

AUTHORIZATION TO PROCURE A CONSUMER REPORT OR INVESTIGATIVE CONSUMER REPORT

I HEREBY authorize CITY OF COMMERCE or those authorized by them to procure consumer reports and/or investigative consumer reports on me in connection with my application for employment or any time during my employment, which shall be used solely for the purpose of evaluating me for employment, promotion, reassignment, or retention as an employee or as an independent contractor. I understand that reports may include information about my prior employment, D.O.T. commercial driver experience as outlined in Parts 382.413, 391.23 and 391.25 of the Federal Motor Carrier Safety Regulations (FMCSRs), driving records, military record, education, credit worthiness and history, character, general reputation, criminal record, and mode of living, residency, general reputation, personal characteristics, performance, experience, reasons for termination of past employment and other qualities pertinent to my qualifications for employment.

I understand that this information may be obtained through a variety of sources, including, but not limited to, public records, educational institutions, financial institutions, credit bureaus, consumer reporting agencies, and personal interviews with my current and former employers, friends, neighbors and associates. I understand that upon written request to the Human Resources Manager,

CITY OF COMMERCE

I will be informed whether an investigative consumer report was requested and given information as to the nature and scope of the investigation requested. I understand that upon written request to the Human Resources Manager, CITY OF COMMERCE, a copy of this Authorization will be provided to me.

_____ Date: _____ Time: _____
Sign then Print Name:

CALIFORNIA, MINNESOTA AND OKLAHOMA RESIDENTS ONLY:
 I wish to receive a free copy of any Consumer Report and/or Investigative Consumer Report concerning me that is requested

Identification Information:

Other Names I Have Been Known By or Worked Under (for example, birth name; names by marriage, divorce, or adoption; or other name changes, etc.): _____

Race _____ Sex _____ Date of Birth _____ Social Security Number: _____

(Race, Sex, Date of Birth, Other Names and Social Security Number are used only for identification purposes to ensure accuracy of reports.)

CURRENT HOME ADDRESS

CITY/STATE/ZIP

EXACT Name on Driver's License: _____

Driver's License Number: _____ State: _____