



**NORTH CAROLINA
DIVISION OF MOTOR VEHICLES**

**AFFIDAVIT OF FINANCIAL HARDSHIP
REQUEST TO WAIVE IGNITION INTERLOCK INSTALLATION ON
ADDITIONAL VEHICLES**

If you believe you are unable to afford the installation in each vehicle that is registered to you, complete this form to have the Division of Motor Vehicles (“Division”) determine whether you are eligible for the device to be waived from the vehicles that you have listed. It will be necessary that the device be installed in at least one vehicle that is registered to you if approved.

To be given consideration, you must: (1) complete this affidavit, which must be signed and notarized; and (2) send these documents as provided for in Section 4 below.

SECTION 1 - APPLICANT INFORMATION

Last Name		First		Middle	
Mailing Address					
City		State		ZIP	
Phone		E-mail Address			
SSN:					
Driver’s License					

SECTION 2 – HOUSEHOLD SIZE AND INCOME INFORMATION

2.1 How many persons are in your household? ▶ _____

Note: Household size includes you, your spouse, and your children if the children will receive more than half their support from you. It includes other people only if they live with you now, they receive more than half their support from you now, and they will continue to receive this support from you for the year that you affirm your household size. Support includes money, gifts, loans, housing, food, clothes, car, medical and dental care, and payment of college costs.

2.2 What is your total household income from the prior tax year? [][][] , [][][] . 0 0

What is your total household monthly income, currently? [][][] , [][][] . 0 0

Note: Household income includes but is not limited to: income from employment or self-employment (salaries, wages, commissions, bonuses, dividends, severance pay, etc.); ownership or operation of a business, partnership, or corporation; rental of property; retirement or pensions; interest, trusts, or annuities; capital gains; social security benefits; workers compensation benefits; unemployment insurance benefits; disability pay and insurance benefits; gifts or prizes; and alimony.

SECTION 3 – VEHICLES TO BE WAIVED

In order to waive vehicles please include year, make and vehicle identification number (VIN). Not all vehicles can receive a waiver; a driver must have at least one vehicle equipped with the Ignition Interlock Device.

VEHICLE 1: _____

VEHICLE 2: _____

VEHICLE 3: _____

VEHICLE 4: _____

SECTION 4– AUTHORIZATION AND CERTIFICATION

Under penalty of perjury, I declare that the information provided on this form and in any accompanying documentation is true, complete, and correct to the best of my knowledge. I understand that a false or dishonest answer made under oath or affirmation concerning my financial status could lead to prosecution for perjury, which is a felony.

I further authorize the release of financial information to the Division to allow it to verify eligibility of financial hardship regarding 20-17.8(c1). This release includes employers and any governmental agencies, including the Internal Revenue Service (IRS), the North Carolina Department of Revenue, and any other entities that could aid the Division in determining eligibility.

Printed Name _____

Signature _____

Date _____

State of _____

County of _____

Affirmed to and subscribed before me this _____ day of _____, 20 ____.

Signature of Notary Public

(Official Seal)

_____, Notary Public
(Printed or typed name)

My commission expires: _____

This form may not be notarized by an employee of the DMV.

SECTION 5 - WHERE TO SEND THIS FORM AND OTHER DOCUMENTS

You may mail, fax, or deliver this form and any accompanying documentation to the Division as follows:

Mailing Address:

I

Ignition Interlock Unit
Affidavit Waiver Program
3116 Mail Service Center
Raleigh NC, 27697-3116

Fax:

(919) 861-3822

Physical Address:

1100 New Bern Avenue
Raleigh, N.C. 27697

SECTION 6 - THE NEXT STEPS

After the Division receives your application, it will review whether you are eligible for a waiver. Your eligibility is based upon the number of persons in your household, your household income, and the most recent released Federal Poverty Level Guidelines. After the Division reviews your application, it will do one of the following:

1. Determine that you are eligible for a waiver, schedule a review, and update your motor vehicle record if applicable for vehicles to be waived, and mail the notice of hearing to the address on file.
2. Determine that you need to provide the Division additional documentation to assess your eligibility for a waiver. The Division will notify you what additional information is required, and you will have 10 calendar days to comply with the Division's request for additional documentation. If you fail to provide the documentation, your request for a waiver will be withdrawn.
3. Determine that you did not complete this form or did not otherwise provide the requested information. Therefore, request for a waiver will be immediately withdrawn.