

## 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)				☐ FULL HISTORY: \$14.00 FEE☐ CERTIFIED DRIVER RECORD: \$44.00 FEE		
☐ 3 YEAR DRIVER RECORD: \$14.00 FEE			COPY OF DOCUMENT FROM FILE (MICROFILM): \$14.00 FEE				
☐ 10 YEAR DRIVER RECORD: \$14.00 FEE (Employment Purposes Only)					CERTIFIED COPY OF DOCUMENT FROM FILE: \$44.00 FEE		
				riving Record on PennDOT'S website at www.dmv.pa.gov			
A	A REQUESTER INFORMATION  NAME/COMPANY			B END USER OF INFORMATION BEING REQUESTED  NAME/COMPANY			
	MANIEROUNI ANT		INAIV	IE/CO	INIPAIN T		
	ADDRESS P.O. Box number may be used in addition to the actual address, but cannot be used as the only address.  CITY STATE ZIP CODE  DAYTIME TELEPHONE NUMBER (REQUIRED)		ADDRESS (P.O. Box not acceptable), need to provide physical location of business/residence  CITY STATE ZIP CODE  DAYTIME TELEPHONE NUMBER (REQUIRED)				
	RELATIONSHIP TO DRIVER (REQUIRED)			RELATIONSHIP TO DRIVER (REQUIRED)			
				D AFFIDAVIT OF INTENDED USE			
				_	Use of the Information Requested: CHECK ONLY ONE		
	NOTARIZATION NOT REQUIRED WHEN REQUESTING YOUR OWN RECORD			☐ B = Driver Release (Driver must complete Section E.) ☐ C = Credit Business (Legitimate Business need in connection with a business			
С	DRIVER INFORMATION		transaction initiated by the driver.)				
	NAME: LAST FIRST	INITIAL			C = Credit Potential Investor, Server or Current Insurer (In connection with an assessment of the credit/payment risks associated with an existing credit obligation.)		
	ADDRESS			☐ E = Employment (To support the hiring or the continuation of employment. Driver must complete Section E.)			
	CITY		R = Insurance Company requesting record of person it intends to insure, now insures, or has rejected for insurance.  K = Court Order must be attached. (A subpoena issued in compliance with Pa. R. C.P. 4009.21 will be accepted in lieu of a court orderNOTE: Filed copy of ordificate persons with the NIST accompany subpoena.)				
	STATE ZIP CODE						
	PHONE NUMBER  DATE OF BIRTH DRIVER NUMBER  MONTH DAY YEAR		of certificate prerequisite MUST accompany subpoena).  L = Attorney representing driver identified in Section C (Driver must complete Section E.)				
			I hereby Certify that				
Е	E DRIVER RELEASE						
	Ihereby request the Department of Transportation to furnish a copy of my PA Driver's Record to NAME OF PERSON/COMPANY						
	X SIGNATURE OF DRIVER		X		more than one year, or both.		
Ę	SIGNATURE OF DRIVER DATE		SIGNATURE OF REQUESTER				
F	MICROFILM		T:	tla.			
	TYPE OF DOCUMENT	DATE OF VIOLATION	- "	tle	SSCRIBED AND SWORN		
					BEFORE ME: MONTH DAY YEAR		
	(see list of available documents below)  Documents Available:  • Citations • Ignition Interlock Removal Letter • Court Certifications • Suspension/Revocation Letters • Applications • Restoration Letters • License Renewals • Rescind Letters • Judgments • Department Hearing or Exam Notice • Suspension Credit Affidavits		z	X			
			10		SIGNATURE OF PERSON ADMINISTERING OATH		
			NOTARIZATION	SEA			
MESSENGER NO.				$\  ^{L}$			