

# REQUEST FOR DRIVER INFORMATION

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CHECK ( ) ONE ONLY:

- BASIC INFORMATION: \$9.00 FEE (Driver history not included)
- 3 YEAR DRIVER RECORD: \$9.00 FEE
- 10 YEAR DRIVER RECORD: \$9.00 FEE (Employment Purposes Only)

- FULL HISTORY: \$9.00 FEE
- CERTIFIED DRIVER RECORD: \$32.00 FEE
- COPY OF DOCUMENT FROM FILE (MICROFILM): \$9.00 FEE
- CERTIFIED COPY OF DOCUMENT FROM FILE: \$32.00 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](http://www.dmv.pa.gov)

<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="2" style="text-align: left;">A REQUESTER INFORMATION</th> </tr> <tr> <td colspan="2">NAME/COMPANY</td> </tr> <tr> <td colspan="2">ADDRESS 3 2 %R[ QXPEHU PD\ EH XVHG LQ DGGWLWRQ W RQO\ DGGUHV V</td> </tr> <tr> <td>CITY</td> <td>STATE ZIP CODE</td> </tr> <tr> <td colspan="2">DAYTIME TELEPHONE NUMBER 5(48,5('</td> </tr> <tr> <td colspan="2">RELATIONSHIP TO DRIVER 5(48,5('</td> </tr> <tr> <td colspan="2">SIGNATURE <u>X</u></td> </tr> <tr> <td colspan="2">NOTARIZATION <input type="checkbox"/> NOT REQUIRED WHEN REQUESTING YOUR OWN RECORD</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="2" style="text-align: left;">C DRIVER INFORMATION</th> </tr> <tr> <td>NAME: LAST</td> <td>FIRST</td> <td>INITIAL</td> </tr> <tr> <td colspan="3">ADDRESS</td> </tr> <tr> <td colspan="3">CITY</td> </tr> <tr> <td>STATE</td> <td colspan="2">ZIP CODE</td> </tr> <tr> <td colspan="3">PHONE NUMBER</td> </tr> <tr> <td>DATE OF BIRTH</td> <td colspan="2">DRIVER NUMBER</td> </tr> <tr> <td>MONTH</td> <td>DAY</td> <td>YEAR</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="2" style="text-align: left;">E DRIVER RELEASE</th> </tr> <tr> <td colspan="2">I _____ hereby request</td> </tr> <tr> <td colspan="2" style="text-align: center;">NAME OF DRIVER</td> </tr> <tr> <td colspan="2">the Department of Transportation to furnish a copy of my PA Driver's Record to _____</td> </tr> <tr> <td colspan="2" style="text-align: center;">NAME OF PERSON/COMPANY</td> </tr> <tr> <td colspan="2">SIGNATURE OF DRIVER <u>X</u></td> </tr> <tr> <td colspan="2" style="text-align: right;">DATE</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="2" style="text-align: left;">F MICROFILM</th> </tr> <tr> <td>TYPE OF DOCUMENT</td> <td>DATE OF VIOLATION</td> </tr> <tr> <td colspan="2">(see list of available documents below)</td> </tr> <tr> <td colspan="2">Documents Available:</td> </tr> <tr> <td>‡ L W D W L R Q V</td> <td>‡ 6 X V S H Q &amp; W L R Q I L L V G D Y L W V</td> </tr> <tr> <td>‡ R X &amp; J H W W L I L F D W &amp; R Q S / H Q V L R Q</td> <td>5 / H Y R W F B W V L R Q</td> </tr> <tr> <td>‡ S S O L F D W L R Q V</td> <td>‡ 5 H V W R U B W W R H Q V</td> </tr> <tr> <td>‡ L F H G V H Q H Z D O V</td> <td>‡ / B M W F H L Q V G</td> </tr> <tr> <td>‡ X G J P H Q W V</td> <td>‡ ' H S D U W P H H O U R C Q J D P I R W L F H</td> </tr> </table>	A REQUESTER INFORMATION		NAME/COMPANY		ADDRESS 3 2 %R[ QXPEHU PD\ EH XVHG LQ DGGWLWRQ W RQO\ DGGUHV V		CITY	STATE ZIP CODE	DAYTIME TELEPHONE NUMBER 5(48,5('		RELATIONSHIP TO DRIVER 5(48,5('		SIGNATURE <u>X</u>		NOTARIZATION <input type="checkbox"/> NOT REQUIRED WHEN REQUESTING YOUR OWN RECORD		C DRIVER INFORMATION		NAME: LAST	FIRST	INITIAL	ADDRESS			CITY			STATE	ZIP CODE		PHONE NUMBER			DATE OF BIRTH	DRIVER NUMBER		MONTH	DAY	YEAR				E DRIVER RELEASE		I _____ hereby request		NAME OF DRIVER		the Department of Transportation to furnish a copy of my PA Driver's Record to _____		NAME OF PERSON/COMPANY		SIGNATURE OF DRIVER <u>X</u>		DATE		F MICROFILM		TYPE OF DOCUMENT	DATE OF VIOLATION	(see list of available documents below)		Documents Available:		‡ L W D W L R Q V	‡ 6 X V S H Q & W L R Q I L L V G D Y L W V	‡ R X & J H W W L I L F D W & R Q S / H Q V L R Q	5 / H Y R W F B W V L R Q	‡ S S O L F D W L R Q V	‡ 5 H V W R U B W W R H Q V	‡ L F H G V H Q H Z D O V	‡ / B M W F H L Q V G	‡ X G J P H Q W V	‡ ' H S D U W P H H O U R C Q J D P I R W L F H	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="2" style="text-align: left;">B END USER OF INFORMATION BEING REQUESTED</th> </tr> <tr> <td colspan="2">NAME/COMPANY</td> </tr> <tr> <td colspan="2">ADDRESS 3 2 %R[ QXPEHU PD\ EH XVHG LQ DGGWLWRQ W RQO\ DGGUHV V</td> </tr> <tr> <td>CITY</td> <td>STATE ZIP CODE</td> </tr> <tr> <td colspan="2">DAYTIME TELEPHONE NUMBER 5(48,5('</td> </tr> <tr> <td colspan="2">RELATIONSHIP TO DRIVER 5(48,5('</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="2" style="text-align: left;">D AFFIDAVIT OF INTENDED USE</th> </tr> <tr> <td colspan="2">Intended Use of the Information Requested: CHECK ONLY ONE</td> </tr> <tr> <td colspan="2"> <input type="checkbox"/> RB = Driver Release (Driver must complete Section E.)  <input type="checkbox"/> RC = Credit Business (Legitimate Business need in connection with a business transaction initiated by the driver.)  <input type="checkbox"/> RC = Credit Potential Investor, Server or Current Insurer (In connection with an assessment of the credit/payment risks associated with an existing obligation.)  <input type="checkbox"/> RE = Employment (To support the hiring or the continuation of employment. 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NOTARIZATION

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MESSANGER NO.

# INSTRUCTIONS

1. To request your own record **F R P S O6HMF W \$ R Q R Q R W D U L I J D W7LRQT X L U H G**  
 To request a record other than your own **F R P S O6HMF W \$ R Q D V Q ' G 6 H F W ( L R X Q V F V R Q W W D K G H L Y V H L U Q V D I M E X O U R F N**  
 B, E or L is checked in Section D. If the Requester is obtaining the information on behalf of someone else, Section B must also be completed.

3. PRINT OR TYPE **D O C H T X H V Q W I R G P I D W L K H R R Q W K I R U B X E P L V 2 W / L < Q Q D P D H Q D G G U G R / N Q V R S U R Y L G H**  
**H Q R X L J O K I R U P I D R M S B Q S H H D U R A V K K G H U L M L H O U V**  
**\$ Q R Q U H I X I Q H H V E H O T X I L R U H D F U K H T X H I W W P H X U H K D X R U H F R R W G K L H Q I R U P D M T L X R H R W H K G B W D S S O L H**  
**L V Q V X I I L V F K H Q W E D S S O M W G F R R W W K H H D U F K**

If requesting a microfilm copy of a document, **D O V R P S O6HMF W) L R R Q P X V E W V S H F I L Q L U F R Y L V G K V A S D H Q G D W H**  
**R M K G R F X P H I W W H D U N H H Y H F L D M O D W Q R K H M F R W K G R V W S H R L W D V R X R I Q H A G R U R Y W G C H W M K H**  
**Y L R O D W L R / R C D F M L G R O W K E L W D W L L R T O X H V W H G**

& K H M F N W H S R H U H F R U G X H D W W H B R S W K I R U D P Q B D N F K H R N P R Q H R U G S H U D B A C R B H Q Q ' 2 7  
 DO NOT SEND CASH. \$ W W D R F X K U K H R N P R Q H R U G D H O U G H Q A G R

### For overnight and other special mail:

BUREAU OF DRIVER LICENSING  
 DRIVER RECORD SERVICES  
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 + \$ 5 5 , 6 % 8 5 \$

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## DESCRIPTION OF INFORMATION AVAILABLE

BASIC INFORMATION . . . . , Q F O X G C H P B G G U B V L Q M B E B D W I E L U W Q I G O D R / K L F H Q V H  
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 I H H 3 years from the date request is processed.

10 YEAR RECORD\* . . . . . , Q F O X G C H P B G G U B V L Q M B E B D W I E L U W Q I G O D R / K L F H Q V H W I W H S D U W P D H Q W L D R O G L R O D I W R S D V W  
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FULL HISTORY . . . . . Includes name, address, driver number, date of birth, class, license status, Departmental actions and violations for the  
 I H H complete history of the driver on file in Pennsylvania.

CERTIFIED RECORD . . . . , Q F O X G C H P B G G U B V L Q M B E B D W I E L U W Q I G O D R / K L F H Q V H W I W H S D U W P D H Q W L D R O G L R O D I W R S D V W  
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MICROFILM  
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## IMPORTANT INFORMATION CONCERNING THE USE OF DRIVER INFORMATION

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‡ ' U L Y H H R Q G R U P I D W L R Q I G B I Q U H L D V O U L Q F W H E D O W R S H T X H V W B V H L U G H V S R Q R B E O V H D E O L V K L

‡ 3 H Q Q U 2 H W H L Q O X R Z Q H I U R D O S O L Y H E R Q G R U P I D W L R Q I G B I Q U H L D V O U L Q F W H E D O W R S H T X H V W B V H L U G H V S R Q R B E O V H D E O L V K L  
 D Q G O R Q O L W D Q R W K G H U L R E U O B H Q Q V \ O P H D Q W E D W K B S D U W P H Q W

‡ 7 K G H L Y H E R Q G R U P I D W L R Q I G B I Q U H L D V O U L Q F W H E D O W R S H T X H V W B V H L U G H V S R Q R B E O V H D E O L V K L  
 D Q G O R Q O L W D Q R W K G H U L R E U O B H Q Q V \ O P H D Q W E D W K B S D U W P H Q W

‡ 7 K G H L Y H E R Q G R U P I D W L R Q I G B I Q U H L D V O U L Q F W H E D O W R S H T X H V W B V H L U G H V S R Q R B E O V H D E O L V K L  
 of PennDOT.

‡ 3 H Q Q U 2 H V H W K H V J K M X G H D F U K H T X I H R G W L Y H E R Q G R U P I D W L R Q I G B I Q U H L D V O U L Q F W H E D O W R S H T X H V W B V H L U G H V S R Q R B E O V H D E O L V K L  
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