



Driver Record Request

PLEASE PRINT P.O. Box 201430 Helena, MT 59620-1430 • Phone (406) 444-39331 • Fax (406) 444-3816 • driverlicense@mt.gov • dojmt.gov

Office Use
[3]

1. Requested Information (check one)

A. Your Driving Record

B. Another Person's Driving Record

Intended Use: To be completed if you check "B" above:

[1] For use by a federal, state, or local government agency, including a law enforcement agency or any individual acting on behalf of the agency in carrying out its functions. You must complete "Consent to Release Driving Record to Another Person or Entity" on next page.

[2] For use by a business or its agents, employees, or contractors in their normal course of business to verify the accuracy of personal information submitted by the individual to the business or its agents, employees, or contractors. If the submitted information is not correct or no longer correct, to obtain the correct information for the purposes of preventing fraud by pursuing legal remedies against or recovering on a debt or security interest against the individual.

[4] With written consent of the individual(s) who is/are the subject(s) of this search – The Personal information Express Consent form on page two must be completed.

[5] For use as a part of the civil, criminal, administrative, or arbitrative proceeding in any court or government agency or before a self-regulatory body, including the service of process, an investigation in anticipation of litigation, and the execution or enforcement of judgements and orders, pursuant to an order of any court.

[6] For use by an insurer, insurance support agency, or self-insured entity about the investigation of claims, antifraud activities, ratemaking, or underwriting.

[7] For use by a licensed private investigator or security service for any purpose authorized under Montana law.

[8] For use by an employer or its agent to verify information related to a holder of commercial driver license required under federal or Montana law.

[9] For use in providing notice to the owners of towed, abandoned, or impounded vehicles.

[10] For use by a parent of a child under 18 years of age.

[11] For any other use that is specifically related to the operation of a motor vehicle or to public safety and is authorized under Montana Law.

Describe other use: _____

2. Requester Information

Name of Requester: _____

Employer/Company (if applicable): _____ Email _____

Mailing Address: _____ City _____ State _____ Zip _____

Residential Address: _____ City _____ State _____ Zip _____

Daytime Phone: _____ Fax: _____ Driver License #: _____ State: _____

3. Search Information: This Section must be complete.

Full Name: _____

Date of Birth: _____

Driver License #: _____ (optional)

4. Driving Records Fees

Make checks payable to: Motor Vehicle Division

Driving record = \$4.12 per record

Certified driving record = \$10.30 per record *cannot be faxed*

Mail record = \$3.09 extra per mailing (unless a self-addresses, stamped envelop is included)

Fax record = \$3.09 for the first five pages, \$1.03 for each additional page (provide your fax number in section 2 above)

Total = \$ _____

5. Certification: I certify under the penalty of law (§ 45-7-203, MCA Unsworn Falsification to Authorities):

- I have read the Montana driver Privacy Protection Act, § 61-11-501 through § 61-11-516, MCA, and understand that I can only use the information in driving or vehicle records for limited purposes.
- I understand that Montana law § 61-11-509(5), prohibits me from using the data to publish a driver or vehicle owner's personal information, disclose it to a third party, or contact individuals, except for a use that is specifically permitted in § 61-11-507 through § 61-11-509.
- I further understand if I am allowed to provide personal information or highly-restricted personal information that is sold or disclosed to a third party, I must create and maintain records for a period of not less than five years from the date of sale or disclosure that show the name, address, telephone number, and any other identifying information of the third party who bought or received the information and the specific permitted use for which the information was obtained. The records must be produced or made available for inspection at the request of the department.
- I am the person listed as the requester, or if I am signing for an entity, the entity authorized me to do so.
- The information I put on this form is true and correct to the best of my knowledge.
- A list of persons prepared by a public agency may not be used as a distribution list without first securing the permission of those on the list.
- As used in this section, "distribution list" means any list of personal contact information collected by a public agency and used to facilitate unsolicited contact with individuals on the distribution list.

Signature of requester: _____

Printed Name: _____ **Date:** _____



Consent to Release Driving Record & Non-identifiable Personal Information Request

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This form authorizes the Department of Justice, Motor Vehicle Division, to release my driving record to another person or entity.

Name on Driving Record: _____

Driver License #: _____ Date of Birth _____

Residing at: _____ City _____ State _____ Zip _____

I hereby authorize the Department of Justice to release my driving record to the following individual or entity:

Name _____

Address: _____ City _____ State _____ Zip _____

I certify under penalty of law (§ 45-7-203, MCA Unsworn Falsification to Authorities):

- I have read the Montana Driver Protection Act, § 61-11-501 through 61-11-516, MCA, and I understand that I can only use the information in this driving record for limited purposes.
- I am the person listed as the requestor.
- If I am signing for an entity, the entity authorized me to do so.
- The information I put on this form is true and correct to the best of my knowledge.

Signature: _____

Printed Name: _____ Date: _____