

**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