

# UTAH DEPARTMENT OF PUBLIC SAFETY REQUEST FOR RECORDS

(NOTE: This form DLD 266M, or its substantial equivalent, shall be used by all persons making a request for records of the Driver License Division pursuant to Utah Code Annotated §63G-2-204(1) unless waived by the Division. Utah Code Annotated §63G-2-203 provides that a government agency may charge a reasonable fee to cover the government entity's actual cost of providing a record.)

Please type or print all information

Name: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Daytime telephone: \_\_\_\_\_ Organization (if any): \_\_\_\_\_

Driver License number: \_\_\_\_\_ Date of Request: \_\_\_\_\_

Email: \_\_\_\_\_

Description of Record(s) Requested:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## CERTIFICATION OF REQUESTOR

(References are to the Government Records and Management Act, Chapter 2, Title 63, Utah Code Annotated.)

I hereby represent and/or certify that I: (check any that apply)

- Am the subject of the records(s) 63G-2-202(1)(a)(i);
- Am the parent or legal guardian of an unemancipated minor or a legally incapacitated individual who is the subject of the record(s) 63G-2-202(1)(a)(ii) or (iii);
- Have the power of attorney from the subject of the record(s) 63G-2-202(1)(a)(iv)(A) or 63G-2-202(4)(b)(i);
- Have attached a notarized release from the subject of the record, or his legal representative, dated within 90 days of this request 63G-2-202(1)(a)(iv)(B), 63G-2-202(2)(a)(i)(A), or 63G-2-202(4)(b)(ii);
- Have attached a copy of a court order pursuant to Subsection 63G-2-202(1)(a)(v), 63G-2-202(2)(a)(ii), or 63G-2-202(4)(c), if necessary.

**Certification Statement:** I certify under penalty of law that I am entitled to personal information from the requested record(s). I am aware that there are criminal and civil penalties for knowingly obtaining, disclosing, or using personal information for a purpose not permitted under DPPA (18U.S.C §§2721-2724) and under GRAMA (U.C.A. §63G-2-202).

\_\_\_\_\_  
(Signature of person requesting record(s))

Notary Public Seal or Stamp

Subscribed and sworn to me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_  
In the County of \_\_\_\_\_, State of \_\_\_\_\_  
Notary Signature \_\_\_\_\_  
Notary Expires: \_\_\_\_\_