

**Read Carefully!**

**\*\*\* only to be filed out if you are being cleared to drive\*\*\***

- The information contained in this release is true and correct to the best of my knowledge
- I understand and authorize the access to any and all information and records relating to my driving history or driving offenses committed or alleged, arrests, alleged criminal acts and criminal offenses committed.
- I hereby waive any and all claims, liability for damages of whatever kind or nature which may at any time result to me, my heirs/family, on account of compliance with this authorization, excepting only the communication of knowingly false information
- I am aware that MVR checks may be updated periodically.
- I intend this to be a legally binding release, which I have read and understand. I understand that I may consult with an attorney before signing this document. A facsimile or photocopy of this authorization shall be as valid as the original.
- I HAVE CAREFULLY READ THIS RELEASE AND KNOW THE CONTENTS. I SIGN THIS RELEASE AS MY OWN FREE ACT.

Date of Birth \_\_\_\_\_

Driver License Number \_\_\_\_\_ State \_\_\_\_\_

Name \_\_\_\_\_(printed)

Signature \_\_\_\_\_

Date \_\_\_\_\_

**ATTACH A COPY OF YOUR DRIVER'S LICENSE AND CURRENT INSURANCE**