

REQUEST FOR CHECK OF DRIVING RECORD

NOTE TO MOTOR CARRIER: SEE BACK SIDE FOR STATES THAT ACCEPT THIS FORM.

I hereby authorize you to release the following information to _____
(Prospective Employer)
for purposes of investigation as required by Sections 391.23 and 391.25 of the Federal Motor Carrier Safety Regulations. You are released from any and all liability which may result from furnishing such information.

(Applicant's Signature)

(Date)

In accordance with the provisions of Sections 604 and 607 of the **Fair Credit Reporting Act**, Public Law 91-508, as amended by the Consumer Credit Reporting Act of 1996 (Title II, Subtitle D, Chapter 1, of Public Law 104-208), I hereby certify the following:

1. The consumer (applicant) has authorized in writing the procurement of this report;
2. The consumer (applicant) has been informed in a separate written disclosure that a consumer report may be obtained for employment purposes;
3. The information requested below will be used for a "permissible purpose" (i.e., information for employment purposes) and will be used for no other purpose;
4. The information being obtained will not be used in violation of any federal or state equal opportunity law or regulation; and
5. Before taking an adverse action based in whole or in part on the report the consumer (applicant) will receive a copy of the requested report and the summary of consumer rights as provided with the report by the consumer reporting agency.

I also hereby certify that this report request and the above applicant's release notice meet the definition of "permissible uses" of state motor vehicle records under the provisions of the **Driver's Privacy Protection Act of 1994** (Public Law 103-322, Title XXX, Section 300002(a)).

(Signature of Requester)

(Date)

TO: _____

DEAR SIR/MADAM:

The following named person has made application with our company for the position of _____
_____. In accordance with Section 391.23, Federal Department of Transportation Regulations,
please furnish the undersigned with the applicant's driving record for the past three years.

The following named person is employed with our company in the position of _____
_____. In accordance with Section 391.25, Federal Department of Transportation Regulations,
please furnish the undersigned with the employee's driving record for the past year.

NAME OF APPLICANT/DRIVER _____

ADDRESS _____
(Number & Street) (City) (State) (Zip Code)

FORMER ADDRESS _____
(Number & Street) (City) (State) (Zip Code)

DATE OF BIRTH _____ SSN _____ LICENSE NO. _____

REQUESTED BY

(Name of Company)

(Typed Name)

(Address)

(Title)

(City)

(State)

(Signature)

Request for Driver Information

Most states require their specific form to be used to obtain an individual's driving record. The following states *do not* require the use of a state-specific form. This information is current through October 6, 2008, and is subject to change.

State/General Contact Information	State/General Contact Information
District of Columbia Department of Motor Vehicles Driver's Records P.O. Box 90120 Washington, DC 20090 (202) 727-5000	Kentucky Transportation Cabinet Division of Driver Licensing Fee Accounting Section 200 Mero St. Frankfort, KY 40622 (502) 564-6800
Florida¹ Bureau of Records P.O. Box 5775, MS 90 Tallahassee, FL 32314-5775 (850) 617-2000	Maine Bureau of Motor Vehicles State House Station 29 Attn: Driving Records Augusta, ME 04333-0029 (207) 624-9000 Ext. 52116
Hawaii Traffic Violations Bureau Abstract Section 1111 Alakea Street, 2 nd Floor Honolulu, HI 96813 (808) 538-5500	Maryland¹ State Motor Vehicle Administration Driver Records Unit, Room 145 6601 Ritchie Highway, NE Glen Burnie, MD 21062 (410) 768-7034/7035
Idaho¹ Idaho Transportation Department Driver Services Section P.O. Box 34 Boise, ID 83731-0034 (208) 334-8735	North Dakota¹ Driver's License and Traffic Safety Division 608 E. Boulevard Ave. Bismarck, ND 58505 (701) 328-2604
Indiana¹ Bureau of Motor Vehicles 100 N. Senate Ave., Room N405 Indianapolis, IN 46204 (317) 233-6000, option #2	Rhode Island Operator Control John O. Pastore Bldg. Harrington Hall – Lower Level 30 Howard Ave., Bldg. 58 Cranston, RI 02920 (401) 462-0800
Kansas¹ Department of Revenue Driver Control P.O. Box 12021 Topeka, KS 66612 (785) 296-3671	

¹ State-issued form or other form of written request is considered acceptable.