

EMPLOYEE, PROSPECTIVE EMPLOYEE, VOLUNTEER,
OR **VOLUNTEER VANPOOL DRIVER** REQUEST

That I, _____, am a prospective or current **volunteer vanpool driver** of the company named below and that I request a copy of my official Driving Record in the State of Washington be released to the company or their agent. I further authorize the company to request a copy of my official Driving Record on an annual basis or at any other time as long as I remain a current volunteer vanpool driver with the company.

Authorization of, prospective or current volunteer vanpool driver for release of abstract driving record is for the purposes as defined in (C) below.

Signature

Date

WA License #

Print full name

Van #

Contact Phone #

(For office use only)

EMPLOYER, VOLUNTEER ORGANIZATION, OR TRANSIT AGENCY ATTESTATION

(A) That Ben Franklin Transit operates a vanpool program and that I am a representative authorized to bind said company.

(B) That American Driving Records/CoreLogic is acting as agent on behalf of Ben Franklin Transit to obtain the abstract of driver records of the above named individual.

(C) That abstracts of driver record shall be used exclusively to determine whether the above named individual should be allowed to voluntarily operate a vanpool vehicle, and that no information contained therein shall be divulged, sold, assigned, or otherwise transferred to any third person or party. A commercial vehicle is defined as any vehicle the principal use of which is the transportation of commodities, merchandise, produce, freight, animals, or passengers for hire and commercial vehicles as defined in Chapter 46.25 RCW.

(D) That the information contained in the abstracts of driver records obtained from the Department shall be used in accordance with the requirements and in no way violate the provisions of RCW 46.52.130. By affirming my signature below, I declare under penalty of perjury, under the laws of the State of Washington, that the foregoing is true and correct.

Ben Franklin Transit
1000 Columbia Park Trail
Richland, WA. 99352

Authorized Officer's Name

Van Fleet Coordinator
Title

Signature

Date

This record must be maintained by the employer, prospective employer, volunteer organization or transit agency for a period of not less than five (5) years from the last date above. Failure to obtain all signatures or misuse of records obtained from the State of Washington may result in prosecution under RCW 46.52.130.