

Mail Drop 504M Records Unit Motor Vehicle Division PO Box 2100 Phoenix AZ 85001-2100

MOTOR VEHICLE RECORD REQUEST

46-4416 R12/21 azdot.gov

- Must be signed and notarized on the back
- At least one permissible use must be checked on the back, unless you are requesting your own record
- · See required fees below
 - Motor Vehicle Division offers a single electronic portal for authorized government agencies and commercial companies to access motor vehicle records online from <u>Electronic Data Services</u> (eds@azdot.gov)

The manner in which the Motor Vehicle Division (MVD) may release information from its driver license or motor vehicle records is regulated by the Federal Driver's Privacy Protection Act (or DPPA), 18 U.S.C. 2721-2725 and Title 28, Chapter 2, Article 5 of the Arizona Revised Statutes and 49 CFR 384.225. It is the responsibility of the individual or entity making a request to gain knowledge of all federal and state laws which govern access to and use of MVD records, and to determine eligibility under these laws.

Anyone who knowingly obtains, discloses, or uses personal information from an MVD record for a use not permitted under these statutes, and anyone requesting the disclosure of personal information who misrepresents their identity or makes a false statement in connection thereto with the intent to obtain such information in a manner not authorized by law, is subject to civil and/or criminal penalties.

Requester Information — proof of identification requi	red		·					
Requester Name (first, middle, last, suffix)			icense Number or Other ID	Daytime Phone Number ()				
Mailing Address		City		State	Zip			
P.O. Box 5054			eld	MI	48086-5054			
Representing (name of business or other organization)					1			
Records Deposition Service req	uests@recdep.co	m						
Driver Record Type Uncertified □ 39-Month □ 5-year □ Extended History Vehicle Record Type □ Uncertified □ Certified □ Certified			CDL (Commercial Driver License) Record (no photo available Must check CDL Use on back Uncertified					
Other Records								
Criteria – At a minimum, two <i>Primary Criteria</i> are required (record or multiple records, then additional criteria with your initial request may avoid delays in procedure Record – <i>Primary Criteria</i>	will be needed to I	ocate th	e specific record requested. P					
Licensee Full Name (first, middle name or initial, last, suffix)	Arizona D	river Lic			plied for license nded or revoked			
Driver Record – Secondary Criteria								
	n Date (month/day/	/ear)						
Licensee Residence Address		City		State	Zip			
Vehicle Record – <i>Primary Criteria</i>								
Vehicle Identification Number		Arizona License Plate Number						
			□ No plate has been issued					
Owner Full Name (first, middle, last, suffix)								
Vehicle Record – Secondary Criteria								
Owner Residence Address		City		State	Zip			
Fees (per record or document)				Uncerti				
No fee required for government agencies Lienholder Record\$1.50	Mail-i Drop- Supp VIN S	n (mus off orting n Search	unter (while you wait)t t be notarized) nicrofilm documents for each month searched	\$3.00 \$2.00 \$3.00 \$2.00	\$5.00 \$5.00 \$5.00 \$5.00 \$5.00			
MVD Use Record Located Amount Paid Check Numb	ber Customer N	Number	Date Paid	MVD Ag	ent			
Comments								

U	i am requesting my own record (if this box	s cnecked, a Perm	lissible Uses	box does	not need to be checked bei	ow).								
that info	missible Uses – I understand that the DPP contains personal identifying information (rmation). Based on the specific uses check- apter 2, Article 5.	e.g., a person's dr	iver license p	hotograph	/image, driver license num	ber, name, add	lress and r	nedical/disabili	ty					
	For use by any government agency, including any court or law enforcement agency, in carrying out its functions or any private person or entity acting on behalf of a government agency in carrying out its functions (Permissible Use #1)													
×	For use by an attorney licensed to practice law or by a licensed private investigator in connection with any civil, criminal, administrative or arbitration proceeding in any court or government agency or before any self-regulatory body, including the service of process, investigation in anticipation of litigation and the execution or enforcement of judgments and orders, or pursuant to a court order													
	Professional License Number Court Name a	and Case Number (if a	available)			(Permissible	Use #4)							
	For use by any insurer that writes automobile liability or motor vehicle liability policies and that is under the jurisdiction of the Department of Insurance and Financial Institutions or insurance support organization or by a self-insured entity or its agents, employees or contractors in connection with claims investigation activities and antifraud activities, rating or underwriting (Permissible Use #6)													
	For use by an employer or its agent or insurer to obtain or verify information relating to a holder of a commercial driver license that is required under the commercial motor vehicle safety act of 1986 (49 U.S.C. 31301 through 31317) (Permissible Use #9)													
	For any other use in response to requests for individual motor vehicle records if the state has obtained the express consent of the person to whom the personal information pertains (two Primary Criteria and one Secondary required) (Permissible Use #11)													
	Only if a box is checked for one or more of the person's driver license					the Photo/Ima	ge (select loc rtified 〔	ations only) Certified						
	CDL Use – uncertified (only the following of Transportation, Driver, Motor Carrier or Pr					nformation): F	or use by S	States, Secreta	у					
	☐ For use in connection with matters of at least one of the following: (a) Performance monitoring of motor vehicles, motor vehicle parts and dealers (b) Motor vehicle market research activities, including survey research (c) Removal of non-owner records from the original owner records of motor vehicle manufacturers (Permissible Use #2)													
	Federal Tax Identification/Vendor or Professional L	icense Number	Applicable Lic	ensing Age	псу		(Permi	issible Use #3)						
	For use in research activities and for use individuals (Permissible Use #5)	in producing stati	stical reports	if the pe	rsonal information is not p	ublished, re-di	sclosed or	used to contact	ct					
	For use in providing notice to the owners of	towed or impounde	ed vehicles (F	ermissible	e Use #7)									
	For use by any licensed private investigative permissible use.) (Permissible Use #8)		-			rmissible use (You must (check a secon	d					
	For use in connection with the operation of p For any other use that is specifically authorize	•		•	· ·	olic safety inclu	ding the fol	lowing (check a	at					
_	least one more of the following):	•		·	·	·	-							
	(a) Use by a financial institution or enterpris(b) Use by a motor vehicle dealer who is li							•						
(c) Use by a person who is involved in an accident or the owner of a vehicle involved in an accident if the person who requests the information submits proof to the Department of involvement in the accident														
 (d) Use by a person applying for a bonded title if all of the following conditions exist: (i) The requester verifies to the satisfaction of the Director that the vehicle on which the requester is requesting the record is in the requester's possession (ii) The record is requested in order for the requester to notify the registered 														
owner of the requester's intent to apply to the Department for a bonded title (iii) The requester provides a verification of a vehicle inspection that was performed by an authorized Department employee or agent														
	 (e) Use by an operator of a self-service st in the operator's possession (ii) That the reintent to foreclose its lien and to sell the ver- 	orage facility who a	to allow the o											
indi exc rep offic	tification – I hereby certify, under penalty cated on this form, and for no other use. I ept in accordance with applicable law. I furth resentations contained on this form, and I acers, employees, agents or contractors, from the information provided to me	understand that I er acknowledge that Im intending that I om all actions bro	am prohibited at MVD, by gi MVD so rely.	d from sel iving me a I therefor	ling or disclosing the perso ccess to the requested reco e agree to defend, hold ha	nal information rd information, rmless and ind	set forth in is relying o emnify MV	n these records in the truth of th D and any of it	s, ie ts					
	Requester Name (first, middle, last, suffix)			Requeste	er Signature									
		Acknowledged be	efore me this	date.	Notary or MVD Agent Sign	ature								
		Date	ICou			ssion Eynires								