

EMPLOYER PULL NOTICE PROGRAM

AUTHORIZATION FOR RELEASE OF DRIVER RECORD INFORMATION

I,	, California Driver L	License Number,,
hereby authorize the California Departmerecord, to my employer,	ent of Motor Vehicles (DMV) to	o disclose or otherwise make available, my driving
	COMPANY NAI	ME
	en any subsequent conviction, fa	e (EPN) program to receive a driver record report at illure to appear, accident, driver's license suspension, ng my employment.
(CVC) Section 1808.1(k). I understand that	at enrollment in the EPN prograr	EPN program pursuant to California Vehicle Code m is in an effort to promote driver safety, and that my gibility as a licensed driver for my employment.
EXECUTEDAT: CITY	COUNTY	STATE
DATE	SIGNATURE OF EMPLOYEE	
I, AUTHORIZED REPRESENTAT	, of	COMPANY NAME
this company, that the information entere requesting driver record information on to record is to be used by this employer in the relating to a driving position not mandated unlawful purpose. I understand that if I has Code Section 118) and false representat thousand dollars (\$5,000) or by imprison understand and acknowledge that any fall CVC Sections 1808.45 and 1808.46.	d on this document is true and the above individual to verify the normal course of business and pursuant to CVC Section 1808 ave provided false information, tion (CVC Section 1808.45). The ment in the county jail not exciture to maintain confidentiality	California, that I am an authorized representative of correct, to the best of my knowledge and that I am he information as provided by said individual. This d as a legitimate business need to verify information 3.1. The information received will not be used for any, I may be subject to prosecution for perjury (Penal These are punishable by a fine not exceeding five seeding one year, or both fine and imprisonment. I is both civilly and criminally punishable pursuant to
EXECUTED AT: CITY	COUNTY	STATE
DATE	SIGNATURE AND TITLE OF AUTHORIZED REPR	RESENTATIVE

To obtain a driver record on a prospective employee you may submit an INF 1119 form. To add this driver to the EPN Program you must submit the applicable forms: INF 1100, INF 1102, INF 1103, INF 1103A form. You may obtain forms at our website at www.dmv.ca.gov/otherservices, or by calling 916-657-6346.

THIS FORM MUST BE COMPLETED AND **RETAINED AT THE EMPLOYER'S PRINCIPAL PLACE OF BUSINESS AND**MADE AVAILABLE UPON REQUEST TO DMV STAFF.

DO NOT RETURN THIS FORM TO DMV.



County of Humboldt Human Resources/Risk Management 825 5th Street Room 100 Eureka CA 95501

Employee Pull Notice Program

Authorization For Release of Driver Record Information Form Instructions

If your position requires you possess a California Drivers License and are required to drive within the scope of your job duties; you are required to read this instructional sheet and complete the DMV Employer Pull Notice Program form attached - "Authorization for Release of Driver Record Information".

"Employee" defined as new hires, existing hires, full-time hires, part-time hires, extra help hires and volunteers.

The purpose of this document is to allow your employer, The County of Humboldt, the ability to verify that affected employees have a valid driver's license.

By signing this form, you are authorizing the County of Humboldt to request your driving record and the California Department of Motor Vehicles (DMV) to disclose or otherwise make available your driving record to your employer - The County of Humboldt. This known as the Employer Pull Notice (EPN) Program. If you have a motor vehicle accident, drive while impaired or have your driving privilege revoked or suspended the County will receive notification of such convictions from DMV. This is to insure that all county employee's maintain a valid drivers license while performing their duties.

Once you've completed the form, please return to Human Resources - Risk Management Division for further processing. You may return the form via interoffice mail to the Courthouse - 825 5th Street, Room 100, by facsimile to 707.268.2546, or by email: riskmanagement@co.humboldt.ca.us, entitled "DMV - Confidential.

Should you have any questions regarding this program, please feel free to contact Human Resources - Risk Management Division via phone at 707.268.3669 or by email: riskmanagement@co.humboldt.ca.us.

As always, your drivers license information (name, address etc.) will be kept confidential and any motor vehicle violations will only be shared on a *need to know* basis (Department Head & Supervisor.)