

## APPLICATION FOR COPY OF DRIVER RECORD

Mail To: Driver Records Bureau, Texas Department of Public Safety, Box 149246, Austin, Texas 78714-9246  
**MONEY ORDER PAYABLE TO: TEXAS DEPARTMENT OF PUBLIC SAFETY**  
 Any questions regarding the information on this form should be directed to Customer Service at 512-424-2600.  
 Allow 2-3 weeks for delivery.

CHECK TYPE OF RECORD DESIRED:	FEE
<input type="checkbox"/> 1. Date of Birth- License Status- Latest Address	\$ 4.00
<input type="checkbox"/> 2. Date of Birth- License Status- List of Accidents & Moving Violations in Record within Immediate Past 3 Year Period.	\$ 6.00
<input type="checkbox"/> 2A. Same as #2 detailed above but CERTIFIED version. This Record is Not Acceptable for DDC Course.	\$10.00
<input type="checkbox"/> 3. Date of Birth- License Status- List of ALL Accidents & Violations in Record. Furnished to Licensee ONLY.	\$ 7.00
<input type="checkbox"/> 3A. Same as #3 detailed above but CERTIFIED version. Furnished to Licensee ONLY & is Acceptable for DDC Course.	\$10.00

**INFORMATION REQUESTED ON: (TYPE of PRINT in black)**

Texas Driver License #	Social Security #	Date of Birth (Month/Day/Year)
Last Name	First Name	Middle/Maiden

<b>MAIL DRIVER RECORD TO:</b>	Requestor's/Business Name Address City/State/Zip	CUT AND SHOOT MUNICIPAL COURT P.O. BOX 7364 CUT AND SHOOT, TX 77366
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**INDIVIDUAL'S WRITTEN CONSENT FOR ONE TIME RELEASE TO ABOVE REQUESTOR**  
 (Requestor, if you do not meet one of the exception's listed on this form, and if the person you are requesting information on has previously marked his/her record private with the Department, please be advised that without the written consent of the driver license/ID card holder, the record you receive will not include personal information).

I, \_\_\_\_\_, hereby certify that I grant access to my Driver License/ ID Card record, inclusive of the personal information (name, address, driver identification number, etc.) to the above requestor. This access is granted on this one occasion, regardless of the restriction I have placed on my records for public access.

Signature of License/ID Card Holder or Parent/Legal Guardian	Date
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Texas Law (TRC Ch. 730) allows individuals/entities to request that disclosure of certain personal information contained in driver license records be restricted. The Texas Department of Public Safety may disclose personal information to a requestor, on proof of the identity of the person requesting a record and a representation by the requestor that the use of the personal information will be strictly limited to one or more of the following:

**REQUESTOR**, please initial each category that applies. In doing this, you certify that the exception applies to this current request.

I am requesting a copy of my own record (need not mark other exceptions).

1. For use in connection with any matter of (a) motor vehicle or motor vehicle operator safety; (b) motor vehicle theft; (c) motor vehicle emissions; (d) motor vehicle product alterations, recalls, or advisories; (e) performance monitoring of motor vehicles or motor vehicle dealers by a motor vehicle manufacturer; or (f) removal of nonowner records from the original owner records of a motor vehicle manufacturer to carry out the purposes of the Automobile Information Disclosure Act, 15 U.S.C. Section 1231 et seq.; 49 U.S.C. Chapters 301, 305, 323, 325, 327, 329, and 331; the Anti Car Theft Act of 1992, 18 U.S.C. Section 553, 981, 982, 2119, 2312, 2313, and 2322, 19 U.S.C. Sections 1646b and 1646c, Section 3750a et seq.; the Clean Air Act, 42 U.S.C. Section 7401 et seq.; and any other statute or regulation enacted or adopted under or in relation to a law included in the above.

2. If the requestor has obtained written consent from the driver license/ID card holder. (See section above entitled "Individual's Written Consent For One Time Release To Above Requestor").

3. For use by a government agency in carrying out its functions or a private entity acting on behalf of a government agency in carrying out its functions.

NOTE: Signature required on reverse side of form.