



pennsylvania
DEPARTMENT OF TRANSPORTATION

REQUEST FOR DRIVER INFORMATION

DO NOT SEND CASH • SEE REVERSE FOR INSTRUCTIONS

Bureau of Driver Licensing • P.O. Box 68695 • Harrisburg, PA 17106-8695

CHECK (✓) ONE ONLY:

- ☐ BASIC INFORMATION: **\$14.00 FEE** (Driver history is **not** included)
☐ 3 YEAR DRIVER RECORD: **\$14.00 FEE**
☐ 10 YEAR DRIVER RECORD: **\$14.00 FEE** (Employment Purposes Only)

- ☐ FULL HISTORY: **\$14.00 FEE**
☐ CERTIFIED DRIVER RECORD: **\$44.00 FEE**
☐ COPY OF DOCUMENT FROM FILE (MICROFILM): **\$14.00 FEE**
☐ CERTIFIED COPY OF DOCUMENT FROM FILE: **\$44.00 FEE**

You may obtain a copy of your own 3 year or 10 year Driving Record on PennDOT'S website at www.dmv.pa.gov

A REQUESTER INFORMATION NAME/COMPANY _____ ADDRESS <small>P.O. Box number may be used in addition to the actual address, but cannot be used as the only address.</small> _____ CITY _____ STATE _____ ZIP CODE _____ DAYTIME TELEPHONE NUMBER () _____ RELATIONSHIP TO DRIVER (REQUIRED) _____ SIGNATURE _____ NOTARIZATION <u>NOT</u> REQUIRED WHEN REQUESTING YOUR OWN RECORD	B END USER OF INFORMATION BEING REQUESTED NAME/COMPANY _____ ADDRESS <small>(P.O. Box not acceptable), need to provide physical location of business/residence</small> _____ CITY _____ STATE _____ ZIP CODE _____ DAYTIME TELEPHONE NUMBER <small>(REQUIRED)</small> _____ RELATIONSHIP TO DRIVER <small>(REQUIRED)</small> _____
C DRIVER INFORMATION NAME: LAST _____ FIRST _____ INITIAL _____ ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____ PHONE NUMBER _____ DATE OF BIRTH _____ DRIVER NUMBER _____ MONTH _____ DAY _____ YEAR _____	D AFFIDAVIT OF INTENDED USE Intended Use of the Information Requested: CHECK ONLY ONE <input type="checkbox"/> B = Driver Release (Driver must complete Section E.) <input type="checkbox"/> C = Credit Business (Legitimate Business need in connection with a business transaction initiated by the driver.) <input type="checkbox"/> C = Credit Potential Investor, Server or Current Insurer (In connection with an assessment of the credit/payment risks associated with an existing credit obligation.) <input type="checkbox"/> E = Employment (To support the hiring or the continuation of employment. Driver must complete Section E.) <input type="checkbox"/> R = Insurance Company (Requesting record for person it intends to insure, now insured or rejected for insurance.) <input type="checkbox"/> K = Court Order must be filed in compliance with Pa. R.C.P. 4009.21 will be required for court order --NOTE: Filed copy of certificate prerequisite must be provided (penalty). <input type="checkbox"/> L = Attorney representing driver in Section C (Driver must complete Section E.) <p>I hereby Certify that _____ _____ will use the driver record about _____ (s) required pursuant to Section 6114 of the Pennsylvania Vehicle Code, for the purpose checked above only and no other reason. This affidavit is filed in compliance with Section 607 of the Fair Credit Reporting Act. I/We have read and signed this form after its completion, and I/We swear or affirm that the statements made herein are true and correct, and that any statement made on or pursuant to this form is subject to the penalties 18 Pa.C.S. Section 4904(b) (relating to unsworn falsifications), which shall include punishment of a fine not exceeding \$2,500, or to a term of imprisonment of not more than one year, or both.</p> <p> _____ SIGNATURE OF REQUESTER</p> <p>Title _____</p>
E DRIVER RELEASE I, _____ hereby request the Department of Transportation to furnish a copy of my PA Driver's Record to _____ NAME OF PERSON/COMPANY _____ _____ SIGNATURE OF DRIVER _____ DATE _____	F MICROFILM TYPE OF DOCUMENT _____ DATE OF VIOLATION _____ _____ (see list of available documents) Documents Available: <ul style="list-style-type: none"> • Citations • Court Certifications • Applications • License Renewals • Judgments • Suspension Credit Affidavits • Interlock Removal Letter • Suspension/Revocation Letters • Restoration Letters • Rescinding Letters • Department Hearing or Exam Notice
G MESSENGER NO. _____	NOTARIZATION SUBSCRIBED AND SWORN TO BEFORE ME: _____ MONTH _____ DAY _____ YEAR _____ <p>SIGNATURE OF NOTARY _____ _____ SIGNATURE OF DRIVER _____ _____ SIGNATURE OF DRIVER _____ _____</p>

INSTRUCTIONS

1. **WE ONLY ACCEPT electronic PDF files. DO NOT send a picture or fax of the release.**
2. **COMPLETE Sections B, C & E only.** Notarization is NOT required.
3. **ONLY complete highlighted lines.** The line labeled 'Name of Person/Company' in Section E must be left blank.
4. **PROVIDE Driver's SSN** on the 'Instructions' Page.
5. **TYPE** all requested information on the front of the form. Submitting **ONLY** a name and address does not provide enough information for a proper search of the driver files.
6. A non-refundable fee is required for each request. If the Bureau has no record for the information requested or the data supplied is insufficient, the fee will be applied to the cost of the search.

SSN: _____

IMPORTANT INFORMATION CONCERNING THE USE OF DRIVER INFORMATION

- Driver record information is confidential and restricted information and the Requestor/End User is responsible for establishing procedures to protect the confidentiality of these records.
- Driver record information can only be used for the purpose stated in Section D.
- Driver record information cannot be sold, assigned, or otherwise transferred to any party, other than the End User.
- PennDOT retains exclusive ownership of all driver record information and the Requestor/End User shall not combine and/or link in with any other data on any database except as may be required by law.
- The driver record information cannot be used for direct mail advertising or any other type or types of mail or mailings.
- The driver record information cannot be disseminated or published on the Internet without the express written permission of PennDOT.
- PennDOT reserves the right to audit each request for driver record information. If the Requestor/End User is found to have requested driver record information for an unauthorized purpose, access to Pennsylvania driver record information will be terminated.