IMPAIRMENT REPORT
N-105 Rev. 6-2019

STATE OF CONNECTICUT
DEPARTMENT OF MOTOR VEHICLES
DRIVER SERVICES DIVISION
60 State Street, Wethersfield, CT 06161-1013
TELEPHONE: (860) 263-5720

NOTICE TO LAW ENFORCEMENT AGENCIES:

Connecticut law enforcement agencies must use this form **only** to report an operator, who in the judgment of the officer, is deemed unfit to drive due to medical, physical and/or mental condition(s).

INSTRUCTIONS:

1. Complete this N-105 form after taking possession of an operator's license, in accordance with Sec. 14-217-1 of the Regulations of Connecticut State Agencies.
2. Mail N-105 form, license, and any additional reports/information to the above address ***within 24 hours*** of taking possession of the license.

LAW ENFORCEMENT AGENCY (Town, Troop, Or Precinct):		LAW ENFORCEMENT CASE NUMBER:	
CASE OFFICER:		DATE:	
OPERATOR'S NAME (Last, First, Middle):	DATE OF BIRTH:	OPERATOR'S LICENSE NUMBER:	
OPERATOR'S ADDRESS (Number, Street, City, State, Zip Code):			
OFFENSES OR VIOLATIONS, IF ANY (Specify Statute Number or Ordinance Number):			
OFFICER'S STATEMENT (DETAILS OF OFFENSE/VIOLATION/INCIDENT):			
SIGNATURE OF CASE OFFICER:	TITLE:	BADGE NUMBER:	DATE SIGNED: