REQUEST FOR MVR

This form shall be used by persons making requests for a copy of their own driving record (**MVR** -Motor Vehicle Record) under Utah Code Ann. § 53-3-104 or a copy of their own commercial motor vehicle driver record (**CDL - MVR**) under Utah Code Ann. § 53-3-420.

DRIVER INFORMATION

Please type or print all information.

Driver's Name _____ Date of Birth ___/___/_____ License #_____

Daytime Telephone _____ Date of Request _____

Mailing Address _____
Street City/State ZIP

Certification Statement: I certify under penalty of law that I am entitled to personal information from the requested driver record. I am aware that there are criminal and civil penalties for knowingly obtaining, disclosing, or using the personal information for a purpose not permitted under DPPA (18 U.S.C. §§ 2721-2724) and under GRAMA (U.C.A .§ 63G-2-202).

_____
(Signature of person requesting driving record)

☐ Fee of $6.00 enclosed.

TYPE OF MOTOR VEHICLE RECORD (MVR) REQUESTED

☐ **MVR** **Regular Motor Vehicle Driver Record** contains all records of conviction for moving violations and suspensions within the past three (3) years AND all alcohol/drug-related violations, suspensions, and revocations within the past ten (10) years.

☐ **CDL-MVR** ***Commercial*** **Motor Vehicle Driver Record** contains ***ALL*** records of conviction for moving violations, including pleas in abeyance, suspensions, revocations, disqualifications, licenses, and out-of-state accidents. **(Driver must hold a current CDL license to obtain a CDL-MVR.)**

DLD USE ONLY
Date received
DLD employee

DLD60
Rev. 5-14