

IN THE _____ COURT, THE STATE OF OREGON

_____ COUNTY, CITY OF _____

State of Oregon

Case No: _____

v.

**MOTION TO VACATE USE OF IID AS
CONDITION OF DIVERSION
AGREEMENT,
and DECLARATION IN SUPPORT**

Defendant

MOTION

I am the defendant in this case. I ask the court to vacate the condition of my diversion agreement requiring me to install and use an approved ignition interlock device.

DECLARATION IN SUPPORT

I qualify for a medical exemption under Oregon Department of Transportation rules (see the medical exemption form provided)

OR

All of the following conditions are true:

- I installed an approved IID in accordance with the diversion agreement I entered into on (date): _____
- I used the approved IID for at least 6 consecutive months since the date of installation, which was (date) _____
- I submitted to the court a certificate from the IID service provider that the device has not recorded a negative report for at least 6 months
- I have entered into and am in compliance with any treatment I may have been required to participate in as a condition of my diversion agreement

Other information:

Certificate of Document Preparation. Check all that apply:

- I chose this form for myself and completed it without paid help
- A legal help organization helped me choose or complete this form, but I did not pay money to anyone
- I paid (or will pay) _____ for help choosing, completing, or reviewing this form

I hereby declare that the above statements are true to the best of my knowledge and belief. I understand they are made for use as evidence in court and I am subject to penalty for perjury.

Date

Signature

Name (printed)

Address

City/State/Zip

Phone