

**IMPLIED CONSENT LAW  
PEACE OFFICER'S CERTIFICATE**

**►(PLEASE TYPE OR PRINT LEGIBLY, CROSS OUT REFERENCES TO INAPPLICABLE ITEMS)**



I certify to the Sheriff of \_\_\_\_\_ County, State of Minnesota and \_\_\_\_\_, (Sheriff of where incident occurred) the prosecuting authority, that:

1. I am a "peace officer" within the meaning of MINN. STAT. §§ 624.7142 and 624.7143.
2. On (Date) \_\_\_\_\_, I had probable cause to believe that the person named below was carrying a pistol on or about the person or clothing in a public place in violation of MINN. STAT. § 624.7142 within the State of Minnesota at \_\_\_\_\_ in the City or Township of \_\_\_\_\_ in \_\_\_\_\_ County.

Full Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Driver License Number \_\_\_\_\_ State of Issue \_\_\_\_\_

3. Reason for initial contact (describe): \_\_\_\_\_

4. Probable cause that person was carrying a pistol in a public place:

Saw person    Person admitted    Other \_\_\_\_\_

5. Probable cause that person was under influence of alcohol or a controlled substance (in addition to other information)

Odor of alcohol    Bloodshot, watery eyes    Slurred speech    Poor balance  
 Admission    Other \_\_\_\_\_

6. Check at least one of the following:

Firearms under the influence arrest    Firearms related accident    Refused PBT  
 Failed PBT with AC of 0.04 or more.

7. Other pertinent information: \_\_\_\_\_

8. The person was requested to submit to a test pursuant to the provisions of MINN. STAT. § 624.7143 and was read the Implied Consent Advisory on the other side of this form by:  
(Name and Agency): \_\_\_\_\_

9. The person refused to provide a test sample to determine the presence of alcohol or hazardous or controlled substance.

Signature of Peace Officer \_\_\_\_\_

Printed Name of Peace Officer \_\_\_\_\_

Badge Number \_\_\_\_\_ Business Telephone Number \_\_\_\_\_ Date \_\_\_\_\_

SEND WITH COPY OF ALCOHOL INFLUENCE REPORT, ARREST OR ACCIDENT REPORT, BREATHALYZER OR INTOXILYZER RECORDS, LABORATORY REPORT, IMPLIED CONSENT ADVISORY TO:

County Sheriff where incident occurs and County Sheriff where pistol permit, if any, was issued and prosecuting authority where offence took place.