

MVR RELEASE CONSENT FORM

In conjunction with my potential employment at GulfStream Logistics Inc.,
I(applicant) consent to the release of my Motor
Vehicle Records (MVR) to the company. I understand the company will use these records to
evaluate my suitability to fulfill driving duties that may be related to the position for which I an
applying.
I also consent to the review, evaluation, and other use of any MVR I may have provided to the
company.
This consent is given in satisfaction of Public Law 18 USC 2721 et. Seq., "Federal Drivers
Privacy Protection Act", and is intended to constitute "written consent" as required by this Act.
Signed (applicant)
Date:
Driver's License Number:
State:

THE BELOW DISCLOSURE AND AUTHORIZATION LANGUAGE IS FOR MANDATORY USE BY ALL ACCOUNT HOLDERS

IMPORTANT DISCLOSURE

REGARDING BACKGROUND REPORTS FROM THE PSP Online Service

connection with your application for employment with("Prospective Employer"), Prospective employer, its employees, agents or contractors may obtain one or more reports regarding your driving, and safety inspection history om the Federal Motor Carrier Safety Administration (FMCSA).
Then the application for employment is submitted in person, if the Prospective Employer uses any information it obtains from FMCS a decision to not hire you or to make any other adverse employment decision regarding you, the Prospective Employer will provide to with a copy of the report upon which its decision was based and a written summary of your rights under the Fair Credit Reporting to before taking any final adverse action. If any final adverse action is taken against you based upon your driving history or safety port, the Prospective Employer will notify you that the action has been taken and that the action was based in part or in whole on this port.
Then the application for employment is submitted by mail, telephone, computer, or other similar means, if the Prospective Employer ses any information it obtains from FMCSA in a decision to not hire you or to make any other adverse employment decision regarding out, the Prospective Employer must provide you within three business days of taking adverse action oral, written or electronic obtained from FMCSA; the name, address, and the toll free telephone number of FMCSA; that the FMCSA did not make the decision to take the adverse action and is unable to provide the specific reasons why the adverse action was taken; and that you may, upon providing proper identification, request a free copy of the report and may dispute with the FMCSA the accuracy or completeness of any information or report. If you request a copy of giver record from the Prospective Employer who procured the report, then, within 3 business days of receiving your request, togethe ith proper identification, the Prospective Employer must send or provide to you a copy of your report and a summary of your right of the Fair Credit Reporting Act.
either the Prospective Employer nor the FMCSA contractor supplying the crash and safety information has the capability to correctly safety data that appears to be incorrect. You may challenge the accuracy of the data by submitting a request to the tps://dataqs.fmcsa.dot.gov. If you challenge crash or inspection information reported by a State, FMCSA cannot change or correct this ata. Your request will be forwarded by the DataQs system to the appropriate State for adjudication.
ny crash or inspection in which you were involved will display on your PSP report. Since the PSP report does not report, or assign, on apply fault, it will include all Commercial Motor Vehicle (CMV) crashes where you were a driver or co-driver and where those crashes are reported to FMCSA, regardless of fault. Similarly, all inspections, with or without violations, appear on the PSP report. State tations associated with Federal Motor Carrier Safety Regulations (FMCSR) violations that have been adjudicated by a court of lavilla also appear, and remain, on a PSP report.
he Prospective Employer cannot obtain background reports from FMCSA without your authorization.
AUTHORIZATION
you agree that the Prospective Employer may obtain such background reports, please read the following and sign below:
authorize ("Prospective Employer") to access the FMCSA Pre-Employment Screening Program (PSP) yestem to seek information regarding my commercial driving safety record and information regarding my safety inspection history. I anderstand that I am authorizing the release of safety performance information including crash data from the previous five (5) years and inspection history from the previous three (3) years. I understand and acknowledge that this release of information may assist the respective Employer to make a determination regarding my suitability as an employee.

I further understand that neither the Prospective Employer nor the FMCSA contractor supplying the crash and safety information has the capability to correct any safety data that appears to be incorrect. I understand I may challenge the accuracy of the data by submitting a request to https://dataqs.fmcsa.dot.gov. If I challenge crash or inspection information reported by a State, FMCSA cannot change or correct this data. I understand my request will be forwarded by the DataQs system to the appropriate State for adjudication.

I understand that any crash or inspection in which I was involved will display on my PSP report. Since the PSP report does not report, or assign, or imply fault, I acknowledge it will include all CMV crashes where I was a driver or co-driver and where those crashes were reported to FMCSA, regardless of fault. Similarly, I understand all inspections, with or without violations, will appear on my PSP report, and State citations associated with FMCSR violations that have been adjudicated by a court of law will also appear, and remain, on my PSP report.

Signature	

I have read the above Disclosure Regarding Background Reports provided to me by Prospective Employer and I understand that if I sign this Disclosure and Authorization, Prospective Employer may obtain a report of my crash and inspection history. I hereby authorize Prospective Employer and its employees, authorized agents, and/or affiliates to obtain the information authorized above.

NOTICE: This form is made available to monthly account holders by NIC on behalf of the U.S. Department of Transportation, Federal Motor Carrier Safety Administration (FMCSA). Account holders are required by federal law to obtain an Applicant's written or electronic consent prior to accessing the Applicant's PSP report. Further, account holders are required by FMCSA to use the language contained in this Disclosure and Authorization form to obtain an Applicant's consent. The language must be used in whole, exactly as provided. Further, the language on this form must exist as one stand-alone document. The language may NOT be included with other consent forms or any other language.

NOTICE: The prospective employment concept referenced in this form contemplates the definition of "employee" contained at 49 C.F.R. 383.5.

LAST UPDATED 12/22/2015