



**South Carolina Department of Motor Vehicles**  
**IGNITION INTERLOCK NON-VEHICLE OWNER CERTIFICATION**

**VS-004B**  
(Est. 1/09)

***I certify that I will not be driving any vehicle other than one owned by my employer and I will not own a vehicle during the period I am required to have an Ignition Interlock Device.***

\_\_\_\_\_  
Signature of Driver

\_\_\_\_\_  
Date

Drivers License or Customer Number \_\_\_\_\_

**THE BELOW INFORMATION IS FOR DMV OFFICE USE ONLY**

\_\_\_\_\_  
Signature of DMV Driver Records employee who  
authorized certification

\_\_\_\_\_  
Date

**Please return completed form to -  
SC Department of Motor Vehicles, PO Box 1498, Blythewood, SC 29016**