



# STATE OF NEW YORK DEPARTMENT OF MOTOR VEHICLES

6 EMPIRE STATE PLAZA, ALBANY, NY 12228

BARBARA J. FIALA  
Commissioner

"P" 8 (2013)

"M" 4 (2013)

Albany, New York

March 26, 2013

TO: All Enforcement Agencies and Magistrates

SUBJECT: Changes to DMV Regulations

On September 25, 2012, the Department adopted regulations that enhance the Department's ability to effectively deal with drivers who pose a highway safety risk.

## **THE A2/PROBLEM DRIVER RESTRICTION & IGNITION INTERLOCK REQUIREMENT**

The "A2- Problem Driver" restriction has been established to limit the driving privileges of a motorist approved for relicensing who may pose a highway risk in light of his or her entire driving history. The restriction will be displayed on both motor vehicle records and driver licenses. "A2" appears on the front of the driver license and "Problem Driver" appears on the back. In some cases such person will also be required to install an ignition interlock device in all motor vehicles owned or operated by such person.

A person required to operate a motor vehicle owned by the person's employer may operate the motor vehicle without the ignition interlock device if such person is operating the motor vehicle within the scope of such employment, but only if the person carries in the motor vehicle written documentation indicating the employer has knowledge of the restriction and has granted permission to the employee to operate the motor vehicle without the ignition interlock device.

Not all individuals with the "A2- Problem Driver" restriction will be required to have an ignition interlock. Whether or not an ignition interlock is required will be stated on the **"PROBLEM DRIVER RESTRICTION ATTACHMENT", or "PROBLEM DRIVER RESTRICTION WITH INTERLOCK ATTACHMENT"** which motorists must carry with their license. Any person subject to an "A2- Problem Driver" restriction must operate within the restrictions listed on the **"PROBLEM DRIVER RESTRICTION ATTACHMENT," or "PROBLEM DRIVER RESTRICTION WITH INTERLOCK ATTACHMENT"**. Copies of these forms, which will bear a watermark, are attached. The "A2-Problem Driver" restriction will only be assigned to the holder of a Class D permit or

Class D license. The DMV imposed interlock requirement will **not** be displayed on the motorist's driving record or driver's permit or license; only the "A2- Problem Driver" restriction will appear.

An individual who is required to have a DMV imposed ignition interlock must install an interlock device certified by the NYS Department of Health and approved by NYS Division of Criminal Justice Services (DCJS) and listed on the DCJS website at <http://www.criminaljustice.ny.gov/opca/ignition.htm>, and may not operate any vehicle that is not equipped with such a device (except for certain employer-owned vehicles, as described above).

Although a DMV imposed ignition interlock must meet the same approval criteria as a court imposed ignition interlock, the DMV imposed interlock requirement differs from a court ordered interlock restriction in several ways:

- The court ordered restriction, "A4 Interlock Device," is displayed on the driver's record as well as on the driver's permit or license. In the case of a DMV imposed interlock, only the A2 and "Problem Driver" appear on the driver's record and driver's permit or license; the ignition interlock requirement is only displayed on the attachment.
- A person subject to the court ordered interlock restriction is monitored by an entity designated by each county. A person subject to the DMV interlock is not subject to monitoring.
- The court ordered interlock restriction must be required for a period of at least 6 months. The DMV imposed interlock shall be for five years.
- The court ordered interlock restriction may be issued to a person whose license is revoked, conditional or full-valid, and it may be issued to a person who holds a license of any class. The DMV imposed interlock is only issued to a person who holds a valid Class D permit or Class D license.
- A person who fails to install an ignition interlock device in a motor vehicle pursuant to a court order should be cited with a violation of Vehicle and Traffic Law (VTL) Section 1198(9)(d), a misdemeanor. A person who fails to install an ignition interlock device as part of the DMV imposed "Problem Driver" restriction should be cited with a violation of VTL Section 509(3), operating out of restriction, a traffic infraction.

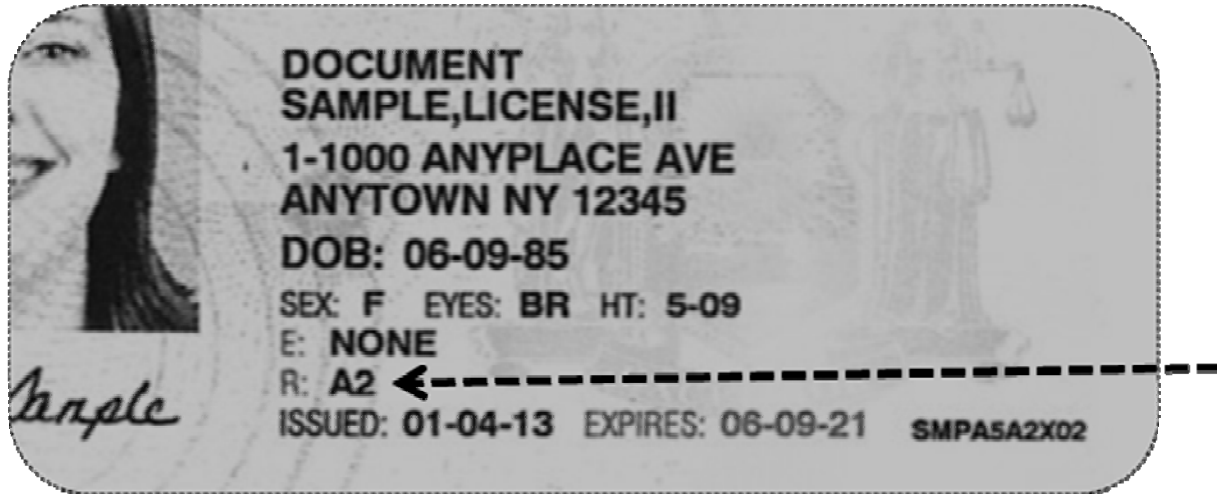
## **EFFECT OF COMPLETION OF DDP**

The DMV is also adopting a regulation that provides that completion of the Drinking Driver Program shall not result in the early termination of a suspension or revocation order if the person has 2 or more alcohol-related convictions/incidents within the 25 years of the date of enrollment in the DDP. Such person's license may not be fully restored until the full period of suspension or revocation has been served.

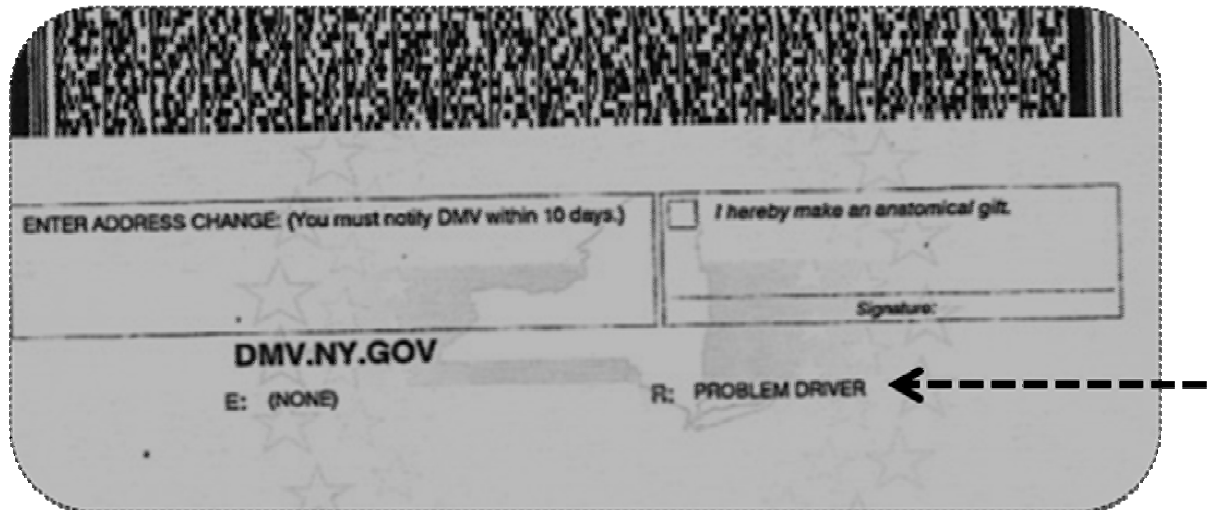
Copies of the Commissioner's Regulations are available on our website at [www.dmv.ny.gov](http://www.dmv.ny.gov).

How the "A2/Problem Driver" restriction will appear on the license document:

Front



Back



Barbara J. Fiala  
Commissioner

Attachments

**PROBLEM DRIVER RESTRICTION ATTACHMENT**

www.dmv.ny.gov

**INSTRUCTIONS:**

- Please read all information on page 2 before you complete this form.
- Print in blue or black ink.
- Keep your copy of this form with your license/permit. If a police officer asks to see your license/permit you must show this attachment.

**MOTORIST'S INFORMATION**

Motorist's Last Name, First Name, M.I.	
Client ID Number	Date of Birth (Month/Day/Year)
Motorist's Mailing Address (Include No., Street and Apt. No., City or Town, State, Zip Code)	
Address Where You Live If Different Than Mailing Address (Include No., Street and Apt. No., City or Town, State, Zip Code)	

**CHANGE OF NAME AND/OR ADDRESS**

Motorist's Last Name, First Name, M.I.	
Client ID Number	Date of Birth (Month/Day/Year)
Motorist's Mailing Address (Include No., Street and Apt. No., City or Town, State, Zip Code)	
Address Where You Live If Different Than Mailing Address (Include No., Street and Apt. No., City or Town, State, Zip Code)	

**EMPLOYER OR ACCREDITED SCHOOL**

Name	Address (Include No., Street and Apt. No., City or Town, State, Zip Code)
Name	Address (Include No., Street and Apt. No., City or Town, State, Zip Code)
Name	Address (Include No., Street and Apt. No., City or Town, State, Zip Code)

**CHILD'S SCHOOL/DAY CARE**

Name	Address (Include No., Street and Apt. No., City or Town, State, Zip Code)
Name	Address (Include No., Street and Apt. No., City or Town, State, Zip Code)

**AGREEMENT**

A driver license is necessary for my employment, education or medical treatment.

If I am a NYS resident I will visit a Motor Vehicles Office if any information on this form changes (including my address).

I agree to accept and abide by all of the listed conditions of this attachment.



(Sign Name in Full)

(Date)

**TO BE COMPLETED BY MOTOR VEHICLES OFFICE ONLY**

Stamped & Initialed by DMV Representative	Stamped & Initialed by DMV Representative
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**CHANGE IN EMPLOYMENT/CHILD CARE STATUS**

<b>EMPLOYER OR ACCREDITED SCHOOL</b>	
Name	Address (Include No., Street and Apt. No., City or Town, State, Zip Code)
Name	Address (Include No., Street and Apt. No., City or Town, State, Zip Code)
<b>CHILD'S SCHOOL/DAY CARE</b>	
Name	Address (Include No., Street and Apt. No., City or Town, State, Zip Code)
Name	Address (Include No., Street and Apt. No., City or Town, State, Zip Code)

## LICENSE/PERMIT/PRIVILEGE WITH THE PROBLEM DRIVER RESTRICTION INFORMATION

- Eligibility for a license/permit/privilege with a problem driver restriction is made in accordance with Commissioner's Regulations Part 3.2(c)(4) and 136.4(b).
- The attachment **MUST** be carried with, and presented with, your license/permit or out-of-state license.
- Complete the applicable items; read the Agreement; then sign and date the form.
- A Motor Vehicle representative will fill in the boxes under the signature line and process the completed form.
- You are eligible for a **Class D license only**.

## FULL LICENSE ISSUANCE (REMOVAL OF THE PROBLEM DRIVER RESTRICTION)

- The Problem Driver Restriction will remain in effect for a period of two years from the date you obtain your permit/license.
- The restriction will automatically be removed at the end of two years. You will need to apply for a duplicate license without the restriction at that time. You may apply online or at a Motor Vehicle Issuing Office.

## OUT-OF-STATE INSTRUCTIONS

- The attachment **MUST** be carried with your license from your current state when driving in New York.
- You must abide by all the conditions listed below.
- You may operate only a passenger vehicle in the State of New York. You **may not** operate any type of commercial motor vehicle, taxicab, livery, motorcycle, coach, limousine, van, wheelchair accessible van, or tow truck while on this restriction.

## CONDITIONS OF LICENSE/PERMIT/PRIVILEGE

A license/permit/privilege with a problem driver restriction is **not** valid to operate a vehicle for which a commercial driver license is required or to operate a motorcycle, taxicab, livery, coach limousine, van, wheelchair accessible van, or tow truck.

If you receive a license/permit/privilege with a problem driver restriction, you may drive **ONLY** under the following conditions:

1. To and from your place of employment.
2. During the hours of your employment, if your occupation requires the operation of a motor vehicle. If driving for employment, your employer must provide you with signed documentation, on company letterhead, advising they have knowledge of the restriction and grant permission for you to operate the vehicle for business purposes. You must carry this document with you when operating the employer's vehicle.
3. To and from the Motor Vehicles office to transact business with regard to the license/permit/privilege containing a problem driver restriction.
4. To and from a class or course at an accredited school, college or university, or a state-approved institution of vocational or technical training, in which you are enrolled. A license with a problem driver restriction **CANNOT** be used to drive to and from a high school.
5. To and from a medical appointment which is part of a necessary medical treatment for you or a member of your household.  
**You may be required to provide a written statement from your licensed medical practitioner that verifies such travel.**
6. To and from a child's school/day-care if the child's attendance at the school/day-care is necessary for you to maintain employment or to maintain enrollment at an accredited school, college or university or a state-approved institution of vocational or technical training.

## REASONS FOR REVOCATION OF A LICENSE/PERMIT/PRIVILEGE WITH A PROBLEM DRIVER RESTRICTION:

1. You receive a conviction certificate requiring mandatory suspension or revocation.
2. You are convicted **of following too closely, a speeding violation, speed contest, operating out of restriction or reckless driving or ANY two traffic violations (including seat belt, cell phone and violations attributable to the operator)** other than parking, stopping, standing, equipment, inspection, or other non-moving violations, where such violations occurred from the approval date of the license/permit/privilege with a problem driver restriction.
3. You are convicted of an offense indicating that you have driven in violation of the problem driver restriction.
4. The Department of Motor Vehicles receives any other information which would make you ineligible as otherwise permitted by law.



**PROBLEM DRIVER RESTRICTION WITH INTERLOCK ATTACHMENT**

www.dmv.ny.gov

**DMV IMPOSED INTERLOCK DEVICE REQUIRED:**

- Please read all information on page 2 before you complete this form.
- Print in blue or black ink.
- Keep your copy of this form with your license/permit. If a police officer asks to see your license/permit you must show this attachment.

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**EMPLOYER OR ACCREDITED SCHOOL**

Name	Address (Include No., Street and Apt. No., City or Town, State, Zip Code)
Name	Address (Include No., Street and Apt. No., City or Town, State, Zip Code)
Name	Address (Include No., Street and Apt. No., City or Town, State, Zip Code)

**CHILD'S SCHOOL/DAY CARE**

Name	Address (Include No., Street and Apt. No., City or Town, State, Zip Code)
Name	Address (Include No., Street and Apt. No., City or Town, State, Zip Code)

**AGREEMENT**

A driver license is necessary for my employment, education or medical treatment.

If I am a NYS resident I will visit a Motor Vehicles Office if any information on this form changes (including my address).

I agree to accept and abide by all of the listed conditions of this attachment.



(Sign Name in Full)

(Date)

**TO BE COMPLETED BY MOTOR VEHICLES OFFICE ONLY**

Stamped & Initialed by DMV Representative	Stamped & Initialed by DMV Representative
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**CHANGE IN EMPLOYMENT/CHILD CARE STATUS****EMPLOYER OR ACCREDITED SCHOOL**

Name	Address (Include No., Street and Apt. No., City or Town, State, Zip Code)
Name	Address (Include No., Street and Apt. No., City or Town, State, Zip Code)

**CHILD'S SCHOOL/DAY CARE**

Name	Address (Include No., Street and Apt. No., City or Town, State, Zip Code)
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## FULL LICENSE ISSUANCE (REMOVAL OF THE PROBLEM DRIVER RESTRICTION)

- The Problem Driver Restriction will remain in effect for a period of five years from the date you obtain your permit/license.
- The restriction will automatically be removed at the end of five years. You will need to apply for a duplicate license without the restriction at that time. You may apply online or at a Motor Vehicle Issuing Office.

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If you receive a license/permit/privilege with a problem driver restriction with interlock, the device must be installed on any vehicle you own or operate. You may drive **ONLY** under the following conditions:

1. To and from your place of employment.
2. During the hours of your employment, if your occupation requires the operation of a motor vehicle. If driving for employment, your employer must provide you with signed documentation, on company letterhead, advising they have knowledge of the interlock restriction and grant permission for you to operate the vehicle for business purposes without the device. You must carry this document with you when operating the employer's vehicle.
3. To and from the Motor Vehicles office to transact business with regard to the license/permit/privilege containing a problem driver restriction.
4. To and from a class or course at an accredited school, college or university, or a state-approved institution of vocational or technical training, in which you are enrolled. A license with a problem driver restriction **CANNOT** be used to drive to and from a high school.
5. To and from a medical appointment which is part of a necessary medical treatment for you or a member of your household. **You may be required to provide a written statement from your licensed medical practitioner that verifies such travel.**
6. To and from a child's school/day-care if the child's attendance at the school/day-care is necessary for you to maintain employment or to maintain enrollment at an accredited school, college or university or a state-approved institution of vocational or technical training.

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3. You are convicted of an offense indicating that you have driven in violation of the problem driver restriction.
4. The Department of Motor Vehicles receives any other information which would make you ineligible as otherwise permitted by law.