

FLORIDA DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES

Interpreter Affidavit

Please submit this form to your local tax collector office or driver license service center

<http://www.flhsmv.gov/offices/>

This document must be completed when an interpreter appears in person to a tax collector office or state service center to interpret for a customer.

Customer's Name: _____

Customer's DL#: _____

Examiner's Name: _____

Interpreter's Name: _____

Interpreter's Identification: _____

Language Interpreted: _____

Type of Exam(s) being interpreted: _____

Date of Exam being interpreted: _____ Office Number: _____

I swear that I will act as the interpreter for this examination and provide a true and accurate interpretation of the examination questions and the answers provided by the customer.

- I am at least 18 years of age.
- I will not provide answers, coach, or assist the person taking the examination in any way.
- I understand that coaching or supplying answers will result in the termination of the examination.
- I also understand that coaching or supplying answers will prevent me from interpreting in any examination office in the future.

I understand that it is required that this transaction be recorded using an audio recording device. I also understand that these recordings can be audited. Fraudulent activity discovered could result in license cancellation, mandatory retests and criminal charges filed.

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING DOCUMENT AND THAT THE FACTS STATED IN IT ARE TRUE.

Interpreter's Signature

Credentialing Personnel's Signature

Note: This signed form must be scanned as part of the customer's application.