THIS FORM IS USED BY THE UTAH DRIVER LICENSE DIVISION FOR THE PURPOSE OF REPORTING DRIVERS WHO MAY BE UNSAFE TO DRIVE. ANY PERSON, WHO IN GOOD FAITH, REPORTS A DRIVER WHO APPEARS TO PRESENT AN IMMINENT THREAT TO DRIVING SAFETY SHALL HAVE IMMUNITY FROM ANY DAMAGES CLAIMED AS A RESULT OF DOING SO. Utah Code Annotated (UCA) 53-3-303.

The notification provided under this section relating to a physical, mental, or emotional impairment is classified as a protected record under Title 63G, Chapter 2, Government Records Access and Management Act, and the identity of the person notifying the Division shall not be disclosed by the Division.

NAME OF SUBJECT ________________________________ DATE OF BIRTH ____________________

(Print)

UTAH LICENSE NUMBER or RELATIONSHIP (IF ANY) ____________________ DRIVING PRIVILEGE CARD # _______________

SUMMARY: Describe actions or known impairments that you have observed which caused you to submit this report (be specific)

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THE ABOVE STATEMENT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT IT MAY BE PUNISHABLE AS A MISDEMEANOR TO KNOWINGLY GIVE A WRITTEN FALSE STATEMENT (UCA 76-8-504). I understand that if I have made a notification with the intent to annoy, intimidate, or harass the person that is the subject of the notification I may be charged with an infraction (53-3-305(5)).

REQUESTER INFORMATION:

NAME:__________________________________________

ADDRESS: _____________________________________

_____________________________________________________________________________

PHONE: _______________________________________ 

SIGNATURE: ___________________________________

NOTARIAL CERTIFICATE:

STATE OF _______________________________________

COUNTY OF _____________________________________

Acknowledged before me this ________ day of _________________________________, 20________.

_____________________________________________

Notary Public

S E A L

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Rev. 03-21