

Motor Vehicle Records Release

Date: _____

Attention: Employees who drive motor vehicles in connection with their employment with Mahaska County, Iowa, or any of its affiliated departments, offices, agencies or Boards employees who administer drive skills test.

I am aware that motor vehicle reports may be obtained as part of Mahaska County's evaluation of my job application and/or employment. The reports may be procured by Mahaska County or its insurance company representative(s), and may include personal information obtained from state motor vehicle departments, my driving record, or an assessment of my insurability for the insurance program.

By signing this letter, I hereby provide my authorization for Mahaska County or their insurance company representative(s) to procure such information and reports, from time-to-time as deemed appropriate.

Sincerely,

Mahaska County Insurance Coordinator

Signature Applicant/Employee

Name as it appears on Driver's License

Driver's License Number/State of Issuance

Date of Birth