



The Wackenhut Corporation
National Research Center
4200 Wackenhut Drive
Palm Beach Gardens, FL 33410
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Fax: 800.275.8319

The State Motor Vehicle Departments referenced in this document require that any company using an agent to retrieve Driving records execute a Permissible Purpose form, which is to be kept on file, at the agent's site. (This requirement is a condition of receiving driving reports from Wackenhut. These forms and the wording contained therein are determined by the states, and are not in the control of Wackenhut).

The forms following this cover certify that your company will utilize Motor Vehicle information for "permissible purposes" only. (Please read the forms carefully as permissible purposes do vary by state.)

***Please read and sign the attached forms.
The originals must be mailed to
The Wackenhut National Research Center***

Subscriber Certificate of Use

**State of Delaware - Motor Vehicle Records (MVR's) and
Additional Driver Discovery (ADD) Reports**

_____ **(Company Name)**

hereby certifies to Wackenhut National Research Center () and the State of Delaware, Division of Motor Vehicles that any and all driver abstract information obtained from State of Delaware through shall be used exclusively for the permitted purposes as defined under the laws of the State of Delaware and the Federal Fair Credit Reporting Act ("FCRA").

_____ **(Company Name)**

further certifies that such information shall be used solely by

_____ **(Company Name)**

shall not be sold, assigned or otherwise transferred to any other party or entity.

Subscriber: _____

(Address)

By: **X** _____

Date: _____

GEORGIA DEPARTMENT OF PUBLIC SAFETY BULK USER CERTIFICATE

_____ certifies that for each driver record it requests, the information contained therein shall be used solely for the underwriting of Insurance involving the driver and that it has on file an application for renewal of or amendment to Insurance, or has written authorization of the licensee on file.

In filing this certificate, the company agrees to the following provisions:

In the event that an adverse decision is based upon any information supplied to the company by the Department of Public Safety then upon request of the driver this company or the producing agent will inform the named insured driver of all information pertinent to the decision. This provision is to be construed as requiring the company to include specific information included in the driver's operating record.

All information is requested only for this company's exclusive use. This company will not pass any information included in the motor vehicle report to any other person or company, except as provided in Rule 570-3-13.

Any violation of the provisions of this certificate, any other certificates required by the Department of Public Safety or provisions of the Fair Credit Reporting Act, or any other applicable state or federal law will be sufficient grounds for the Department to refuse to issue any additional information on any other driver that the company may request. This administrative action by the Department will not be deemed to supersede any other sanctions prescribed by law, including but not limited to, O.C.G.A. 40-5-2, providing for twelve (12) months in prison or a fine of \$1,000.00 or both for violating rules and regulations concerning motor vehicle reports.

The Department of Public Safety shall have the right to check all records, files, reports and other materials which it may deem necessary to verify that the company filing this certificate has abided by all terms of the certificate and has not violated any rule of the Department of Public Safety, provision of the Fair Credit Reporting Act or any other applicable state or federal law for the purpose of verifying information contained in this certificate.

The burden of showing compliance with the provisions of this certificate is at all times on the company filing this certificate. Upon reasonable notice by the Department the company must be able to demonstrate such compliance.

Dated at _____ this _____ day of _____, _____

Applicant: _____

Type of Business: _____

Address: _____

Telephone Number: _____

Signature and Title of Person _____
Authorized to Sign Contract: **X**

Authority: Ga. L. 1975, pp. 1008, 1021 (O.C.G.A. 40-5-2); DPS Rule 570-3-14.
DPS-1255 (6/92)

STATE OF MICHIGAN - MOTOR VEHICLE RECORDS (MVRs)

Insurance/Insurance Claims/Employment/Subscriber Certification Of Use

I certify to the Michigan Department Of State that abstracts of driving records obtained from **Wackenhut National Research Center** shall be used exclusively for the purposes of rating and qualifying drivers for insurance, insurance claims or employment I further certify that the company designated below, further agrees the information received will be used only in connection with the business purpose specified under this agreement. Additionally, designated company agrees that the information furnished under this agreement will not be used to engage in any illegal activity, or in any method, act, or practice, which is unfair or deceptive in the solicitation or advertisement of goods, services, or real estate to Michigan or other consumers. Designated company further agrees not to use the information furnished under this Agreement to compile other records for resale and to store, in any shape or form any record or data received from the Michigan Dept. Of State, any longer than permitted by law and to destroy or otherwise dispose of the data at the earliest time permitted by law.

Company name

(Address)

Signature

X

Printed Name & Title

For Employers Only
OHIO BUREAU OF MOTOR VEHICLES
RECORD REQUEST
(R.C. 149.43, 4501.15, 4501.27, AND 4507.53)

PART A Please provide information regarding yourself:

This agency is requesting disclosure of information that is NECESSARY to accomplish the statutory purpose as outlined under RC 4501.27. Disclosure of this information is REQUIRED. FAILURE to provide any information will result in this form not being processed.

YOUR NAME (REQUESTER)		
JOB TITLE (IF APPLICABLE)	COMPANY (IF APPLICABLE)	
STREET ADDRESS		
CITY	STATE	ZIP CODE
TELEPHONE NUMBER	FAX NUMBER	
BMV ACCOUNT NUMBER (IF APPLICABLE)	E-MAIL	

PART B

1. I am requesting personal information contained in a motor vehicle record **regarding one person:**
(Choose one)

- | | |
|---|--|
| <input type="checkbox"/> driver abstract | <input type="checkbox"/> identification card record |
| <input type="checkbox"/> title record | <input type="checkbox"/> vehicle registration abstract |
| <input type="checkbox"/> other (describe) _____ | |

PERSON'S NAME		DATE OF BIRTH
STREET ADDRESS		
CITY	STATE	ZIP CODE
SOCIAL SECURITY NUMBER	DRIVER LICENSE NUMBER	LICENSE PLATE NUMBER
TITLE NUMBER	VEHICLE IDENTIFICATION NUMBER	

2. I am requesting personal information contained in a motor vehicle record **regarding more than one person** as follows: (describe)

A record for use in the normal course of business by me as a **legitimate business** or an agent, employee, or contractor of a legitimate business, for one of the two following purposes: (a) to verify the accuracy of personal information submitted to the business, agent, employee, or contractor by an individual;

A record or use by an **employer** or by the agent or insurer of an employer to obtain or verify information relating to the holder of a **commercial driver license** or permit that is required under the "Commercial Motor Vehicle Safety Act of 1986," 100 Stat. 3207-170, 49 U.S.C. 2701, et seq., as now or hereafter amended;

PART C	
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1. I (requester) qualify for release of personal information contained in a motor vehicle record because I am requesting an **individual record**, and I am not eligible under numbers 2 through 15 (on back).

X _____	_____
Signature	Date

I (requester) qualify under number 2 through 16, as checked below, and I am requesting:

2. A record for use in the normal course of business by me as a **legitimate business** or an agent, employee, or contractor of a legitimate business, for one of the two following purposes: (a) to verify the accuracy of personal information submitted to the business, agent, employee, or contractor by an individual; (b) in case personal information submitted to the business, agent, employee, or contractor by an individual is incorrect or no longer correct, to obtain the correct information, for the sole purpose of preventing fraud, by pursuing legal remedies against, or recovering on a debt or security against, the individual.
 My tax identification number is: _____ My vendor number is: _____
 My professional license number is: _____ Licensed by (agency): _____
3. ___ A record for use by a person, state, or state agency, and I HAVE ATTACHED THE WRITTEN **CONSENT OF THE PERSON ABOUT WHOM THE PERSONAL INFORMATION IS SOUGHT**;
4. ___ Records for **bulk distribution** for surveys, marketing, or solicitations, where the information will be used, rented, or sold solely for bulk distribution for surveys, marketing, or solicitations;
5. ___ A record for the use of a **government agency**, including, but not limited to, a court or law enforcement agency, in carrying out its functions, or for the use of a private person or entity acting on behalf of an agency of this state, another state, the United States, or a political subdivision of this state or another state in carrying out its functions;
6. ___ A record for use in connection with matters regarding **motor vehicle or driver safety and theft**; motor vehicle emissions; motor vehicle product alterations, **recalls**, or advisories; performance monitoring of motor vehicles, motor vehicle parts, and dealers; motor vehicle market research activities, including, but not limited to, survey research; and removal of non-owner records from the original owner records of motor vehicle manufacturers;
7. ___ A record for use in connection with a civil, criminal, administrative, or arbitral **proceeding in a court or agency** of this state, another state, the United States, or a political subdivision of this state or another state or before a self-regulatory body, including, but not limited to, use in connection with the service of process, investigation in anticipation of litigation, or the execution or enforcement of a judgment or order; (a subpoena or other court order may be used instead of this form);
8. ___ A record pursuant to an **order of a court** of this state, another state, the United States, or a political subdivision of this state or another state; (a subpoena or other court order may be used instead of this form);
9. ___ Records for use in **research** activities or in producing statistical reports, where the personal information will not be published redisclosed, or used to contact an individual;
10. Records for use by an **insurer**, insurance support organization, or self-insured entity, or by an agent, employee, or contractor of that type of entity, in connection with a claims investigation activity, anti-fraud activity, rating, or underwriting;
11. ___ A record for use in providing notice to the owner of a **towed**, impounded, immobilized, or forfeited **vehicle**;
12. ___ A record for use by a licensed **private investigative agency** or licensed security service for any purpose permitted under numbers 1 through 15 of this form; my license number is: _____;
13. A record or use by an **employer** or by the agent or insurer of an employer to obtain or verify information relating to the holder of a **commercial driver license** or permit that is required under the "Commercial Motor Vehicle Safety Act of 1986," 100 Stat. 3207-170, 49 U.S.C. 2701, et seq., as now or hereafter amended;
14. ___ A record for use in connection with the operation of a **private toll transportation facility**;
15. ___ A record for any other use **specifically authorized by law** that is related to the operation of a motor vehicle or to **public safety**;
16. ___ A record in order to carry out the purposes of either the "Automobile Information Disclosure Act," 72 Stat. 325, 15 U.S.C. 1231-1233, the "Motor Vehicle Information and Cost Saving Act," 86 Stat. 947, 15 U.S.C. 1901, et seq., the "**National Traffic and Motor Vehicle Safety Act of 1966**," 80 Stat. 718, 15 U.S.C. 1381, et seq., the "Anti-Car Theft Act of 1992," 106 Stat. 3384, 15 U.S.C. 2021, et seq., or the "Clean Air Act," 69 Stat. 322, 42 U.S.C. 7401, et seq., all as now or hereafter amended, for use in connection with one or more of the following matters: (a) motor vehicle or driver safety and theft; (b) motor vehicle emissions; (c) motor vehicle product alterations, recalls, or advisories; (d) performance monitoring of motor vehicles and dealers by motor vehicle manufacturers; (e) removal of non-owner records from the original owner records of motor vehicle manufacturers.

I understand that if I receive personal information under number C 2, 3, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, or 16 of this form, I may **resell or redisclose** the personal information only for uses permitted under numbers 2, 3, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, and 16. I understand that if I receive personal information under number C 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, or 16 of this form, and I **resell or redisclose** any personal information, I must keep for a period of five years a record that identifies each person or entity that receives any of the personal information and the permitted purpose for which the information is to be used, and I must make all such records available to the Registrar of Motor Vehicles upon his request.

I HAVE VERIFIED ALL STATEMENTS ON THIS FORM BY SIGNING THIS FORM ON THE FRONT



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Certification of Permissible Use

An abstract of driving record must be obtained through the State of Washington DMV - Department of Licensing. The Department will not provide a driving record unless the prospective employer / company completes and signs this form. This form must be on file with WNRC before search requests may be processed.

Company:

Company: _____

Street Address: _____

City: _____ State: _____ Zip: _____

*I hereby certify that the intended use of abstracts obtained from the WA DMV - Department of licensing shall be exclusively to determine whether the named individuals should be employed to operate a commercial vehicle or school bus, and that no information contained therein shall be divulged, sold, assigned, or otherwise transferred to any third person or party. The information contained in the abstract of driver record obtained from the Department of Licensing shall be used in accordance with requirements and in no way violate the provision of **RCW 46.52.130**.*

I hereby certify that the employee or prospective employee has supplied, by signed release, written authorization to request and use the abstract. This signed release is on file with the company.

I hereby certify that Wackenhut National Research Center is an agent of the employer and is authorized to obtain the abstract of the record on the company's behalf.

I further certify that I am representative of the above company and authorized to execute contracts on behalf of the company.

 (Employer Signature and Title)

_____/_____/_____
 (Date)

<p>Use Only:</p> <p>Received by: _____ Date Received: ____/____/2000</p> <p>Client ID: _____</p>
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