

Authorization for Driving Record

Consumer reports may be obtained as part of the evaluation of my job application/employment with _____. The reports may be procured by Independence Insurance Group PLLC and may include my driving record, an assessment of my insurability under the company's insurance coverages or other consumer reports. By signing this disclosure, I hereby authorize the company to procure such reports and additional reports about me from time to time, as it deems appropriate to evaluate my insurability or for other permissible purposes.

Sincerely,

Signature of Applicant/Employee

Date

To: Independence Insurance Group PLLC

Please obtain a driving record for the past three years for the following applicant/employee:

Name of Applicant: _____

Address: _____

Former Address: _____

Date of Birth: _____ Social Security Number: NOT REQUIRED

Drivers license number: _____ State: _____

In accordance with the provision of Section 604 and Section 607 of the Fair Credit Reporting Act, I hereby certify that the information requested above will be used for a "permissible purpose" as defined in the Act, and that the information received will be used for no other purpose.

I further certify that if the applicant named above is denied employment based upon the information received, I will identify the source of the report in accordance with Section 615(a) of the Fair Credit Reporting Act.

Insured signature