

Schedule 2

Ocrica	uic Z									
Ackno	wledg	ement of Employee	e or Autho	orised S	Service	Agent				
1	[insert name]									
of	[insert address]									
certify t	that I a	m employed or enga								
who is a VicRoads approved Supplier to supply, install and maintain Approved Alcohol Interlocks.										
I agree to the following terms and conditions before I carry out work on behalf of the Supplier in relation to the installation and maintenance of an Approved Alcohol Interlock:								er in		
1.	. I shall carry out all work in accordance with the Suppliers specifications and work instructions.									
2.	. I shall not carry out work:									
	(a) on any vehicle I drive if my driver licence or learner permit is subject to (interlock) condition' or									
(b) on any vehicle which I or the Supplier, or any other person er by the Supplier has a financial interest; or								ployed	or enga	aged
	(c)	in the presence of t	he owner o	or perso	n who h	as pres	ented the	e vehicl	e for wo	ork; or
	(d)	at any place other than premises authorised by the Supplier.								
	(e) I will immediately notify the Supplier if I have been charged with or found or have pleaded guilty to, an offence involving violence, a threat of viole dishonesty or fraud.									lty of,
3.		If VicRoads conducts an inspection and audit at any premises authorised by the Supplier, I shall, during the inspection or audit:								
 give assistance to VicRoads or the person authorised in writing by Supplier; and 								g by Vi	cRoads	, or the
	(b)	comply with any direction relating to the inspection or audit given by VicRoads or the person authorised in writing by VicRoads, or the Supplier								
4.	I authorise and permit the Supplier or VicRoads to conduct a police check in relation to any notification referred to in clause 3 while I am employed or engaged by the Supplier for the purpose of installing and maintaining Approved Alcohol Interlocks.									
Signat	ure of	person						<u></u>	<u> </u>	
		Date	D D	• M	M •	YY	YY	7		
In the presence of:										
Name of witness										
		•								
Signature of witness								<u>[</u>	2	

Business Procedures Manual

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Date