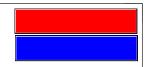


## ACCOUNT HOLDER REQUEST FOR COMPLETE DRIVING HISTORY (MC)



INCLUDES CDL MEDICAL INFORMATION AND DRUG TEST INFORMATION

Company Name:	
	PRINT NAME
AUTHORIZATION TO RELEASE EMPLOYMENT DRIVING RECORD WITH DRUG TEST RESULT INFORMATION	
Oriver Name:	Date of Birth:
authorize the release of my employmel DRS 825.410 and Chapter 163, Oregon	nt driving record including drug test results reported under a Laws 2013.
PLEASE	n Laws 2013.
RS 825.410 and Chapter 163, Oregon	
PLEASE	n Laws 2013.

A complete driving history with CDL Medical Examiner's Certificate information and a three year employment driving record with drug test result information will be provided by submitting this form. Your account will be charged \$5.00. Positive drug test result information will only appear on the employment driving record if it was added before August 1, 2021.

\* If you do not have a DMV Record Inquiry Account, you **must** use Form 735-7195 *Request for Complete Driver History,* to order a complete driving history with CDL Medical Examiner's Certificate information and a three year employment driving record with drug test result information.

MAIL OR FAX REQUEST TO: DMV Record Services

1905 Lana Ave NE Salem OR 97314

**FAX NUMBER:** 503-588-0155 or 503-588-0156

Please call Record Services at 503-945-5308 with questions regarding this form or email <a href="mailto:DMVRecordServices@odot.oregon.gov">DMVRecordServices@odot.oregon.gov</a>

If you want information on obtaining a DMV Record Inquiry Account, please call DMV Records Policy Unit at (503) 945-7950 or email Records Policy at <a href="mailto:ODOTDMVRecordsPol@odot.oregon.gov">ODOTDMVRecordsPol@odot.oregon.gov</a>