

**Motor Vehicle Record Request Form:**

**Company Name or Employer:**

South Lane Wheels, Inc. \_\_\_\_\_

**Employer's Address:**

1450 Birch Avenue, Cottage Grove, OR, 97424 \_\_\_\_\_

Name of Job Applicant/Employee: \_\_\_\_\_

Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_

Motor Vehicle Records may be obtained as part of the evaluation of my job application/employment. The reports may be procured by M&G Insurance and Risk Management, that they represent and may include my driving record, and 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 throughout the length of my employment, as it deems appropriate to evaluate my insurability.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_