



FMCSA - Applicant Authorization to Release Safety Performance History

(As required by 49 CFR Parts 40.25 and 391.23)

EMPLOYEE

Name of Applicant: _____ (Print Clearly)

Social Security #: _____ Date of Birth: _____

I, _____, do hereby authorize you to release the following information to _____, for the purposes of investigation as required by Section 391.23 of the Federal Motor Carrier Safety Regulations.

Check this box if you have NOT performed DOT functions in the past three years.

Signature of Applicant

Date

CURRENT EMPLOYER

The above named applicant has applied to this company for a position as _____ and states that he/she was employed by you as (position) _____ from (m/y) _____ to (m/y) _____.

Please phone/fax/mail or email the following information to:

LMP Concrete
ATTN: Misty Langford
ADDRESS: P.O. Box 1599, Mt. Pleasant, TX 75456
PHONE: (903)572-2500 FAX: (903)577-7184

TO BE COMPLETED BY PREVIOUS EMPLOYER

Previous Employer: _____

Address: _____

City: _____ ST: _____ Zip: _____

Phone #: _____ Fax #: _____

Safety Performance History:

Did he/she drive a commercial motor vehicle for you? Yes No

If Yes, what type? Straight Truck Tractor-Semi trailer Bus
 Cargo Tank Doubles/Triples Other (specify) _____

Reason for leaving your company: Discharged Resignation Lay Off Military Duty

Check if there is no safety performance history to report, sign below and return.

Accidents: Complete the following for any accidents included on your accident register (390.15(b)) that involved the applicant in the 3 years prior to the application date shown above.

Date	Location	No. of injuries	No. of fatalities	Hazmat Spill
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____

Enclosed is other accident information pursuant to the employer's internal policies for retaining minor accident information (391.23(d)(2)(ii)).

Any other remarks: _____

Signature: _____ **Title:** _____ **Date:** _____

In accordance with Section 391.23, we are obligated to request the information above from all previous employers of the applicant that employed him/her to operate a commercial motor vehicle within the 3 years preceding the date above. Please complete the information above and return to us within 30 days, as required by Section 391.23(g).

Keep a record of this request and the response for one year.