



STATE OF ALASKA
DEPARTMENT OF CORRECTIONS

Electronic Monitoring Terms and Conditions
For First Time DUI / Refusals
(Regular EM)

Offender Name: _____ Offender #: _____

I understand and agree to the following conditions during my participation in EM:

1. I will remain at the same residence which is listed on my application. **(Initial: _____)**
2. I will obey all state, federal, and local laws, ordinances, orders, and court orders. **(Initial: _____)**
3. I understand the electronic monitoring restrictions will be enforced by the use of electronic technology. To ensure compliance, I understand I will be required to wear an ankle bracelet 24 hours a day for the entire length of my participation on EM. **(Initial: _____)**
4. I will not tamper with, disconnect, move or remove any of the monitoring equipment (including phone and power cords). **(Initial: _____)**
5. I understand that I will be held responsible for damages (other than normal wear and tear) to the equipment. I further understand that if the equipment is not returned in good condition, I will be charged for replacement on release and hereby agree to pay for it. **(Initial: _____)**
6. I agree that the Department of Corrections and the vendor providing the electronic monitoring equipment are not liable for any damages and/or injuries as a result of wearing or tampering with the monitoring device. **(Initial: _____)**
7. I agree that the Department of Corrections, or its officers, have no responsibility to provide food, shelter, clothing, medical care, or dental care during my house arrest confinement period. **(Initial: _____)**
8. I will not drive a motor vehicle of any kind (including but not limited to cars, trucks, 4-wheelers, snow machines, motorcycles and boats) without prior written approval from EM staff. **(Initial: _____)**
9. I will allow DOC staff and/or police to enter my residence to install, maintain, repair or inspect the monitoring equipment when there is probable cause. **(Initial: _____)**
10. I will not consume or possess alcoholic beverages of any kind. Any violations will be reported to the Court. **(Initial: _____)**
11. I will not consume or possess any controlled substances, unless prescribed, nor possess any drug paraphernalia, nor or be in the presence of persons consuming or possessing the same. **(Initial: _____)**

I, _____, hereby acknowledge that I have read or had read to me the terms and conditions of EM. I further certify that I understand the contents and agree to the terms and conditions of EM.

Offender Printed Name

Offender Signature

Date