



NWT ALCOHOL IGNITION INTERLOCK PROGRAM APPLICATION FOR WITHDRAWAL

(PLEASE PRINT)

Please return your completed form to:

The Registrar of Motor Vehicles
Road Licensing and Safety Headquarters
Department of Infrastructure
P.O. Box 1320
5015 - 49th St. Yellowknife NT X1A 2L9

Phone: (867) 767-9088 or toll free
1-888-803-8773 Fax: 867-873-0120
ignitioninterlock@gov.nt.ca

TO BE COMPLETED BY THE APPLICANT:

Date of Application:	DD	MMM	YYYY
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APPLICANT INFORMATION	
Name: _____	Phone Number: _____
Address: _____	
<small>Street</small>	<small>NT Community</small>
<small>Postal Code</small>	
Date of Birth: DD / MMM / YYYY	Email Address: _____
NWT Driver's Licence Number: # # # # # #	
Class: _____	
Reason for requesting withdrawal from program (attach additional pages and supporting documents as required):	

Declaration: I understand that my driver's licence will cancelled upon withdrawal from the program and that, under sections 77.1, 77.2, 78, and 78.1 of the <i>Motor Vehicles Act</i> , the Registrar is authorized to require conditions to be met before I may book my driver's tests. I understand that unless participating in this program in compliance with all program conditions, I may not drive while prohibited.	
Signature: _____	Date: _____

TO BE COMPLETED BY ROAD LICENSING AND SAFETY HEADQUARTERS:

- The above-named applicant is withdrawn from the NWT *Alcohol Ignition Interlock Program*.

Signature: _____ Date: _____