**Motor Vehicle Record Disclosure and Release Form**

In connection with my ongoing employment or my application for employment, should I have or secure a position with named company listed below, I understand that a motor vehicle record, which contains public record information, may be requested. I further understand that such report(s) will contain personal information and public record information concerning my driving record from federal, state, and other agencies that maintain such records, as well as independent services that provide driving record information.

**I authorize, without reservation, any party or agency contacted to furnish the above-mentioned information to Shepherd Insurance & Financial Services or its agent.**

I hereby authorize procurement of my motor vehicle report. If hired, this authorization shall remain on file and shall serve as ongoing authorization for you to procure such reports at any time during my employment. **Company’s commercial auto insurer and agent will also use this information in conjunction with loss control and safety review efforts.**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name of Company: | | Rite-Way Concrete Seal Systems, Inc. | | | | | | | |
|  | |  | | | |  | | |  | |
| Address: | **1194 N 900 W Wolcott, IN 47995** | | | | | | | | |
|  | |  | | | |  | | |  | |
| Date: | **/ /** | | | Fax # | **219-279-2525** | | | Phone # | **219-279-2385** |
|  | |  | |  | |  |  | |  | |
| Contact person to receive information on MVR | | | | **BGL @theriteway.com** | | | | | |
|  | | |  |  | |  |  | |  | |

**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 #: | |  | | State |  |
|  | MM\DD\YY | |  | |  | |  |  |

Employee  Prospective Employee

|  |
| --- |
|  |

I hereby grant permission for Shepherd Insurance to secure my Motor Vehicle Report (MVR) to determine my “driving” insurability under the automobile policy of the above named company. 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, and that Shepherd Insurance will let my employer know (by a yes/no) if I am eligible as a driver on my employer’s Commercial Auto policy. Additionally, I understand that the contents of my MVR may be used to underwrite Company’s commercial insurance.

|  |  |
| --- | --- |
|  |  |
| (Signature of current/prospective employee) |  |
|  |  |