



Oklahoma Board of Tests for Alcohol and Drug Influence

Manufacturer Representative Designation

“**Manufacturer representative**” means the individual designated by the manufacturer to act on behalf of or represent the manufacturer in all matters under the jurisdiction or consideration of the Board with respect to device certification.

Full legal name of the entity that manufactures the ignition interlock device

Physical address, city, state, zip

Mailing address, city, state, zip

(_____) _____
Telephone number

(_____) _____
Fax number

I, _____ hereby designate
Print name and title of person authorized to make designation

_____ to act on behalf of or represent the manufacturer
Print name of manufacturer representative

listed above in all matters under the jurisdiction or consideration of the Oklahoma Board of Tests for Alcohol and Drug Influence related to ignition interlock device certification.

Manufacturer representative mailing address, city, state, zip

(_____) _____
Telephone number

(_____) _____
Fax number

E-mail address

Signature of person authorized to make designation

Date

Return completed original to:

Board of Tests for Alcohol and Drug Influence
Attn: IID Division
P.O. Box 36307
Oklahoma City, Oklahoma 73136-2307