## REQUEST FOR MVR BASED ON PERMISSIBLE USE #13 OF THE DPPA

This form shall be used by persons making requests for a driver record (MVR - Motor Vehicle Report) under U.C.A. 53-3-104. The form shall be completed by any requester who requires the written consent of the person to whom the information pertains. An MVR shall be released by the division only to qualifying requesters pursuant to 'permissible uses' articulated in the federal Driver Privacy Protection Act (**DPPA**).

## PERSON REQUESTING THE MVR

Please type or print all inform	nation.	Yezeri (Orizini)		
Name of Requester		Daytime telephone Date of request		
Name of Company (if application)	able)	Date of request		
Mailing Address				
	(Street)	City/State	;	ZIP
<b>Certification Statement:</b> I c driver record. I am aware the personal information for a pu	at there are criminal and	d civil penalties for kno	wingly obtaining	
☐ Fee of \$6.00 enclosed.		(Signature of person	requesting drivi	ing record)
The requester listed above red 2721-2724, concerning the fo	quests access to driver re	HOM THE MVR PER ecord(s), including person	nal information a	as defined in 18 U.S.C. §§
	<i>8</i> F			
Name(Last)		(First)	(Middle)	(Date of Birth)
Driver License Number	Address	s (if available)		
APPRO	OVAL OF THE PERS	SON TO WHOM THE	MVR PERTAI	NS .
I am the individual to whom requester to receive a copy o	the MVR pertains and	d am the subject of the	record. I grant p	permission for the above
	Driver	r's Signature		
DLD USE ONLY	Sworn and subsc In the county of	ribed to before me this_	ofofstate of	20
Date received	Notary Signature	<b>:</b>		
DLD employee	, ,	Notary Public	Seal or Stamp	
	Notary expires:			

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