

Release and Applicant Information Form

Databaserecords.com
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Requestor Information:

Contact Person: _____ Company _____
Contact Phone: _____ Contact Fax: _____
E-Mail _____

Applicant/Subject Information:

Name: _____ Home Phone: _____
Please Print All Requested Information
Current Address: _____ City: _____ ST: _____ Zip: _____
Social Security Number: _____ Sex: _____ Date of Birth: _____
Drivers License Number: _____ State: _____

In connection with any application made by me, I understand that investigative background inquiries may be made on me concerning matters of my motor vehicle information(Driving Record) . I am requesting my driving record for the following on of the following reasons below.

FCRA section number (§§ 604. Permissible purposes of consumer reports [15 U.S.C. § 1681b])

- (1) In accordance with the written instructions of the consumer to whom it relates.
- (2) To a person which it has reason to believe intends to use the information for employment purposes; or
- (3) intends to use the information in connection with the underwriting of insurance involving the consumer; or
- (4) otherwise has a legitimate business need for the information. I have read and understand the above F.C.R.A. statement and I/we are in compliance with the Fair Credit Reporting Act (FCRA), 15 U.S.C. § 1681 *et seq.* The information contained above is held strictly confidential and is not given out to unauthorized individuals.

TRIS will make reasonable efforts to locate the requested information and will make reasonable efforts to check the accuracy of any information provided. Since TRIS does not prepare the underlying records its retrieves, it cannot guarantee the accuracy, timeliness or completeness of the information provided. TRIS only guarantees that it will furnish all the information it has retrieved. TRIS shall not be liable for any loss or injury resulting from the use of, failure to provide, or delay in receiving, such data. In the event that no information can be obtained on the subject matter(s)through our agreed efforts, CLIENT shall nevertheless be responsible for the payment of all fees agreed to be paid as specified above. Client also agrees to pay any attorney's fees and court costs which we may incur in collecting any unpaid amount and agrees to pay any attorneys fees and court costs incurred by TRIS in defending any lawsuit brought by client or client's representative. State fees for driving records may increase. Notification will be given prior to increase and will be added to the price per record stated above. **GENERAL USE OF DATA:** CLIENT agrees that the information supplied by TRIS strictly for its own use, and that this information will not be used by CLIENT for any purposes prohibited by any governmental laws, statutes, ordinances, rules and/or regulations. **COMPLIANCE WITH THE FAIR CREDIT REPORTING ACT (FCRA),** Americans with Disabilities Act (ADA 1990) and the Driver's Privacy Protection Act: CLIENT agrees that any requested reports or information which maybe covered by the (FCRA) Law 91-508 must be used in full compliance with the terms and intentions of that ACT. CLIENT recognizes and understands that the (FCRA) provides that anyone "who knowingly and willfully obtains information on a consumer from a consumer reporting agency under false pretenses shall be fined not more that \$5,000 or imprisoned not more than one year, or both." Client Certifies and agrees that a copy of the of "Notice of Users Of Consumers Reports: Obligations Of Users Under The FCRA" and a Summary of Your Rights under the FCRA have been made available. **ANY FACSIMILE** of this duly signed and executed agreement shall be deemed to be and shall serve as if it were the original agreement between the parties, providing all legal rights and remedies under the governing law of the STATE OF FLORIDA or other applicable governmental authorities.

Driver's Signature: X _____ Date: _____