



## **II X GUIDELINES FOR DISCLOSURE AND AUTHORIZATION RELEASE TO OBTAIN INFORMATION**

Attached sample language is recommended for employers to use when investigating background and employment or education history including but not limited to, criminal history reports, driving history records and employment verification. FTC Notice to Users of Consumer Reports: Obligations of Users under the FCRA indicates that the Disclosure must be furnished in a document separate from the Authorization.

This is not meant to provide legal advice of any kind. Legal advice should be sought from your attorney. We make no claims, promises or guarantees about the accuracy, completeness, or adequacy of the information contained herein. We make no warranty that this form is appropriate for your particular needs.

iiX requires that the signed releases be retained by the requester for 5 years in accordance with audit provisions. It is suggested that all releases include the time frame that the release will be valid. A specific number of years or the phrase such as “over the course of my employment” should be included. It is recommended that the release include some language regarding frequency of how often a report will be ordered. It is acceptable to use a term such as annually, yearly or periodically over the course of my employment.

**Guidelines and State Specific Retention Requirements** The release may need to be amended to reflect the information below:

- CALIFORNIA – Continuing consent concept is inapplicable and a separate authorization must be requested each time a report is ordered. - CA Civ. Code 1786.16 (a)(2). In addition, please refer to your CA Requestor Account Agreement and applicable statutes including but not limited to CA Civ Code 1786.16 (a)(2).

### **Requirements Below Pertain To Driving Records Only**

- ARKANSAS – Forms of Authorization “a release signed...shall remain in force for a period of five(5) years from the date signed by the driver per Arkansas Code Ann. 27-50-908
- NEBRASKA – NE RS 60-2907 requires that a complete and notarized NE Authorization to Obtain Copy of Driving Records be obtained for all non-CDL employment requests. A copy is attached.
- NEW HAMPSHIRE – Release shall be kept for no more than 2 years from date of signature. - NH:RSA 260:14V. (c)(2)(D)
- WASHINGTON- Special release form required. To obtain, contact iiX Compliance at (800) 299-7099 ext 8399

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### **S A M P L E - Disclosure**

1. **DISCLOSURE - Must be a clear and conspicuous written disclosure to the consumer before the report is obtained, in a document that consists solely of the disclosure. Sample language is shown below:**

As part of our hiring background and investigation, we may obtain consumer reports to prepare an investigative consumer report. The investigative consumer report may consist of contacting all listed prior employers to verify your employment history. It may also include, but not be limited to, credit information reports, criminal history reports and driving history records. Under the provisions of the Fair Credit Reporting Act (FCRA), 15 U.S.C. § 1681 et seq., before we can seek such reports, 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 are also entitled to a copy of your Rights Under the Fair Credit Reporting Act.

### **S A M P L E - Release**

2. **SAMPLE RELEASE - Employers should obtain prior written authorization from the consumer before ordering reports. Sample authorization language to access reports during the term of employment is shown on page 2.**

**THIS FORM IS NOT MEANT TO PROVIDE LEGAL ADVICE OF ANY KIND. LEGAL ADVICE SHOULD BE SOUGHT FROM YOUR ATTORNEY.**

## AUTHORIZATION AND RELEASE TO OBTAIN INFORMATION

Under the provisions of the Fair Credit Reporting Act (FCRA), 15 U.S.C. § 1681 et seq., the Americans with Disabilities Act and all applicable federal, state, and local laws, I hereby authorize and permit (Employer or Prospective Employer name here) to obtain a consumer report and/or an investigative consumer report which may include the following: my employment records, driving history records, criminal history, credit history, civil record, workers' compensation (post-offer only), 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 include information as to my character, general reputation, personal characteristics, and mode of living which may be obtained by interviews with individuals with whom I am acquainted or who may have knowledge concerning any such items of information. I hereby release and hold harmless any person, firm, or entity that discloses matters in accordance with this authorization, as well as iiX from liability that might otherwise result from the request for use of and/or disclosure of any or all of the foregoing information.

I understand and acknowledge that under provision of 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 understand a copy of this report may be obtained from iiX located at 1716 Briarcrest, Suite 200 Bryan, TX 77802. Their telephone number is (866) 560-7015 and fax number is (201) 748-1449.

I hereby authorize iiX to obtain and prepare a consumer report as set forth above, as part of its investigation of my employment application on behalf of my employer. I agree that a copy of this authorization has the same effect as an original. 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 Full Name (please print clearly)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

### Notice to California Applicants

Under California law, the consumer reports we order on 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 section 1786.22 of the California Civil Code, you may view the file maintained on you by iiX during normal business hours. You may also obtain a copy of this file upon submitting proper identification and paying the costs of duplication services, by appearing at iiX in person, by mail, or by telephone. The agency is required to have personnel available to explain your file to you and the agency must explain to you any coded information appearing in your file. If you appear in person, a person of your choice may accompany you, provided that this person furnishes proper identification

### California Applicants Only

- I request to receive a free copy of any investigative consumer report ordered on me by checking this box. **If this block is marked, Employer/Prospective Employer should provide a copy of report** to applicant in accordance with 1786.16 of the California Civil Code.

### Minnesota & Oklahoma Applicants Only

- Please check here to have a copy of your consumer report sent directly to you. If you wish to receive a copy of your report, you will need to complete the information below. Please print clearly. **If this block is marked, Employer/Prospective Employer should return this form to iiX via fax to (201)748-1449 within 24 hours of report request.**

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Drivers License #

\_\_\_\_\_  
State of Issue

\_\_\_\_\_  
Current Street Address

\_\_\_\_\_  
City & State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Area Code & Telephone Number

\_\_\_\_\_  
iiX Customer Name

\_\_\_\_\_  
iiX Customer Number

\_\_\_\_\_  
Date of Request

# AUTHORIZATION TO OBTAIN COPY OF NEBRASKA DRIVING RECORD

This form is to be used only when requesting Nebraska Driving Records. The availability of records is subject to the provisions of the Uniform Motor Vehicle Records Disclosure Act and NEBRASKA STATUTE 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  
Seal

**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 5 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 Department of Motor Vehicles upon request.