UNIVERSITY OF ALABAMA IN HUNTSVILLE
MOTOR VEHICLE RECORD RELEASE/REQUEST FORM

I understand that as a condition of my operating any University vehicle on University business, my Motor Vehicle Record may be requested. This information is used to ensure the safety of employees, other students/volunteers, and the general public.

I hereby authorize The University of Alabama in Huntsville, its insurance broker, or company representing the University of Alabama in Huntsville, to access and evaluate my Motor Vehicle Record for the purpose of assessing my insurability only. I agree to provide whatever information is required in order to facilitate access.

Driver's full name: ________________________________________________________

☐ Employee    ☐ Student    ☐ Volunteer    ☐ Family Member

Driver's date of birth: ______________________________________________________

Driver's license number and state: ____________________________________________
Please provide all license numbers and states that apply.

Driver's signature: _________________________________________________________

If the driver is a UAH employee:

Hire date: _________________________________________________________________

Department in which driver works: ____________________________________________

Department Phone number: ______________

Email Address: ____________________________________________________________

Supervisor's Signature: ____________________________________________________

Forward this form to:

Fleet Services
Physical Plant Building, Room 124
fleetsvcs@uah.edu
Phone: 256-824-6482
Fax: 256-824-2341

Central files/Fleet Services/Motor Pool Reservations/Instructions & Forms