# underscored material = new [bracketed material] = delete

***	-~-		_	
H(1)	I C Ir	RIT	Т	203

# 52ND LEGISLATURE - STATE OF NEW MEXICO - SECOND SESSION, 2016

### INTRODUCED BY

#### Patricio Ruiloba

#### AN ACT

RELATING TO THE INTERLOCK DEVICE FUND; INCREASING THE AMOUNT THAT THE TRAFFIC SAFETY BUREAU SHALL PAY FOR AN INDIGENT PERSON'S USE OF AN INTERLOCK DEVICE.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

SECTION 1. Section 66-8-102.3 NMSA 1978 (being Laws 2002, Chapter 82, Section 2, as amended) is amended to read:

"66-8-102.3. IMPOSING A FEE--INTERLOCK DEVICE FUND CREATED.--

A. A fee is imposed on a person convicted of driving under the influence of intoxicating liquor or drugs in violation of Section 66-8-102 NMSA 1978 or adjudicated as a delinquent on the basis of Subparagraph (a) of Paragraph (1) of Subsection A of Section 32A-2-3 NMSA 1978 or a person whose driver's license is revoked pursuant to the provisions of the .203040.1

1

2

3

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

Implied Consent Act, in an amount determined by rule of the traffic safety bureau of the department of transportation not to exceed one hundred dollars (\$100) but not less than fifty dollars (\$50.00) for each year the person is required to operate only vehicles equipped with an ignition interlock device in order to ensure the solvency of the interlock device The fee shall not be imposed on an indigent person.

- The "interlock device fund" is created in the В. state treasury. The fee imposed pursuant to Subsection A of this section shall be collected by the motor vehicle division of the taxation and revenue department and deposited in the interlock device fund.
- C. All money in the interlock device fund is appropriated to the traffic safety bureau of the department of transportation to cover part of the costs of installing, removing and leasing ignition interlock devices for indigent people who are required, pursuant to convictions under Section 66-8-102 NMSA 1978 or adjudications on the basis of Subparagraph (a) of Paragraph (1) of Subsection A of Section 32A-2-3 NMSA 1978 or driver's license revocations pursuant to the provisions of the Implied Consent Act or as a condition of parole, to install those devices in their vehicles. Provided that money is available in the interlock device fund, the traffic safety bureau shall pay, for one vehicle per offender, up to fifty dollars (\$50.00) for the cost of installation, up .203040.1

to fifty dollars (\$50.00) for the cost of removal and up to [thirty dollars (\$30.00)] fifty dollars (\$50.00) monthly for verified active usage of the interlock device. The traffic safety bureau shall not pay any amount above what an offender would be required to pay for the installation, removal or usage of an interlock device.

- D. Indigency shall be determined by the traffic safety bureau based on proof of enrollment in one or more of the following types of public assistance:
  - (1) temporary assistance for needy families;
  - (2) general assistance;
- (3) the supplemental [nutritional] nutrition assistance program, also known as "food stamps";
  - (4) supplemental security income;
- (5) the federal food distribution program on Indian reservations; or
- (6) other criteria approved by the traffic safety bureau.
- E. Any balance remaining in the interlock device fund shall not revert to the general fund at the end of any fiscal year.
- F. The interlock device fund shall be administered by the traffic safety bureau of the department of transportation. No more than ten percent of the money in the interlock device fund in any fiscal year shall be expended by .203040.1

the	traffic	safety	bureau	of	the	depa	artment	of	transportation
for	the purp	ose of	adminis	ster	ing	the	fund."		

SECTION 2. EFFECTIVE DATE.--The effective date of the provisions of this act is July 1, 2016.

- 4 -

# FIFTY-SECOND LEGISLATURE SECOND SESSION, 2016

February 4, 2016

Mr. Speaker:

Your SAFETY AND CIVIL AFFAIRS COMMITTEE, to whom has been referred

# HOUSE BILL 203

has had it under consideration and reports same with recommendation that it DO PASS, amended as follows:

- 1. On page 1, line 13, after "DEVICE", insert "; INCREASING THE AMOUNT OF MONEY IN THE INTERLOCK DEVICE FUND THAT MAY BE USED IN ANY FISCAL YEAR; PROVIDING THAT MONEY IN THE INTERLOCK DEVICE FUND MAY BE USED FOR ADMINISTRATION OF THE IGNITION INTERLOCK DEVICE PROGRAM".
- 2. On page 3, line 24, strike "ten" and insert in lieu thereof "fifteen".
- 3. On page 4, line 2, strike "fund" and insert in lieu thereof "fund or ignition interlock device program".,

and thence referred to the APPROPRIATIONS AND FINANCE COMMITTEE.

Respectfully submitted,

			William	"Bill"	R.	Rehm,	Chairman
Adopted		_	Not Adopt	ted			
	(Chief Clerk)				(	Chief C	Clerk)
	Da	te					

# March 9, 2016

# HOUSE EXECUTIVE MESSAGE NO. 155

The Honorable Don L. Tripp, Speaker of the House and Members of the House of Representatives State Capitol Building Santa Fe, NM 87501

Honorable Speaker Tripp and Members of the House:

Pursuant to the Constitution of the State of New Mexico, Article IV, Section 22, I hereby VETO and return HOUSE BILL 203, as amended, enacted by the Fifty-Second Legislature, Second Session, 2016.

I believe that the current amount of financial assistance that indigent DWI offenders receive to purchase and use an ignition interlock device is sufficient. A presence of money in the ignition interlock fund is not a justification for increasing the monthly amount given to DWI offenders. If these individuals could afford a car, fuel, and alcohol when they were caught driving drunk, then they can afford the various, reasonable consequences of a DWI offense.

Respectfully yours,

Susana Martinez Governor



# NMDOT TRAFFIC SAFETY DIVISION (TSD)

# INSTRUCTIONS FOR COMPLETING APPLICATION FOR SUBSIDY

IGNITION INTERLOCK INDIGENT DEVICE FUND \* UNDER SEC. 66-8-102.3 & 66-2-7.1 NMSA 1978 P.O. BOX 1149; SANTA FE, NM 87504 \* (505) 827-0427 OR 1-800-541-7952

# IF APPROVED, WHAT ARE THE IGNITION INTERLOCK DEVICE FUND BENEFITS?

If indigency is granted and provided that money is available in the Interlock Device Fund, the NMDOT Traffic Safety Bureau shall pay for one vehicle per offender, up to: \$50.00 for the cost of installation; \$30.00 monthly for verified active usage of the interlock device, and up to \$50.00 for the cost of removal. The offender is responsible for all other charges associated with the installation, servicing and removal of the ignition interlock device. The interlock device fund fee collected by MVD shall not be imposed on an indigent person.

# WHO QUALIFIES FOR BENEFITS FROM THE IGNITION INTERLOCK INDIGENT DEVICE FUND?

Individuals who are required pursuant to convictions under Section 66-8-102 NMSA 1978 or adjudications on the basis of 32A-2-3 NMSA 1978 or NM driver's license revocations pursuant to the Provisions of the Implied Consent Act or as a Condition of Parole, to drive interlocked.

If applicant has been convicted in New Mexico for Driving While Intoxicated (DWI) and have been court ordered to a period of interlock.

If driver's license is revoked by the Motor Vehicle Division because of a DWI arrest and you can not drive legally without an Ignition Interlock.

If applicant has been ordered to drive interlocked as a condition of parole.

#### **HOW DOES APPLICANT APPLY FOR ASSISTANCE?**

Complete and submit the NMDOT Traffic Safety Division Application For Subsidy and provide proof of enrollment document (see below) incomplete applications will be returned to applicant. Also, TSD will not accept faxed or emailed applications. See below for address information

#### STEP 1 - INSTRUCTIONS

#### INITIAL - FIRST TIME APPLICANT

If a first time applicant, complete and submit the NMDOT Traffic Safety Division Application For Subsidy. Have signature on application notarized by a notary public and attach relevant documents as required to avoid benefit denial or delays. If benefits are approved, the application will stay on file for 1 year. If need to extend benefits after initial approval, see STEP 2.

# **STEP 2 - INSTRUCTIONS**

# RECERTIFICATION - SECOND OR SUBSEQUENT APPLICANT

If recertifying indigent status which means applicant was previously approved based on an application submitted less than one year ago, then applicant will not need to fill out a new application. Applicant will instead submit a copy of the current proof of enrollment document (see below). If the approved application on file with TSD is over 1 year, a new application will be required. If unsure, call TSD to determine if new application is needed.

# WHAT ASSISTANCE DOCUMENT MUST BE PROVIDED WITH APPLICATION?

Indigency shall be determined by the Traffic Safety Division based on applicant's proof of enrollment in one or more of the public assistance programs.

Application will be denied if current proof of enrollment document is not provided.

	DUDITIE ACCIOTANCE PROGRAMA	THE STATE OF THE S
	PUBLIC ASSISTANCE PROGRAMS:	PROOF OF ENROLLMENT DOCUMENT:
TANE: Ter	mporary Assistance for Needy Families	
GA Ger	neral Assistance	Notice of Approved Case Action, Form # ISDB003 or other benefit verification from
SNAP Sur	pplemental Nutritional Assistance Program (Food Stamps)	Income Support Division
SSI≔ Sup	pplemental Security Income	Benefit Verification Letter from the Social Security Office  Note: SSI is not Social Security Disability
FDPIR - Foo	od Distribution Program on Indian Reservations	TSD (FDPIR) Verification Form FDPIR office
0) or F	Parole specifically for Ignition Interlock Purposes if relates to current license revocation	Valid Indigency Order from a NM Court, Probation or Parole dated prior to July 1, 2010. Applicant must also complete the NMDOT Traffic Safety Division Application for Subsidy. A valid indigency order must have client's name, be signed and dated by Judge, Probation or Parole and indicate indigency is for Ignition Interlock

# WHERE DOES APPLICANT SEND COMPLETED APPLICATION?

Traffic Safety Division Ignition Interlock Fund P.O. Box 1149 Santa Fe, NM 87504

WALLING

₩eb Link to Application and Instruction Page
http://dot.state.nm.us
Select Traffic Safety under News & Information

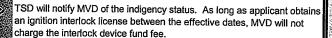
DROPPING OFF V
The office that serves all areas is located at:
1122 Cerrillos Road (SB1-N)
Santa Fe, NM 87505

# 7504 (505) 827-0427 or 1-800-541-7952 HOW WILL APPLICANT KNOW IF THEY WERE APPROVED FOR BENEFITS?

TSD will send a notice to the malling address listed on application that informs applicant if indigency was approved; or if application was denied or was incomplete

# IF APPROVED

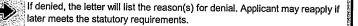
The notice will indicate benefit effective dates. Eligibility for subsidy benefits will only apply during effective dates listed on letter.



Applicant will provide a copy of the notice to the Interlock Provider to obtain the eligible approved benefits. Applicant tracks indigency effective dates on notice as it is the applicant's responsibility to reapply in a timely manner so there is not a lapse in coverage.

## IF DENIED OR INCOMPLETE

If incomplete, the notice will list the reason(s) application is incomplete. If information is requested by TSD the notice will identify what is missing. Once obtained applicant may resubmit for consideration.





TSD USE ONLY.		Date Stam	p Rev.03.2117
LAST VALID APPL DATE: No.			Refund:
PREV IIDF APVL DATES: No.	terrenantian di anti-anti-anti-anti-anti-anti-anti-anti-		Apvd By:
MVD REVOCATION PERIOD: J&S	**************************************		From:
INTERLOCK LICENSE DATES: Amt PI	D:		To:
PUBLIC ASST TYPE: TANF - GA - SNAP - SS I - FDPIR	- OI		
PUBLIC ASST DATES: Verified with:			No.
PREV ASST TYPE/APVL DATES: Filed w/	No.		
IGNITION INTERLOCK INDIGENT DEVICE F PO/BOX 1149 * SANTA FE, NM 87	ON FOR SUB:  -UND * UNDER S	SIDY EC. 66-8-102.3 & 6 27-0427 OR 1-800- II items each sect of Birth.  ary Telephone Numb  hadary Telephone Nur	541-7952 ion must be completed (3) Social Security Number er:
PART B: INDICATE IF DRIVER LICENSE HAS BEEN RE	· · · · · · · · · · · · · · · · · · ·	TO MAKE THE CONTROL OF STREET AND A STREET A	
(1/2) Date of MMD Revocation:	THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TRANSPORT NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TRANSPORT NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TRANSPORT NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TRANSPORT NAMED IN COLUMN TWO IS	te of Court Convi	entranscriptor   Period
(14): Court Name: (15)	Court City	(16) Co	urt Gase Number
ATTACH A CODY OF THE HIDCEMENT & CENTENCE (10.0)			
ATTACH A COPY OF THE JUDGEMENT & SENTENCE (J&S) (17) Have you been ordered as a condition of part	ole to drive with a	ncing court for	Yes No
ATTACH A COPY OF THE CERTIFICATE OF PAROLE IF RE	OUIRED TO BE INT	ERLOCKED AS A CO	ONDITION OF PAROLE
PART C: INDICATE QUALIFYING PUBLIC ASSISTANCE	PROGRAM(S) AN	D SPECIFY ELIGII	BILITY DATES
(18) TANE GA SNAP.	☐SSI (Suppleme	ntal Security Incom	ie) L'EDPIR
(ii9) Eligibility From Date:	(20) Eligibility	To Date:	
MUST ATTACH PROOF OF ENROLLMENT IN ONE OF THE (	QUALIFYING PUBLI	C ASSISTANCE PRO	OGRAM(S)
PART D: INDICATE IF A COURT, PROBATION OR PARC	OLE DETERMINED	CLIENT INDIGEN	T FOR INTERLOCK
(21) INDIGENT BY A NIM COURT, PROBATION OF	R PAROLE PRIOR	TO 7/1/2010 FOR	INTERLOCK PURPOSES
22) Case # On Court Order	(23) Date	on Court Order:	300
MUST ATTACH A COPY OF THE COURT ORDER SPECIFYING	INDIGENCY, IF DE	TERMINED INDIGE	NT PRIOR TO 7/1/10
PART E: INDICATE WHETHER THE IGNITION INTERLO	CK DEVICE IS CU	RRENTLY INSTALI	LED IN VEHICLE(S)?
	Interlock Company N	できるとはないできた。これでは、これでは、これでは、これでは、これでは、これでは、これでは、これでは、	
PART F: AGREEMENT, SIGNATURE AND NOTARIZATION	N	<u></u>	
understand that false and misleading information in this application can be the	ne basis for denial of this	Application.	
f this Application is approved, I understand that I must install and maintain the icense requirements and Sec. 66-8-102.3 NMSA 2010 Interlock Device Fund esult in revocation of assistance from the Interlock Device Fund.	e ignition interlock device . The Division may cons	e according to Sec. 66-5 der any deviation to be	-503 NMSA 2003 ignition interlock a breach of the agreement which could
agree to notify the Division within ten (10) business days of any change to ar	ny information in this app	lication.	
By signing this form, I hereby acknowledge acceptance and understanding of information in this Application is true, correct and complete to the best of my k	the above statements. A	dditionally, I certify unde	er penalties of perjury that all
		aran da	NOTARIAL
(26)			SEAL
Applicant Signature	Da		
Applicant signature must be notarize	ed or application will r	ot be considered	
The foregoing instrument was acknowledged before me this _	day of	20	by
	-		Notary - PRINT NAME
Notary Public Signature	My Commission Exp	ires:	