

# REQUEST FOR CHECK OF COMMERCIAL DRIVING RECORD AND/OR ALCOHOL & DRUG TEST RESULTS

I hereby authorize you to release the following information to \_\_\_\_\_  
and Arkansas Oil Marketers Association, Inc. (Requesting Company)

\_\_\_\_\_  
(Consumer/Driver's Signature)

\_\_\_\_\_  
(Date)

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 11, Subtitle D, Chapter 1, of Public Law 104-208)**, I hereby certify the following:

1. The consumer (driver) has authorized in writing the procurement of this report;
2. The consumer (driver) 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; and
5. Before taking an adverse action based in whole or in part on the report the consumer (driver) 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 300002(a)) and **Arkansas Code Annotated §27-23-207** requiring all employers to request information from the Commercial Driver Alcohol and Drug Testing Database for each employee who is employed in, or has submitted an application for employment for a safety sensitive transportation job.

\_\_\_\_\_  
(Signature of Applicant/Employer)

\_\_\_\_\_  
(Date)

Results to be returned to: \_\_\_\_\_

(Applicant/Employer's email address or Fax Number)

**Please select one or both:**

	Member Price	Non-Member Price
Arkansas Commercial Driving Record	<input type="checkbox"/> \$20.00	<input type="checkbox"/> \$30.00
Alcohol & Drug Test Results	<input type="checkbox"/> \$10.00	<input type="checkbox"/> \$15.00

**Please Print**

\_\_\_\_\_  
Full Name of Driver

\_\_\_\_\_  
Arkansas Driver's License Number

\_\_\_\_\_  
Date of Birth