

IN THE CIRCUIT COURT OF THE STATE OF OREGON
FOR THE COUNTY OF _____
CITY OF _____

State of Oregon

Case No: _____

v.

**MOTION TO VACATE USE OF IID AS
CONDITION OF DIVERSION
AGREEMENT**

Defendant

and DECLARATION IN SUPPORT
DUII Diversion

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
 - ☐ I have attached the required letter signed by a treatment counselor from the treatment program confirming that I am in compliance with the program

Other information:

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

Certificate of Mailing

I certify that on *(date)*: _____ I placed a true and complete copy of this
Motion in the United States mail to the District Attorney at *(address)*: _____

Date

Defendant (signature)

Defendant Name