



REQUEST FOR DRIVER INFORMATION
DO NOT SEND CASH • SEE REVERSE FOR INSTRUCTIONS

UPON COMPLETION PLEASE FAX

TO: 610-935-5446

I have been a resident of PA for ___ years.

Social Security #: ___-___-___

(Required for background check)

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

CHECK (✓) ONE ONLY:

- BASIC INFORMATION: \$9.00 FEE (Driver history is not included)
3 YEAR DRIVER RECORD: \$9.00 FEE
10 YEAR DRIVER RECORD: \$9.00 FEE (Employment Purposes Only)

- FULL HISTORY: \$9.00 FEE
CERTIFIED DRIVER RECORD: \$32.00 FEE
COPY OF DOCUMENT FROM FILE (MICROFILM): \$9.00 FEE
CERTIFIED COPY OF DOCUMENT FROM FILE: \$32.00 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

Form sections A-F: REQUESTER INFORMATION, END USER OF INFORMATION, DRIVER INFORMATION, AFFIDAVIT OF INTENDED USE, DRIVER RELEASE, MICROFILM. Includes fields for name, address, phone, signature, and checkboxes for intended use.

NOTARIZATION

NOTARIZATION box containing 'SIGN IN PRESENCE OF NOTARY' and a vertical 'S E A L' stamp.

MESSENGER NO.