



GUIDELINES - DISCLOSURE AND AUTHORIZATION TO OBTAIN INFORMATION

As a courtesy to our customers, iiX has prepared a sample Disclosure to Consumer with Authorization and Release to Obtain Information, which is below. It is an exemplar template that employers may consider using in the investigation, where permitted, of an employee's or prospective employee's background and employment, education, criminal, driving, drug/alcohol use and/or credit history. The Federal Trade Commission's ("FTC") *Notice to Users of Consumer Reports: Obligations of Users Under the FCRA* has more details on disclosures and authorizations. Individual states also have statutes on privacy and motor vehicle records ("MVRs").

These guidelines, specific state requirements, and the sample are not intended to provide legal advice, which should be sought from your attorney. iiX makes no claims, promises or guarantees about the timeliness, accuracy, completeness, or adequacy of the information they contain, nor does iiX warrant that this form is appropriate for a customer's particular needs.

Authorizations/releases must be obtained before information about the consumer is sought. It is suggested all authorization/releases include the time period that they will be valid, such as stating a specific number of years or where permitted, "over the course of my employment." It is recommended the authorization/release include language about how often a report will be ordered, such as annually, yearly, or periodically over the course of the employment. The requestor must retain signed authorization/releases for five years.

State Specific Requirements. The authorization/release should reflect these state-specific requirements. Note that additional state requirements may apply.

- CALIFORNIA – The continuing consent concept does not apply. A separate authorization/release must be requested each time a report is ordered. See Cal. Civ. Code § 1786.16 (a)(2). In addition, please consult your California Requestor Account Agreement regarding applicable statutes, including but not limited to Cal. Civ. Code § 1786.16 (a)(2).
- ARKANSAS – For driving records, "a release signed ... shall remain in force for a period of five (5) years from the date signed by the driver." See Ark. Code Ann. §27-50-908.
- MASSACHUSETTS – An employer may not make written, pre-employment inquiries of an applicant about his or her criminal history. See G.L. c 151B, § 4(91/2).
- NEBRASKA – For driving records, a complete and *notarized* Authorization to Obtain a Copy of Nebraska Driving Records must be obtained for all non-CDL [commercial driving license] employment requests. See Neb. Rev. Stat. § 60-2907. A copy is below.
- NEW HAMPSHIRE – For driving records, the release is to be kept for no more than two years from the date of signature. See N.H. Rev. Stat. Ann. § RSA 260:14V(c)(2)(D).
- WASHINGTON – For driving records, special state forms are required. Contact iiX's Compliance Department at (800) 299-7099 ext. 232.

Sample Disclosure and Authorization/Release Language is on the next page.

SAMPLE DISCLOSURE AND AUTHORIZATION/RELEASE LANGUAGE –
EXEMPLAR FOR DEMONSTRATIVE PURPOSES ONLY
THESE ARE NOT MEANT TO PROVIDE LEGAL ADVICE OF ANY KIND. LEGAL ADVICE
SHOULD BE SOUGHT FROM YOUR ATTORNEY

DISCLOSURE TO CONSUMER

Name of Company

As part of our hiring background and investigation process, we may obtain, where permitted, one or more reports and other information about you, including your background, employment history, academic and/or professional credentials, military service, credit history, and driving history. The information gathered also may involve a criminal history and/or alcohol or drug use history, if any. An investigative consumer report may include information about your character, general reputation, personal characteristics and mode of living that may be obtained by interviews with individuals with whom you are acquainted or who may have knowledge concerning any such items of information. This also may include contacts of all listed prior employers to verify your employment history. In addition, if your employment falls under the federal Department of Transportation (“DOT”) and the Federal Motor Carrier Safety Administration (“FMCSA”), including 49 CFR § 391.23, the report could include your driving, safety inspection and performance history from the FMCSA.

Under the provisions of the Fair Credit Reporting Act (“FCRA”), 15 U.S.C. § 1681 *et seq.*; FMCSA regulations in the Federal Code of Regulations, including 49 CFR § 40.329; and certain state laws, before we can seek such reports, where permitted, we must have your written permission to obtain the information. You have the right, upon written request, to a complete and accurate disclosure of the nature and scope of the investigation. You also are entitled to a copy of that document entitled, Rights Under the Fair Credit Reporting Act.

Your information may be processed in a foreign country by persons providing services to our company and it may be accessible to law enforcement and national security authorities of that jurisdiction.

Notice to California Applicants. Under California law, the reports ordered about you for employment purposes within the State of California are defined as “investigative consumer reports.” These reports may contain information on your character, general reputation, personal characteristics and mode of living. Under California Civil Code § 1786.22, you may view the report(s) maintained at iiX during normal business hours. You also may obtain a copy by submitting proper identification and paying the cost of duplication by appearing at iiX in person, by mail, or by telephone. iiX is required to have personnel available to explain the report(s) and to explain any coded information. If you appear in person, you may be accompanied by a person of your choice, if s/he furnishes proper identification.

Notice to Massachusetts Applicants. Under Massachusetts law, an employer is prohibited from making written, pre-employment inquiries of an applicant about his or her criminal history. MASSACHUSETTS APPLICANTS SHOULD NOT RESPOND TO ANY OF THE QUESTIONS SEEKING CRIMINAL RECORD INFORMATION.

AUTHORIZATION AND RELEASE TO OBTAIN INFORMATION

Under the Fair Credit Reporting Act (“FCRA”), 15 U.S.C. § 1681 *et seq.*, the regulations applicable to the federal Department of Transportation’s Federal Motor Carriers Safety Administration, including 49 CFR § 40.329, the Americans with Disabilities Act and all other applicable federal, state, and local laws, I hereby authorize and permit _____

(Name of Employer or Prospective Employer)

to obtain information, where permitted, pertaining to my employment records, driving history records, driving

performance and safety history, criminal history, credit history, civil records, workers' compensation (post-offer only), alcohol and drug testing, verification of my academic and/or professional credentials, and information and/or copies of documents from any military service records.

I understand that an "investigative consumer report" may result that could include information as to my character, general reputation, personal characteristics, and mode of living that may be obtained by interviews with individuals with whom I am acquainted or who may have knowledge concerning any such items of information. I specifically authorize the release of information by my former employers for the purpose of satisfying driver qualification regulations.

DOT Drivers. I understand that Title 49 of the Federal Code of Regulations, § 391.23, requires that my prospective employer and/or its agent(s) may contact all former employers of a driver within the last three years under the regulation of the Department of Transportation. Information such as dates of employment, position, accident history, as well as information pertaining to my drug and alcohol testing history, may be requested from each employer in accordance with Section 391.23 and 49 CFR 40.25.

By signing below, I consent to and authorize the gathering of this information by my prospective employer and those whom my prospective employer has engaged to request and obtain this information, including from former employers and/or from or through iiX. I hereby release and hold harmless any person, firm, or entity, including iiX, that discloses matters in accordance with this authorization from liability that might otherwise result from the request for use of and/or disclosure of any or all of the information discussed above. This information may be obtained in whole or in part by iiX or its agents.

I consent to and authorize the processing of my information in a foreign country by persons providing services to my prospective employer and understand that this information may be accessible to law enforcement and national security authorities of that jurisdiction.

I understand and acknowledge that this release of information may assist my prospective employer to make a determination regarding my suitability as an employee. I further understand that under the FCRA, I may request a copy of any consumer report from the consumer reporting agency that compiled the report, after I have provided proper identification. I agree that a copy of this authorization has the same effect as an original. Where permitted, this authorization shall remain in effect over the course of my employment and reports may be ordered periodically during the course of my employment.

Applicant's Full Name _____ Date of Signature _____
(Print clearly)

Signature

California Applicants: Please check here to have a copy of your consumer report sent directly to you. The employer or prospective employer is to provide a copy of the report to you in accordance with California Civil Code § 1786.16.

Minnesota and Oklahoma Applicants: Please check here to have a copy of your consumer report sent directly to you. If you wish to receive a copy, you must complete the information below. Please print clearly. If this block is marked, the **prospective employer or employer should return this form to iiX** via fax to (201) 748-1449 within 24 hours of the request for the report.

(PRINTED NAME)

(SIGNATURE)

(DATE)

(STREET ADDRESS)

(CITY)

(ST)

(ZIP CODE)

(DATE OF BIRTH)

_____/_____/_____
(SS NUMBER)

(DRIVERS LICENSE)

(STATE OF ISSUE)

(EMPLOYER OR PROSPECTIVE EMPLOYER)

iiX Customer Name

iiX Customer No.

Date of Request

AUTHORIZATION TO OBTAIN COPY OF NEBRASKA DRIVING RECORD

This form is to be used only when requesting Nebraska Driving Records for all non-CDL [commercial driving license] employment requests. The availability of records is subject to the provisions of the Uniform Motor Vehicle Records Disclosure Act and Neb. Rev. Stat. § 60-2907.

PLEASE PRINT **FORM MUST BE COMPLETED IN FULL**

Name (as it appears on driver's license): _____

Date of Birth: _____ Nebraska Driver's License Number _____
Name and Date of Birth OR Name and Nebraska Driver's License Number must be supplied before a record check can be done.

To be completed by iiX customer:

For what purpose will this record be used? _____

Employer/Potential Employer Name: _____ iiX Account # _____

Name of individual requesting record: _____

Under penalty of law, the undersigned certifies that the information contained on the driving record being purchased will be used as authorized by the Uniform Motor Vehicle Records Disclosure Act. The undersigned hereby acknowledges that this request is made with the understanding that any person requesting disclosure of personal information from the Department of Motor Vehicles who misrepresents his or her identity, misrepresents the purpose for which the information requested will be used, or otherwise makes a false statement on the application shall be guilty of a class IV felony.

Signature: _____ Date: _____

The Department of Motor Vehicles is prohibited from disclosing the information on the record you are requesting unless you have obtained the **notarized** written consent of the record holder on this form as provided below.

To be completed by Applicant/Employee:

I _____ hereby authorize _____ to obtain a copy of my driving record as described above.

Signature of Record Holder: _____
(Signature must be notarized in box below.)

State of _____ County of _____

The foregoing signature of the **record holder** was acknowledged before me this _____ day of _____.

Notary or Designated County Official

Redisclosure

A recipient of a motor vehicle record may only resell or redisclose the information obtained if for one of the uses permitted under the Uniform Motor Vehicle Records Disclosure Act. You shall make and keep for five years records identifying each person to whom you redisclosed the information and the permitted purpose for which it was redisclosed. These records shall be made available for inspection and copying by a representative of the Nebraska Department of Motor Vehicles upon request.