

# TEXAS DPS

## APPLICATION FOR COPY OF DRIVER RECORD



MAIL TO: Texas Department of Public Safety, Box 149008, Austin, TX 78714-9008

DO NOT MAIL CASH. Mail check or money order payable to: Texas Department of Public Safety

Any questions regarding the information on this form should be directed to the Contact Center at 512-424-2600. Allow 2-3 weeks for delivery.

**Check Type of Record Desired**

**FEE**

- 1. Name – DOB – License Status – Latest Address. \$ 4.00
- 2. Name – DOB – License Status – 3 Year Record only lists Crashes/Moving Violations. \$ 6.00
- 2A. CERTIFIED version of #2. This Record is Not acceptable for a Defensive Driving Course (DDC). \$ 10.00
- 3. Name – DOB – License Status – Record of ALL Crashes/Violations. **Furnished to Licensee Only.** \$ 7.00
- 3A. CERTIFIED version of #3. **Furnished to Licensee Only and is Acceptable for DDC.** \$ 10.00
- 4. Abstract Record – Certified abstract of completed driver record. \$ 20.00
- Other: (Original Application, DWLI, etc.) \_\_\_\_\_ \$ \_\_\_\_\_ (If Required)

**Mail Driver Record To: (Please Print or Type)**

CITY OF MCALLEN		HR DEPT	
Requestor's Last Name		Requestor's First Name	
PO BOX 2210			
Street Address		Texas Driver License Number	
MCALLEN	TX	78501	956-681-1045
City	State	Zip Code	Daytime Telephone Number (include area code)

**If requesting on behalf of a business, organization, or other entity, please include the following:**

CITY OF MCALLEN  
 Name of business, organization, entity, etc.  
 HUMAN RESOURCES  
 Your Title or Affiliation with above  
 MUNICIPALITY  
 Type of business, organization, etc. (i.e., insurance provider, towing company, private investigation, firm, etc.)

**Information Requested On:**

_____	MM/DD/YYYY	_____
Texas Driver License Number	Date of Birth	Suffix (SR., JR., etc.)
Last Name		
First Name		
Middle Name/Maiden Name		

**Individual's Written Consent For ONE TIME Release to Above Requestor**

(Requestor, if you do not meet one of the exceptions listed on the back of this form, please be advised that without the written consent of the driver license/ID card holder, the record you receive will not include personal information.)

I, \_\_\_\_\_, hereby certify that I granted access on this one occasion to my Driver License/ID Card record, inclusive of the personal information (name, address, driver identification number, etc.) to **CITY OF MCALLEN**

Signature of License /ID Card Holder or Parent /Legal Guardian \_\_\_\_\_ Date \_\_\_\_\_

**State and Federal Law Requires Requestors to Agree to the Following:**

In requesting and using this information, I acknowledge that this disclosure is subject to the federal Driver's Privacy Protection Act (18 U.S.C. Section 2721 et seq.) and Texas Transportation Code Chapter 730. False statements or representations to obtain personal information pertaining to any individual from the DPS could result in the denial to release any driver record information to myself and the entity for which I made the request. Further, I understand that if I receive personal information as a result of this request, it may only be used for the stated purpose and I may only resell or redisclose the information pursuant to Texas Transportation Code §730.013. Violations of that section may result in a criminal charge with the possibility of a \$25,000 fine.

I certify that I have read and agree with the above conditions and that the information provided by me in this request is true and correct. If I am requesting this driver record on behalf of an entity, I also certify that I am authorized by that entity to make this request on their behalf. I also acknowledge that failure to abide by the provisions of this agreement and any state and federal privacy law can subject me to both criminal and civil penalties.

Signature of Requestor \_\_\_\_\_ Date \_\_\_\_\_

**If you are not requesting a copy of your own record or do not have the written consent of DL/ID holder, you must provide the information requested on the reverse.**

**Important Instructions – Read Carefully**

The Texas Department of Public Safety may disclose personal information to a requestor without written consent of the DL/ID holder, on proof of their identity and a certification by the requestor that the use of the personal information is authorized under state and federal law and that the information will be used only for the purpose stated and in complete compliance with state and federal law.

**You must meet one or more of the following exceptions if you do not have written consent of the DL/ID holder to be entitled to receive personal information on the above named individual. Please initial each category that applies to the requested driver record.**

- \_\_\_\_\_ 1. For use in connection with any matter of (a) motor vehicle or motor vehicle operator safety; (b) motor vehicle theft; (c) motor vehicle emissions; (d) motor vehicle product alterations, recalls, or advisories; (e) performance monitoring of motor vehicles or motor vehicle dealers by a motor vehicle manufacturer; or (f) removal of nonowner records from the original owner records of a motor vehicle manufacturer to carry out the purposes of the Automobile Information Disclosure Act, the Anti Car Theft Act of 1992, the Clean Air Act, and any other statute or regulation enacted or adopted under or in relation to a law included in the above.
- \_\_\_\_\_ 2. *(Valid for Certified Abstract)* For use by a government agency in carrying out its functions or a private entity acting on behalf of a government agency in carrying out its functions.
- \_\_\_\_\_ 3. For use in connection with a matter of (a) motor vehicle or motor vehicle operator safety; (b) motor vehicle theft; (c) motor vehicle product alterations, recalls, or advisories; (d) performance monitoring of motor vehicles, motor vehicle parts, or motor vehicle dealers; (e) motor vehicle market research activities, including survey research; or (f) removal of nonowner records from the original owner records of motor vehicle manufacturers.
- \_\_\_\_\_ 4. For use in the normal course of business by a legitimate business or an authorized agent of the business, but only to verify the accuracy of personal information submitted by the individual to the business or the authorized agent of the business and to obtain correct information if the submitted information is incorrect to prevent fraud by pursuing a legal remedy against, or recovering on a debt or security interest against the individual.
- \_\_\_\_\_ 5. *(Valid for Certified Abstract)* For use in conjunction with a civil, criminal, administrative, or arbitral proceeding in any court or government agency or before any self regulatory body, including service of process, investigation in anticipation of litigation, execution or enforcement of a judgement or order, or under an order of any court.
- \_\_\_\_\_ 6. For use in research or in producing statistical reports, but only if the personal information is not published, redisclosed, or used to contact any individual.
- \_\_\_\_\_ 7. For use by an insurer or insurance support organization, or by a self insured entity, or an authorized agent of the entity, in connection with claims investigation activities, antifraud activities, rating or underwriting.
- \_\_\_\_\_ 8. For use in providing notice to an owner of a towed or impounded vehicle.
- \_\_\_\_\_ 9. For use by a licensed private investigator agency or licensed security service for a purpose permitted as stated on this page.
- \_\_\_\_\_ 10. *(Valid for Certified Abstract)* For use by an employer or an authorized agent or insurer of the employer to obtain or verify information relating to a holder of a commercial driver license that is required under 49 U.S.C. Chapter 313.
- \_\_\_\_\_ 11. For use in connection with the operating of a private toll transportation facility.
- \_\_\_\_\_ 12. For use by a consumer-reporting agency as defined by the Fair Credit Reporting Act (15 U.S.C. §1681 et seq.) for a purpose permitted under the Act.
- \_\_\_\_\_ 13. For any other purpose specifically authorized by law that relates to the operation of a motor vehicle or to public safety.  
Please state specific statutory authority \_\_\_\_\_
- \_\_\_\_\_ 14. For use in the preventing, detecting, or protecting against identity theft or other acts of fraud. The Department prior to release of personal information may require additional information.

Below is an example of how numbers and letters should be written on front of this form:



1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 |

A | B | C | D | E | F | G | H | I | J | K | L | M | N | O | P | Q | R | S | T | U | V | W | X | Y | Z |