

## Certification of a Communication Impediment

<b>Instructions</b>			
<p>Present the completed certification to your local county tax assessor-collector's office to authorize the addition of a communication impediment notation to a motor vehicle record. This notation will inform law enforcement that the vehicle operator or passenger may have a health condition or disability that may impede effective communication with a peace officer.</p> <p>This form will be returned to the applicant upon verification by the local county tax assessor-collector's office.</p>			
<b>Vehicle Information</b>			
Vehicle Identification Number	Current TX Plate	Year	Make
<b>Applicant Information</b>			
Applicant First Name (or Entity Name)	Middle Name	Last Name	Suffix (if any)
Address	City	State	ZIP
Email (optional)		Phone Number (optional)	
<b>Health Care Provider Certification</b>			
<p>This section must be completed by a licensed physician for a physical health condition or a licensed physician, licensed psychologist, or a non-physician mental health professional for a mental health condition.</p> <p>A medical or mental health professional is defined as a licensed physician, licensed psychologist, or non-physician mental health professional, as defined in Section 571.003, Health and Safety Code.</p>			
Printed Name of Medical or Mental Health Professional		Professional License Number	
Address	City	State	ZIP
Email (optional)		Phone Number (optional)	
<p>I, the health care professional listed above, certify the applicant listed above has a health condition or disability that may impede effective communication with a peace officer.</p>			
_____ Signature of Medical or Mental Health Professional		_____ Date	
<b>Applicant Certification – State law makes falsifying information a third degree felony.</b>			
<p>I, the applicant listed above, certify I am voluntarily informing the department of a health condition or disability that may impede effective communication with a peace officer and authorize a communication impediment notation to be added to the vehicle record listed above for law enforcement use only.</p>			
_____ Signature of Applicant		_____ Date	