

MVR RELEASE CONSENT FORM

Authorization and Release to Obtain Information

In conjunction with my potential and/or current employment at Wes's Service, Inc., I

_____ consent to the release of my Motor Vehicle Records

(Applicant/Employee First and Last Name) (MVR) to the company. I understand the company will use these records to evaluate my suitability to fulfill driving duties that may be related to the position for which I am applying and/or currently employed. I also consent to the review, evaluation, and other use of any MVR I may have provided to the company. This consent is given in satisfaction of Public Law 18 USC 2721 et. Seq., "Federal Drivers Privacy Protection Act", and is intended to constitute "written consent" as required by this Act..

Signed (Applicant/Employee): _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Drivers' License Number: _____ State: _____

Wes's Service
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Phone: 708.862.4949
Fax: 708.862.4990