KUDZUE 3
Trucking & Paving

CONSENT FOR MVR FROM STATE AGENCY

I, (Print Name) _____, hereby authorize Kudzue 3 Trucking, Inc. to request a copy of my MVR from any state agency during my employment with Kudzue 3 Trucking, Inc. I understand that as a condition of my employment with Kudzue 3 Trucking, Inc. an MVR will be obtained on demand annually and any other time deemed necessary. By signing below I give my consent for Kudzue 3 Trucking, Inc. or their insurance carrier to obtain a copy of my Motor Vehicle Report in order to determine my continual eligibility for a driving position with them.

NOTE: This information must match your driver's license exactly.

PLEASE PRINT

My Legal (full) Name: _____

My License # _____ State _____

Expiration Date _____ Class _____ Type _____ Endorsements _____

My Social Security Number _____

My Date of Birth _____

_____ _____

Signature Date