATION

List the name and title of the individual; each partner (designate whether general or limited); each principal officer, director, or stockholder participating in the direction, control, and management of the policy of the business. Attach additional sheets, if needed. Also complete Section 3, 4, or 5 below depending on whether ownership of the firm is individual, partnership, or corporation.

NAME *(Last, First, Middle)*	ADDRESS	TITLE	EMAIL ADDRESS

SECTION 3 — INDIVIDUAL CERTIFICATION

I certify under penalty of perjury under the laws of the State of California that I am the sole owner of (name of business) _____ and that all statements made on this application and all attachments to the application are true and correct. I shall indemnify and hold harmless the State of California, the Department of Motor Vehicles and its officers, employees, and agents from all claims, demands, and actions, as a result of damage or injury to persons or property which may arise, directly or indirectly out of any act or omission by the manufacturer relating to the installation, service, repair, use, and removal of an ignition interlock device.

SIGNATURE	DATE SIGNED
X	

SECTION 4 — PARTNERSHIP CERTIFICATION

I certify under penalty of perjury under the laws of the State of California that we are partners in (name of business) _____ and that no other person is associated in the ownership of the business, and that all statements made on this application and all attachments to the application are true and correct. I shall indemnify and hold harmless the State of California, the Department of Motor Vehicles and its officers, employees, and agents from all claims, demands, and actions, as a result of damage or injury to persons or property which may arise, directly or indirectly, out of any act or omission by the manufacturer relating to the installation, service, repair, use, and removal of an ignition interlock device.

SIGNATURE	DATE SIGNED	SIGNATURE	DATE SIGNED
X		X	
SIGNATURE	DATE SIGNED	SIGNATURE	DATE SIGNED
X		X	

SECTION 5 — CORPORATION CERTIFICATION

I certify under penalty of perjury under the laws of the State of California that (print corporate name) _____ is incorporated in the state of _____, our corporate number is _____, and that all statements made on this application and all attachments to the application are true and correct. I shall indemnify and hold harmless the State of California, the Department of Motor Vehicles and its officers, employees, and agents from all claims, demands, and actions, as a result of damage or injury to persons or property which may arise, directly or indirectly, out of any act or omission by the manufacturer relating to the installation, service, repair, use, and removal of an ignition interlock device.

SIGNATURE	PRINTED NAME/TITLE OF CORPORATE OFFICER AUTHORIZED TO SIGN	DATE SIGNED
X		

Print Clear Form