MVR RELEASE CONSENT FORM

In conjunction with my employment, at Prin	me Road Carriers ("the company"),
B 1 0: 1	ee/applicant name) Consent to the release of
my Motor Vehicle Record (MVR) to the com	npany. I understand the company will use these
records to evaluate my suitability to fulfill d	driving duties that may be related to the position fo
which I am applying. I also consent to the r	eview, evaluation, and other use of any MVR I may
have provided to the company.	
-// / /	c Law 18 USC 2721 et. Seq "Federal Drivers Privacy
	2021-03-23 14:18:04
Employee/Applicant Signature	Date 256412677
Date of Birth	Social Security Number (last 4 digits)
051984339	2025-08-18
Drivers' License Number	License Expiration Date
Georgia	
Issuing State	

(Required for all drivers)