



NSW Centre for
Road Safety



New South Wales Government



Alcohol Interlock Program

Brief Medical Intervention Certificate

Instructions to applicant

- STEP 1** Arrange an appointment with one of the doctors on the RTA website www.rta.nsw.gov.au for the Drink-less brief medical intervention. Your appointment must be no earlier than 28 days before the expiry of your disqualification compliance period.
- STEP 2** Complete section 1. Personal details and section 2. Applicant's declaration below.
- STEP 3** You must take this form with you to the doctor. The doctor must complete section 3. Doctor's certification and section 4. Doctor's declaration (and sign it).
- STEP 4** You must take the completed form to the RTA motor registry on the day to get your Interlock Driver Licence.

1. Personal details

NSW licence/customer number

(this is located at the top left corner of your advice letter)

Last name

Given names

NSW residential address

Postcode

Mailing address (if different from residential address)

Postcode

Date of birth

Day

Month

Year

Sex

Male

Female

2. Applicant's declaration (to be completed by applicant)

Your personal information including any image is collected and held by the Roads and Traffic Authority (RTA), Level 9, 101 Miller Street, North Sydney NSW 2060. I declare that the details I have provided in this certificate are true and complete.

I understand that my personal information is being collected as a requirement for the issue of an interlock driver licence. I must supply the information under the Road Transport (Driver Licensing) Act 1998. Failure to supply full details and sign this declaration can result in the transaction not proceeding.

Your personal information held by the RTA may be disclosed inside and outside NSW to driver licensing and vehicle registration agencies and to verify the contents of this application, for the administration of driver licensing and vehicle registration legislation. You have a right to access or correct your personal information in accordance with the provisions of the relevant privacy legislation.

Licence holder's signature

Date

Day

Month

Year

3. Doctor's certification

I hereby certify that
(applicant's name)

was seen by me today (date)

Day

Month

Year

and received the drink-less intervention.

Doctor's name

Address

Postcode

Phone

4. Doctor's declaration

Your personal information is collected and held by the Roads and Traffic Authority (RTA), Level 9, 101 Miller Street, North Sydney NSW 2060. I declare that the details I have provided in this certificate are true and complete.

I understand that my personal information is being collected for confirmation of the Alcohol Interlock Program – Brief Medical Intervention Certificate. Failure to supply full details and sign this declaration can result in the transaction not proceeding.

Your personal information held by the RTA may be disclosed inside and outside NSW to driver licensing and vehicle registration agencies and to verify the contents of this application, for the administration of driver licensing and vehicle registration legislation. You have a right to access or correct your personal information in accordance with the provisions of the relevant privacy legislation.

Doctor's signature

Doctor's stamp

Provider number