



**MOTOR VEHICLE DRIVER  
LICENSE RELEASE**

**DPPA Authorization  
To Disclose Personal Information**



I understand that personal information contained in my Motor Vehicle Record is protected by the Federal Driver Privacy Protection Act. I hereby authorize the release of my personal information to InfoCheckUSA and the Company named below.

\_\_\_\_\_   
Print Full Name as it appears on your Driver License

\_\_\_\_\_   
Your Signature (MUST BE SIGNED)

\_\_\_\_\_   
Driver License Number

\_\_\_\_\_   
Date Signed

/ /

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Date of Birth (mm/dd/yyyy)

Company to Receive Information: \_\_\_\_\_

**DISCLAIMER:**

The services will be provided by InfoCheckUSA.com., hereafter "ICU". The Client agrees that it shall be responsible for any and all actions that it takes based on any reports ICU provides. The Client shall defend, indemnify, and hold ICU and/or its subcontractors harmless from any and all losses, claims, demands, liability, causes of action, judgments, costs, and attorney fees arising out of this Agreement, except to the extent that ICU is negligent. The Client hereby agrees to hold ICU and its officers, agents, employees, subcontractors, and independent subcontractors harmless on account of any expense, cost, or damage resulting from the publishing by the Client, or the employees, agents, or independent subcontractors of the Client, of any report information provided by ICU contrary to the terms of this Agreement or applicable laws, rules, or regulations. The Client certifies that the information in the reports from ICU will not be given to or resold to any other person or user and that the requests for information will not be made except within compliance with the DPAA.