



**Insured Name
MVR Request and Authorization to Release
"Motor Vehicle Report"**

To be completed by current/prospective employee.

Individual's Full Name: _____
Last
First
Middle

Date of Birth: _____ Driver's License Number: _____ State: _____

Employee Prospective Employee Job Description: _____

Check appropriate response for each question:

	Yes	No
- Are you furnished a company auto?	_____	_____
- If so, will it be driven by anyone under 25 years of age?	_____	_____
- Have you ever been denied a driver's license or had one suspended/revoked?	_____	_____
- Have you had any moving, traffic violations in the past 3 years?	_____	_____
- Have you had any auto accidents in the past 3 years?	_____	_____

IF THE ANSWER TO ANY QUESTION WAS "YES", GIVE DATES AND DETAILS:

I hereby grant permission for Fred A. Moreton & Company to secure my Motor Vehicle Report (MVR) to determine my "driving" insurability under Insured Name's automobile policy. I also affirm that the statements made above are stated truthfully and without reservation. I understand that my MVR is likely to contain my driving record, including a record of arrests for driving offenses. Additionally, I understand that the contents of my MVR may be used to underwrite Insured Name's commercial insurance.

 (Signature of current/prospective employee) _____
 (Address)

 (City, State) _____
 (Date)

Fred A. Moreton & Company is under no obligation to provide you with a copy of your MVR.