



Hortonville Police Department

LIMITED VEHICLE/DRIVER RECORD INFORMATION REQUEST FORM

Required for Disclosure of Personal Information or Highly Restricted Personal Information

The Federal Driver's Privacy Protection Act (DPPA) (18 U.S.C. § 2721) prohibits the disclosure of certain "personal information" or "highly restricted personal information" which originates from the State motor vehicle records. Under current controlling law, disclosure of each item "personal information" or "highly restricted personal information" must be justified by the specific permissible use identified below. Failure to provide such justification may result in redaction of the record requested. Such information shall not knowingly be disclosed or otherwise made available without the express consent of the person to whom the information pertains or unless specifically permitted by the DPPA. For purposes of determining whether such information should be released or redacted, please complete and return this form.

Requestor Information:

Date of Request: _____ Time of Request: _____
Requestor's Name and Company: _____
Address: _____ City/State/Zip: _____
Phone: _____ Alternate Phone: _____
Email Address: _____

_____ Email the report to me (no charge) _____ I will pick up the report in person (\$.25/page)
_____ Mail to the address above (\$.25/page plus postage fee)

Requested Information: To assist in locating record(s), please provide as much information as possible:

Type of Record(s) sought: _____
Date(s) of Record(s) sought: _____
Incident Number: _____ Incident Location: _____
Name of person about whom records are requested, if known: _____
Reason for request of particular items of "personal information" or "highly restricted personal information": _____

Authorization:

I/We are authorized under the Driver's Privacy Protection Act to obtain the identified records containing personal information based upon the following (mark all that apply):

- 1. Authorized for use, if Requestor has obtained the written and notarized consent from the person about who the information pertains.
 - I am requesting a copy of my own record.
 - I am a parent or legal guardian or a minor child and requesting a copy of his/her record.
 - I am requesting the record of another person and have attached their written and notarized consent.
- 2. For use in connection with matters of a motor vehicle or driver safety and theft; motor vehicle emissions; motor vehicle product alterations, recalls, or advisories; performance monitoring of motor vehicles, motor vehicle parts and dealers; motor vehicle market research activities, including survey research; and removal of non-owner records from the original owner records of motor vehicle

manufacturers to carry out the purposes of the Automobile Information Disclosure Act, the Anti-Car Theft Act of 1992, and the Clean Air Act. Authorization (continued):

- 3. A government agency (federal, state, local or tribal) or employed by such, for the purposes of the government agency to carry out its functions.
- 4. A federal, state, circuit, local or tribal court, or employed by such, for the purpose of the court to carry out its functions.
- 5. A Wisconsin or out-of-state law enforcement agency, or employed by such, for the purpose of the law enforcement agency to carry out its functions.
- 6. Authorized representative, agent, contractor, or employed by such, of a legitimate business and the vehicle/driving record being requested will be used for normal course or business, but only to: a. Verify accuracy of the personal information submitted by the individual to the business; b. Obtain correct information, but only for purposes of preventing fraud, pursuing legal remedies, or collecting a debt.
- 7. Authorized for use in connection with any civil, criminal, administrative, or arbitral proceedings in any federal, state, circuit, local, or tribal 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, circuit, local, or tribal court.
- 8. Authorized for use in research activities and producing statistical reports, as long as the personal information is not published, re-disclosed, or used to contact individuals.
- 9. Authorized representative, agent, contractor, or employed by such, of an insurer, insurance support organization or self-insured entity and the vehicle/driving record(s) being requested will be used only in connection with the following: a. Claims investigation; b. Anti-fraud activities; c. Rating or underwriting.
- 10. Authorized for use in providing notice to the owners of towed or impounded vehicles.
- 11. Authorized representative or owner of a licensed private investigative agency or licensed security service and the vehicle/driving record is being requested for the use of purposes permitted under the Federal Driver's Privacy Protection Act.
- 12. Authorized as an employer, or its agent or insurer for use in obtaining or verifying information relating to a holder of a commercial driver license (CDL).
- 13. Authorized representative or owner of a private toll transportation facility for use in the operation of the facility.
- 14. For any other use specifically authorized under the law of the State that holds the record, if such use is related to the operation of a motor vehicle or public safety. (e.g. news gathering and/or reporting)

Penalties The Driver Privacy Protection Act (DPPA) is enforced by the US Department of Justice, which may seek civil and criminal penalties for improperly obtaining, disclosing, or using personal information from a motor vehicle record for a purpose not permitted by the DPPA. In addition, private citizens may also seek civil damages in Federal Court. Certification (*Required*): I agree that the use of the records I have requested is specifically authorized under the laws of the State of Wisconsin and the DPPA and that my intended use of the records is related to the operation of a motor vehicle or public safety or for other use as identified above. I certify that the information and statements on this request are true and correct and understand that the unauthorized disclosure of information obtained from these records for a purpose other than stated on this request form, or the sale or other distribution of the information to a person or organization not disclosed in this request, may result in civil and criminal penalties imposed under Title 18 U.S.C. Section 2724. I further understand that I have the right to requests a mandamus review of the responses provided to this request under Wisconsin Statute Section 19.37(1).

Signature of Requestor: _____ Date Signed: _____