

DR 2559 (11/28/18)
COLORADO DEPARTMENT OF REVENUE

Division Of Motor Vehicles Driver Control Section, Room 164 PO Box 173345 Denver, CO 80217-3345 www.colorado.gov/revenue

Certified fee (additional) \$1.00
Certified Record

## Permission to Release Driver Records to Self or Another Person

Driver's License offices provide only personal driving record information. Records and/or other requests are available only at 1881 Pierce St., Lakewood, CO

Pursuant to §42-1-206(1)(b)(II) (7)(a) and (7)(b)(XIII), C.R.S.

7 Year Driver Record Full Driver Record			
I (Please Print Last Name)	First Name		
hereby authorize the release of personal information contained in records maintained by the Colorado Department of Revenue, Division of Motor Vehicles, to:			
Last Name	First Name	Check if to self	
Pursuant to the Driver's Privacy Protection Act (18 USC 2721) and Colorado law (§24-72-204, §42-1-206 (1)(b)(l)).			
Driver			
Driver's Date of Birth	Driver's License Number		
Signature		Date	
Signature of Parent or Guardian if Driver is a Minor		Date	
Person Receiving Record			
Release Records to: Last Name	First Name		
Driver's License Number		State	
Company (if applicable)			
Mailing Address			
City	State	Zip Code	
If your check is returned for insufficient funds or a closed account, you may not be issued or renew any type of driver's license or identification card until the original check is redeemed and an administrative and short check fee are paid.  Under penalty of perjury, I attest that I shall not obtain, resell, transfer, or use the information in any manner prohibited			
by law. I understand that motor vehicle or driver records that are obtained, resold, or transferred for purposes prohibited by law may subject me to civil penalties under federal and state law. All of the information provided is true and accurate to the best of my knowledge.			
Signature of Requestor		Date	