

# EMPLOYEE AUTHORIZATION FOR MVR REVIEW

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I understand that my employer will periodically review my Motor Vehicle Record to determine continued eligibility to drive a company vehicle. In accordance with the provisions of Section 604(b)(2)(A) of the Fair Credit Reporting Act, (Public Law 91-508), I have been informed that a Motor Vehicle Record will be periodically obtained on me for continued employment purposes.

I acknowledge the receipt of the above disclosure and authorize my employer or its designated agent to obtain a Motor Vehicle Record report. This authorization is valid as long as I am an employee or employee candidate and may only be rescinded in writing.

\_\_\_\_\_  
PRINT - EMPLOYEE'S NAME

\_\_\_\_\_  
DRIVER'S LICENSE NUMBER

\_\_\_\_\_  
EMPLOYEE'S SIGNATURE

\_\_\_\_\_  
DATE

If Spouse is an authorized driver, the following must also be provided:

\_\_\_\_\_  
PRINT - SPOUSE NAME

\_\_\_\_\_  
DRIVER'S LICENSE NUMBER

\_\_\_\_\_  
EMPLOYEE'S SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
REVIEWER'S SIGNATURE

\_\_\_\_\_  
DATE

(Sign and retain the original copy in the employee's file)