INSTRUCTIONS FOR COMPLETING THIS APPLICATION

PLEASE:

- complete this application on your computer using the TAB key or mouse to advance between fields and then print it out, or by typing, or printing legibly in black ink
- provide all information requested in Sections 1 to 4 of the application form
- include copies of all the required documents listed in Section 5 of the application form
- initial each statement in Section 6 of the application form
- sign and date the application in Section 7 of the application form
- if the application is postmarked on or after May 1st, include a check for a late fee made payable to the Traffic Safety Division in the amount of $25.00
- make a copy of the completed application and required documents for your records
- mail everything but these instructions to:

  Transportation Safety Center – Licensing Section  
  UNM Continuing Education  
  MSC07 4030  
  1 University of New Mexico  
  Albuquerque, NM 87131-0001

If you have any questions concerning this application, the forms or any of the requirements please contact:

- Andy Pena by email at apena01@unm.edu or by telephone at 505-277-6321 or by fax at 505-277-8975.

For information related to the Ignition Interlock Indigent Fund, please contact:

- Paula Gonzales by email at paula.gonzales@state.nm.us or by telephone at 505-827-0456 or 505-490-1183.
WHAT HAPPENS ONCE YOU SUBMIT THIS APPLICATION:

The Transportation Safety Center (TSC) on behalf of the Traffic Safety Division (TSD) will review your application within 15 days if it is complete. Applications will be reviewed in the order in which they are received. **Applications will not be considered complete until the TSD receives all required documents, including the MVD and DPS reports.**

If the application is not complete, the TSC will email you regarding the missing information or documents. If the TSC does not receive the missing information or documents within 10 days of the date of the email, your application will be returned to you. You may resubmit a complete application at any time.

If the TSD does not approve your application, you will receive a letter stating the reasons why it was not approved. If the reasons can be resolved, you may resubmit your application.

If the TSD approves your application you will be issued your Ignition Interlock Service Center license.

**NO PERSON MAY CONTINUE TO OPERATE AN IGNITION INTERLOCK SERVICE CENTER IN NEW MEXICO AFTER JUNE 30th OF THIS YEAR UNLESS AND UNTIL THE TRAFFIC SAFETY DIVISION HAS GRANTED WRITTEN APPROVAL BY ISSUING AN IGNITION INTERLOCK SERVICE CENTER LICENSE FOR THE FISCAL YEAR COMMENCING JULY 1st.**

➢ **PLEASE KEEP THESE INSTRUCTIONS FOR FUTURE REFERENCE.**
**APPLICATION FOR SERVICE CENTER LICENSE RENEWAL**

**Section 1 – Service Center Information.**

<table>
<thead>
<tr>
<th>Service Center Name (as it appears on business license)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Service Center Physical Address (must include city, state, and zip code)</td>
<td></td>
</tr>
<tr>
<td>Service Center Mailing Address (if different from physical address)</td>
<td></td>
</tr>
<tr>
<td>Toll-Free Telephone Number</td>
<td></td>
</tr>
<tr>
<td>Local Telephone Number</td>
<td></td>
</tr>
<tr>
<td>Fax Number</td>
<td></td>
</tr>
<tr>
<td>E-mail Address for TSD</td>
<td></td>
</tr>
<tr>
<td>E-mail Address for the public</td>
<td></td>
</tr>
<tr>
<td>Do have Internet access?</td>
<td>yes</td>
</tr>
<tr>
<td>Web Address (if applicable)</td>
<td></td>
</tr>
<tr>
<td>Name of Service Center Owner/Operator</td>
<td></td>
</tr>
<tr>
<td>Date of Birth of Service Center Operator</td>
<td>Social Security #</td>
</tr>
</tbody>
</table>

I am also filing a separate application to renew my installer and/or service technician certificate | yes | no |

**Section 2 – Ignition Interlock Devices Being Used in New Mexico.**

<table>
<thead>
<tr>
<th>DEVICES</th>
<th>Device 1</th>
<th>Device 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Manufacturer of device:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Model or class of device</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Type of reference sample used to calibrate device</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of devices currently installed in NM</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Section 3 – Installers and Service Technicians Working at or from this Site.**

<table>
<thead>
<tr>
<th>Installers (check box if also certified as an instructor)</th>
<th>Service Technicians</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Section 4 – Mobile Service. Please list all cities in New Mexico you propose to service by mobile unit from this service center location. (City must have a population of over 5,000)

<table>
<thead>
<tr>
<th>City</th>
<th>City</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
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</tbody>
</table>

Section 5 – Required Documents.

Please submit the following documents with your application:

- A certified copy of your *limited* driving history from MVD dated no earlier than 60 days before the date the application is filed or a copy of the Request for MVD Limited Driving History form available at [http://transportation.unm.edu/assets/MVD-school.pdf](http://transportation.unm.edu/assets/MVD-school.pdf). You must include this form with your application and TSD will obtain the history directly.

- A certified copy of your state criminal background check dated no earlier than 60 days before the date the application is filed or a copy of the Authorization for Release of Information by DPS form available at [http://transportation.unm.edu/assets/DPS.doc](http://transportation.unm.edu/assets/DPS.doc). *This form must be notarized and accompanied by a check for $15.00 made payable to the Department of Public Safety.*

- Proof of public liability insurance written on an occurrence form from an insurance company licensed to do business in New Mexico covering injury, death or property damage resulting from the installation, servicing, or removal of ignition interlock devices in an aggregate amount of not less than one million dollars ($1,000,000). *The proof of insurance shall include a statement from the insurance company that it will notify the Traffic Safety Division - Licensing Section thirty (30) days before cancelling the insurance.*

- A copy of the Service Center business license issued by the city in which the service center is located;

- A copy of the service center New Mexico gross receipts tax registration form;

- A schedule of fees that meet the requirements of 18.20.11.13 B(8) NMAC (Fee Schedule should include: Effective date, Expiration date, Service center location and
address, Model of device (specific camera or non-camera), Service center dates and
hours of operation, Installation of device, Monthly lease, Scheduled service visit,
Violation service visit, Tampering or circumventing, Removal, Vehicle switch, and
any other fees not covered within that a client will be charged);

- A copy of the days of operation for the service center with hours of operation;
- A current copy of the lease agreement between the service center and the
  sentenced driver;
- A current copy of the contract between the service center and the manufacturer.

Section 6 - Sworn Statements.

By my initials beside each statement, I,______________________________, certify that:

_____ I have obtained a copy of, have read, and agree to comply with the
  requirements of, 18.20.11 NMAC, Ignition Interlock, the rule adopted by
  the Traffic Safety Division regarding Ignition Interlock.

_____ All statements sworn to in the original application are still in full force and effect.

_____ I continue to be the person responsible for this service centers compliance with
  all laws and regulations.

_____ I understand that as the service center operator I am the person responsible for
  complying with all the obligations and responsibilities
  under New Mexico statutes and regulations;

_____ I understand that the service center license cannot be sold or transferred;

_____ I will impose the same fees on all drivers for installing, servicing, leasing and
  removing ignition interlock devices, but shall collect from indigent drivers only the
  amount not reimbursed by TSD. The service center shall reimburse the division
  for any overpayments obtained from the division in violation of this section;

_____ I will verify claims against the manufacturers report prior to submission for
  reimbursement from the Indigent Fund. Claims will be submitted on a monthly
  basis.

_____ I have not been sanctioned in any jurisdiction for circumventing or tampering with
  an ignition interlock device. If you have been so sanctioned, please provide
  detailed information regarding the jurisdiction, the year, and the circumstances.

_____ I am in compliance with the Parental Responsibility Act, NMSA 1978, Section
  40-5A-1 et seq. regarding paternity or child support proceedings and understand
that failure to comply with this Act will result in denial of my application or revocation or suspension of my license.

_____ I will not operate a service center in New Mexico until I have received a license from the Traffic Safety Division.

Section 7 – Signature and Date.

By my signature below, I certify, under penalty of perjury, that the information given in this application and all accompanying documents is true to the best of my knowledge and ability.

________________________________________________     ___________________
Applicant’s signature                                                                            Date

Please note that TSD requires an original application for processing. Copies will not be accepted. Please make a copy of this application for your records and submit an original.

____________________________________________________________________

Reviewed by _____________________________________  Date _________________

Approved □           Denied □

Reviewer’s Comments