



5 Municipal Plaza, Suite 3, Clifton Park, NY 12065

**CAPTAIN Community Human Services
Permission for Motor Vehicle Record Review**

I, _____ hereby agree and grant permission to CAPTAIN and Marshall & Sterling to secure and review my motor vehicle record. I hereby understand that this review is for insurance underwriting purposes only.

- Driver's License # _____
- Issuing State _____
- Date of Birth _____

Please check one of the following and sign below:

_____ I will drive ONLY a CAPTAIN vehicle for CAPTAIN business.

_____ I will drive my personal vehicle for CAPTAIN business when a CAPTAIN vehicle is unavailable, or if I choose to do so. My signature below confirms that I carry \$100K/\$300K liability coverage on my personal auto insurance policy.

Driver Signature: _____

Witness: _____

Date: _____