



Driver Abstract Release Consent Form

Municipality of Argyle employees that are required to operate a motor vehicle as part of their regular job duties will be required to provide consent for the company to obtain a copy of their driver abstract. This measure has been adopted to ensure the health and safety of our employees and the public at large, and to protect the property and best interests of the organization.

Municipality of Argyle will reimburse our staff for any personally incurred costs in obtaining their Driver Abstract.

Please be advised that a driver abstract contains specific information from a person's driving record, including: Name, Address, Date of Birth, Height, Weight, Sex, Class, Issue Date, MVID Number, License Number, Current Demerit Points, Suspended Status, Expiration Date, Reinstatement Conditions (if any), and a List of Violations (Descriptions, Demerit / Merit Points, and Suspension Term).

I, _____, of _____,
Employee Name Address

Declare that my Driver's License Number is: _____

My Date of Birth is: _____

Month

Day

Year

I give consent for Municipality of Argyle to obtain a copy of my

☐ 5 Year

☐ 10 Year

driver abstract, to be released annually, or as required by Municipality of Argyle, to:

_____, of _____
Name of Person / Municipality of Argyle Address

Employee Name: _____



Employee Signature

Date:

DRAFT