

## Electronic Monitoring Terms And Conditions For First Time DUI / Refusals

## (Home Confinement)

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 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: \_\_\_\_\_)
- 4. 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: \_\_\_\_\_)
- 5. I will <u>not</u> consume or possess alcoholic beverages of any kind. Any violations will be reported to the Court. (Initial: \_\_\_\_\_)
- 6. 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

If telephonic, provide PO Signature & Date that it was reviewed with the defendant.

NOTE: Chrono your entry into the DOC offender management system.