



DEPARTMENT OF TRANSPORTATION
DRIVER AND MOTOR VEHICLE SERVICES
1905 LANA AVE NE, SALEM OREGON 97314

EMPLOYER IGNITION INTERLOCK DEVICE (IID) EXCEPTION

Oregon Revised Statute (ORS) 813.602 states a person convicted of driving under the influence of intoxicants (DUII) or a person entering into a DUII diversion agreement shall be required to install and use an approved IID in any vehicle operated by the person.

ORS 813.606 states if a person is required, in the course and scope of the person's employment, to operate a motor vehicle owned by the person's employer, the person may operate that vehicle without an IID if:

- The employer has been notified that the employee is required to install an IID; and
- The employee has proof of the notification and a valid driver license or valid hardship permit in their possession while operating the employer's vehicle in the course of employment.

NOTE: A person who is self-employed is NOT eligible for an Employer IID Exception.

EMPLOYER:

- Complete and sign Section 1, "Employer Exception From IID Requirement."
- Give Copy to employee.

Note: If employee has been issued a hardship permit and is no longer required to drive vehicles registered to your company, complete Section 2, "Notification of Termination of Exception" and send a copy to DMV.

EMPLOYEE: You **must** carry a copy of this exception signed by your employer, *in addition to a valid driver license or valid hardship permit*, at all times when operating vehicles registered to your employer while driving for employment purposes.

To obtain the ending date of your IID requirement, call Customer Assistance at (503) 945-5000.

SECTION 1 ▼ EMPLOYER EXCEPTION FROM IID REQUIREMENT ▼

EMPLOYEE NAME	ODL / CUSTOMER NUMBER	DATE OF BIRTH
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By signing this form, I verify:

- I have been notified the above named employee must have an IID installed in any motor vehicle they operate;
- The above named employee has a valid driver license or valid hardship permit; and
- This form serves as proof of the notification.

The above named employee is required, in the course and scope of their employment, to operate a motor vehicle owned by the employer as follows:

Please mark the appropriate box:

- ☐ Drives company vehicle to and from work for employment purposes only.
- ☐ Drives company vehicle on-the-job for employment purposes only.
- ☐ Drives company vehicle to and from work and on-the-job for employment purposes only.

COMPANY NAME

EMPLOYER NAME (type or print) PHONE NUMBER

EMPLOYER SIGNATURE X DATE

SECTION 2 ▼ NOTIFICATION OF TERMINATION OF EXCEPTION ▼

Employer must complete and sign this section **ONLY** if DMV has issued the person a hardship permit and the employee is no longer employed by this company or no longer required to operate company vehicles. Submit copy to DMV, Driver Suspensions Unit, 1905 Lana Ave NE, Salem OR 97314.

- ☐ Employee no longer operates company vehicle(s).
- ☐ Employee no longer works for this company.

EMPLOYER SIGNATURE X DATE