

Instructions: This form must be fully completed and approved before a Requester may obtain access to restricted information. Incomplete forms will be returned for more information. <u>Appropriate documentation must be submitted</u> with this form to verify your eligibility to receive information under the provisions of federal Driver's Privacy Protection Act (DPPA) and Missouri law, including but not limited to, business license, insurance license, bar card, or other personal or professional credentials.

	sard, or other personal or professional credenti	idio.							
Section A - Requester	Name of Entity or Organization		Teleph	elephone Number Fax Number					
	Requester Name		Select one:		Individual Corporation	_	tnership vernment Ag	iont	News Media
	Street Address		City		Corporation		remment Aç	State	Zip Code
	Mailing Address (If Different)		City					State	Zip Code
ectio	Describe the Primary Function of Your Business or Entity E-Mail Address								
0,	Will the information be used for surveys, marketing, or solicitation?								
Section B - Authorization	Requester hereby certifies to the Missouri Department of Revenue that this request for Missouri driver license record information is made under the provisions of the federal Driver's Privacy Protection Act (DPPA) and Section 32.091, RSMo. Please review and carefully select all boxes that apply to requester to obtain personal information on a restricted record. Appropriate documentation must be submitted. Requester is seeking information: (01) As a government agency (federal, state, or local) or on behalf of a government agency, in carrying out its government functions. (02) As a court (federal, state, or local) or on behalf of a law enforcement agency, in carrying out its law enforcement functions. (03) As a law enforcement agency (federal, state, or local) or on behalf of a law enforcement agency, in carrying out its law enforcement functions. (04) For use in connection with matters of driver safety. (05) For use as a legitimate business only (a) to verify the accuracy of personal information submitted by an individual to the business or its agents, employees, or contractors and (b) if such information is not correct, to obtain the correct information, but only for the purposes of preventing fraud by pursuing legal remedies, or recovering on a debt or security interest, against the individual. (For individual requests only.) (06) For use in connection with any civil, criminal, administrative, or arbitral proceeding in any federal, state, or local court or agency or before any self-regulatory body, including the service of process, investigation in anticipation of litigation, and the execution or enforcement of judgments and orders, or pursuant to an order of a federal, state, or local court. (07) For use in research activities, and producing statistical reports, so long as the personal information is not published, redisclosed, or used to contact individuals. (08) As an insurer, insurance support organization, or self-insured entity for use in connection with claims investigation activities, a								
Signature	Requester certifies under penalty of making a false declaration that: 1) all information on this application has been read and understood; 2) all information completed on this application is true and correct; and 3) unauthorized disclosure of information obtained from any Department record may result in civil and criminal liability under Title 18 U.S.C. Sections 2723, 2724, and applicable Missouri law. Requester understands that Section 302.170.7, RSMo, prohibits the sale of data derived from a person's driver license application for commercial purposes, which includes purposes motivated primarily by financial gain such as, but not limited to, surveys, marketing or solicitations, without the express consent of the person to whom such information pertains. Requester shall not sell personal information for commercial purposes without such consent. Signature(s) of Individual, Partners (All Required), Authorized Member or Corporate Officer, News Agent, or Government Agent Title of Corporate Officer, News Agent, or Government Agent								
	Embosser or black ink rubber stamp seal Subscribed and sworn before me, this								
Ę	day of year								
Notary Information		State	County (or City of	St. Lo	puis)	My Comn	nission Expi	res (MM/I	DD/YYYY)
Infor		Notary Public Signatur	re			/_	<u>'/</u>		
tary									
Š		Notary Public Name (Typed or Printed)							

Name of Record Holder — Last, First, Middle Initial								
Missouri Driver License Number	Social Security Number Date of Birth (MM/DD/YYYY)							
Missouri Driver License Number I hereby request the following record (please select the appropriate box The fee is \$2.82 per record. Driver Record* Case History* (A case history consists of any open case or any reinstatement or termination case not less than two years old). Case Document (Specify)* Reinstatement Notice Suspension Notice Conviction (Ticket #) SR-22	Image Portfolio (License Photo) Limited Driving Privilege Package (Consists of a certified driver record, certified SR-22, and a certified Ignition Interlock Device (IID) if applicable). Other (Specify)							
Suspension Notice								
Conviction (Ticket #) *Records May Be Certified								
SR-22	Records May be Certified							
Please send the above record(s) by: Mail Fax (Add \$0.50 per page faxed) Select If Certified Record Requested Records can be obtained by walk-in, mail-in, fax, or e-mail request. The fee is \$2.82 per record. Request that are submitted by mail-in, can only submit with a check or money order. You may visit us at central office, Harry S Truman Building, Room 470, 301 West High Street, Jefferson City, Missouri.								
If you are paying by credit or debit card you will now be required to pay online for the record(s) requested. Once your request has been processed you will receive an e-mail notification of the amount due. This notification will be sent to the e-mail address provided on this form. Once the amount due is paid in full, your record(s) will be released to the e-mail address, mailing address or fax number you provided on this form. A convenience fee will be charged for credit or debit card transactions.								
Records can be obtained by walk-in, mail-in, fax, or e-mail request. The fee with a check or money order. You may visit us at central office, Harry S Tru If you are paying by credit or debit card you will now be required to pay onli will receive an e-mail notification of the amount due. This notification will be paid in full, your record(s) will be released to the e-mail address, mailing ad charged for credit or debit card transactions. Requester's Signature	Printed Name							
1.09400.0.0 0.91.0.00								
The Missouri Department of Revenue may electronically resubmit checks returned for insufficient or uncollected funds.								

Mail to: Driver License Bureau

DL Record Center P.O. Box 2167

Jefferson City, MO 65105-2167

Phone: (573) 751-7675 **Fax:** (573) 526-7367



E-mail: DOR.MVDL.DPPA@dor.mo.gov Form 5500 (Revised 10-2024)

Visit <u>dor.mo.gov/driver-license/</u> for additional information.

Ever served on active duty in the United States Armed Forces?

If yes, visit <u>dor.mo.gov/military/</u> to see the services and benefits DOR offers to all eligible military individuals, or complete the survey at <u>mvc.dps.mo.gov/MoVeteransInformation/Survey/DOR</u> to receive information from the Missouri Veterans Commission. A list of all state agency resources and benefits can be found at <u>veteranbenefits.mo.gov/state-benefits/</u>.