

### Pennsylvania Motor Vehicle Records Release Form Required

## INSTRUCTIONS

Specific release form (DL 503) version 7-17 is required when ordering Pennsylvania motor vehicle records. Please have your applicant complete "SECTION C" and "SECTION E" of the attached PA MVR consent form. Please leave all other fields blank. Return the signed release form to BCS Background Screening, LLC by uploading to applicant's profile in your secure account and ALSO email to: support@usabackground.com or fax at 305-402-3181

Note: that the turnaround time for Pennsylvania MVRs is approximately 2-3 weeks.

#### Pennsylvania Release Form Instructions:

### A - REQUESTOR INFORMATION: LEAVE BLANK

#### **B - END USER OF INFORMATION BEING REQUESTED:**

Complete this section with your business information. *NOTE:* PO Boxes are not acceptable addresses, need to provide physical location of business/organization.

#### C - DRIVER INFORMATION – DRIVER COMPLETES THE FOLLOWING

- a. Driver Last Name, First Name
- b. Driver Address Information
- c. Driver Phone Number
- d. Driver's Date of Birth
- e. Driver License Number
- D AFFIDAVIT OF INTENDED USE Pre Filled WITH Employment Purposes Only

#### **E - DRIVER RELEASE – DRIVER COMPLETES THE FOLLOWING**

- Driver Full Name –
- Name of Person/Company LEAVE BLANK
- Driver Signature and Date Please have applicant/employee sign and date their signature. *Note:* Signature must have a date, or the release form will be rejected.
- F MICROFILM LEAVE BLANK

#### DO NOT SIGN OR NOTORIZE -

We will notarize the form and submit to Pennsylvania Department of Transportation.

pennsylvania DEPARTMENT OF TRANSPORTATION

# REQUEST FOR DRIVER INFORMATION

# D2508

DO NOT SEND CASH • SEE REVERSE FOR INSTRUCTIONS

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

#### CHECK (✔) ONE ONLY: FULL HISTORY: \$10.00 FEE BASIC INFORMATION: \$10.00 FEE (Driver history is not included) CERTIFIED DRIVER RECORD: \$34.00 FEE □ 3 YEAR DRIVER RECORD: \$10.00 FEE COPY OF DOCUMENT FROM FILE (MICROFILM): \$10.00 FEE □ 10 YEAR DRIVER RECORD: **\$10.00 FEE** (Employment Purposes Only) CERTIFIED COPY OF DOCUMENT FROM FILE: \$34.00 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 **REQUESTER INFORMATION** END USER OF INFORMATION BEING REQUESTED В NAME/COMPANY NAME/COMPANY ADDRESS (P.O. Box not acceptable), need to provide physical location of business/residence ADDRESS P.O. Box number may be used in addition to the actual address, but cannot be used as the CITY STATE ZIP CODE CITY STATE ZIP CODE DAYTIME TELEPHONE NUMBER (REQUIRED) DAYTIME TELEPHONE NUMBER (REQUIRED) Employer RELATIONSHIP TO DRIVER (REQUIRED)\_ RELATIONSHIP TO DRIVER (REQUIRED)\_ D AFFIDAVIT OF INTENDED USE Intended Use of the Information Requested: CHECK ONLY ONE SIGNATURE X **B = Driver Release** (Driver must complete Section E.) NOTARIZATION NOT REQUIRED WHEN REQUESTING YOUR OWN RECORD C = Credit Business (Legitimate Business need in connection with a business transaction initiated by the driver.) С DRIVER INFORMATION C=Credit Potential Investor, Server or Current Insurer (In connection NAME: LAST FIRST INITIAL 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 STATE ZIP CODE Pa. R.C.P. 4009.21 will be accepted in lieu of a court order). L=Attorney representing driver identified in Section C (Driver must complete PHONE NUMBER Section E.) I hereby Certify that\_ DATE OF BIRTH DRIVER NUMBER PRINTED NAME OF REQUESTER MONTH DAY YEAR will use the driver record abstract(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 Ε **DRIVER RELEASE** 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 hereby request made herein are true and correct, and that any statement made on or NAME OF DRIVER pursuant to this form is subject to the penalties of 18 Pa C.S. Section the Department of Transportation to furnish a copy of my PA Driver's 4903(a)(2) (relating to false swearing), which shall include punishment Record to of a fine not exceeding \$5,000, or to a term of imprisonment of not more NAME OF PERSON/COMPANY than two years, or both. Х SIGNATURE OF DRIVER DATE SIGNATURE OF REQUESTER MICROFILM **Records Supervisor** Title TYPE OF DOCUMENT DATE OF VIOLATION SUBSCRIBED AND SWORN TO REFORE ME MONTH DAY YEAR (see list of available documents below) Х NOTARIZATION **Documents Available:** SIGNATURE OF PERSON ADMINISTERING OATH Citations Suspension Credit Affidavits

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SIGN IN PRESENCE OF NOTARY

Applications

Judgments

Court Certifications

• License Renewals

Suspension/Revocation Letters

· Department Hearing or Exam Notice

Restoration Letters

Rescind Letters