

Request for Check of Driving Record

I hereby authorize you to release the following information to D.E. JONES, INC. for the purpose of investigations required by Sections 391.23 and 391.25 of the Federal Motor Carrier Safety Regulations.

I, (Printed Name) _____, release the reporting agency from any liability for what may result from furnishing such information.

Applicant's Signature: _____ Date: _____

Printed Name _____

Address _____ State _____ Zip _____

Former Address _____ State _____ Zip _____

Date of Birth _____ License # _____ State _____

In accordance with the provisions of Sections 604 and 607 of the Fair Credit Reporting Act, Public Law 91-508, as amended by the Consumer Credit Reporting Act of 1996 (Title II, Subtitle D, Chapter1, of Public Law 104-208), I hereby certify the following:

1. The Consumer (applicant) has authorized in writing the procurement of this report:
2. The consumer (applicant) has been informed in a separate written disclosure that a consumer report may be obtained for employment purposes:
3. The information requested below will be used for a "permissible purpose" (i.e., information for employment purposes) and will be used for no other purpose:
4. The information being obtained will not be used in violation of any federal or state equal opportunity law or regulation:
5. Before taking an adverse action based in whole or part on the report the consumer (applicant) will receive a copy of the requested report and the summary of consumer rights as provided with the report by the consumer reporting agency. I also hereby certify that this report request and the above applicant's release notice meet the definition of "permissible uses" of state motor vehicle records under the provisions of the Driver's Privacy Protection Act of 1994 (Public Law 103-322, Title XXX, Section 30002(a)).

Arkansas Commercial Motor Vehicle Records Alcohol and Drug Test Report Information Release

Effective January 1, 2008, [Act 637](#) requires all employers of Arkansas commercial drivers to search the Arkansas Commercial Driver Alcohol and Drug Testing Database prior to hiring a commercial driver. Arkansas employers and Medical Review Officers authorized in the state of Arkansas are responsible for reporting positive drug and/or alcohol test results, the refusal to submit to a drug and/or alcohol test or the submission of an altered specimen to this central database.

Pursuant to Act 637 of 2007 and Arkansas Code Annotated 27-23-205, I, (Print Name) _____, give permission to D.E. Jones, Inc. to research my information contained in the Arkansas Commercial Motor Vehicle Records Alcohol and Drug Test Database. Further, I understand that D.E. Jones, Inc. will comply with the requirements and that any required information will be reported to the database concerning any drug/alcohol test violations.

Signature X _____ Date _____

Requested by: D.E. Jones, Inc. 207 University Blvd. Morrilton, Ar 72110

Requestor's Signature: _____ Date _____