



DISCLOSURE TO CONSUMER AND AUTHORIZATION TO OBTAIN INFORMATION iiX GUIDELINES AND SAMPLE

GUIDELINES

As a courtesy to its customers, iiX has prepared the following sample Disclosure to Consumer (“Disclosure”) and Authorization to Obtain Information (“Authorization”). iiX does not require its customers use this Disclosure and Authorization; it is merely an exemplar template of language employers may consider using, where permitted, in the investigation of an employee’s or prospective employee’s background and employment, education, criminal, motor vehicle record (“MVR”), drug/alcohol use and/or credit history.

According to the Fair Credit Reporting Act (“FCRA”) §604(b)(2), a party may not request or obtain a consumer report unless “. . .(i) a clear and conspicuous disclosure has been made in writing to the consumer at any time before the report is procured or caused to be procured, in a document that consists solely of the disclosure, that a consumer report may be obtained for employment purposes; and (ii) the consumer has authorized in writing (which authorization may be made on the document referred to in clause (i)) the procurement of the report by that person.”

Disclosures must:

- be provided to consumer prior to requesting information such as consumer reports or investigative consumer reports,
- must stand alone from the employment application or other extraneous information (with the exception of the authorization), and
- contain a clear disclosure statement explaining that a consumer report may be obtained for employment purposes, which may include a brief description of the nature of the consumer reports.

Signed authorizations:

- must be obtained from the consumer before information about the consumer is sought,
- must be retained by the requestor for a minimum of five years from date of most recently ordered report,
- should include language detailing the length of time authorizations are valid (example: “one year” or “the length of employment”), and
- should not include language that limits an employer’s ability to order reports as needed for employment purposes throughout employment (example: instead of “pre-hire” or “bi-annually”, consider “periodically throughout employment”).

The Consumer Financial Protection Bureau’s (“CFPB”) *Notice to Users of Consumer Reports: Obligations of Users Under the FCRA* has more details on disclosures and authorizations. Individual states also have statutes on privacy and MVRs of which iiX customers must comply.

STATE SPECIFIC REQUIREMENTS

The authorization should reflect these state-specific requirements. Note that additional state requirements may apply.

- **CALIFORNIA:** If you participate in the Employer Pull Notice (“EPN”) program, continuing consent only applies for requests generated through EPN. If you are requesting a record for employees not enrolled in the EPN program, continuing consent does not apply. A separate authorization must be requested each time a report is ordered. See Cal. Civ. Code §1786.16 (a)(2). In addition, please consult your California Requestor Account Agreement regarding applicable statutes, including but not limited to Cal. Civ. Code §1786.16 (a)(2).

- **ARKANSAS:** For driving records, “a release signed ... shall remain in force for a period of five (5) years from the date signed by the driver.” See Ark. Code Ann. §27-50-908.
- **MASSACHUSETTS:** An employer may not make written, pre-employment inquiries of an applicant about his or her criminal history. See G.L. c 151B, § 4(91/2).
- **NEBRASKA:** For driving records, a complete and notarized Authorization to Obtain a Copy of Nebraska Driving Records must be obtained for all non-CDL [commercial driving license] employment requests. See Neb. Rev. Stat. § 60-2907. A sample Nebraska authorization is below.
- **NEW HAMPSHIRE:** For driving records, the authorization is to be kept for no more than two years from the date of signature. See N.H. Rev. Stat. Ann. § RSA 260:14V(c)(2)(D).
- **WASHINGTON:** For MVRs, the requested Washington specific authorization obtained for prospective employees expires after 30 days if not hired. If hired, the authorization does not expire. Contact iiX's Compliance Department at (800) 299-7099 ext. 127 with any questions.

These guidelines, specific state requirements, and exemplar template are not intended to provide legal advice. Customer is urged to consult with its own legal counsel to verify any Disclosure and Authorization created complies with regulatory requirements.

iiX makes no claims, promises or guarantees about the timeliness, accuracy, completeness, or adequacy of the information reports provided, nor does iiX warrant that this form is appropriate for a customer's particular needs.

Sample Disclosure and Authorization Language is on the next page.

SAMPLE DISCLOSURE AND AUTHORIZATION LANGUAGE¹
EXEMPLAR FOR DEMONSTRATIVE PURPOSES ONLY AND IS NOT MEANT TO PROVIDE
LEGAL GUIDANCE OR ADVICE OF ANY KIND.

DISCLOSURE TO CONSUMER

Name of Company

As part of our employment process, we may obtain where permitted, one or more consumer reports or investigative consumer reports about you that we obtain from a consumer reporting agency, such as:

iiX, a Verisk Analytics Business
1716 Briarcrest Drive
Suite 200
Bryan, Texas 77802

- Consumer reports may include background, employment history, academic and/or professional credentials, military service, credit history, and driving history. The information gathered also may involve a criminal history and/or alcohol or drug use history, if any.
- An investigative consumer report may include information about your character, general reputation, personal characteristics and mode of living that may be obtained by interviews with individuals who may have knowledge concerning any such items of information. This also may include contacts of all listed prior employers to verify your employment history.
- If your employment falls under the federal Department of Transportation (“DOT”) and the Federal Motor Carrier Safety Administration (“FMCSA”), including 49 CFR § 391.23, the report could include your driving, safety inspection and performance history from the FMCSA.

Under the provisions of the Fair Credit Reporting Act (“FCRA”), 15 U.S.C. § 1681 et seq.; FMCSA regulations in the Federal Code of Regulations, including 49 CFR § 40.329; and certain state laws, before we can seek such reports, where permitted, we must have your written permission to obtain the information.

You have the right, upon written request, to a complete and accurate disclosure of the nature and scope of the investigation. You also are entitled to a copy of that document entitled “Rights Under the Fair Credit Reporting Act”. Under the FCRA, before we take adverse action on the basis, in whole or in part, of information in a consumer report, you will be provided a copy of that report, the name, address, and telephone number of the consumer reporting agency, and a summary of your rights under the FCRA.

- **Notice to California Applicants:** Under California law, the reports ordered about you for employment purposes within the State of California are defined as “investigative consumer reports.” These reports may contain information on your character, general reputation, personal characteristics and mode of living. Under California Civil Code § 1786.22, you may view the report(s) maintained at iiX during normal business hours. You also may obtain a copy by submitting proper identification and paying the cost of duplication by appearing at iiX in person, by mail, or by telephone. iiX is required to have personnel available to explain the report(s) and to explain any coded information. If you appear in person, you may be accompanied by a person of your choice, if s/he furnishes proper identification.
- **Notice to Massachusetts Applicants:** Under Massachusetts law, an employer is prohibited from making written, pre-employment inquiries of an applicant about his or her criminal history. MASSACHUSETTS APPLICANTS SHOULD NOT RESPOND TO ANY OF THE QUESTIONS SEEKING CRIMINAL RECORD INFORMATION.

¹ Customer is urged to consult with its own legal counsel to verify any Disclosure and Authorization created complies with regulatory requirements.

SAMPLE DISCLOSURE AND AUTHORIZATION LANGUAGE²
EXEMPLAR FOR DEMONSTRATIVE PURPOSES ONLY AND IS NOT MEANT TO PROVIDE
LEGAL GUIDANCE OR ADVICE OF ANY KIND.

AUTHORIZATION TO OBTAIN INFORMATION

Name of Company

I have read and understood the preceding Disclosure to Consumer. Under the Fair Credit Reporting Act ("FCRA"), 15 U.S.C. § 1681 et seq., the regulations applicable to the federal Department of Transportation's Federal Motor Carriers Safety Administration, including 49 CFR § 40.329, the Americans with Disabilities Act and all other applicable federal, state, and local laws, I hereby authorize and permit the above named company to obtain information about me, where permitted, which may pertain to my employment records, driving history records, driving performance and safety history, criminal history, credit history, civil records, workers' compensation (post-offer only), alcohol and drug testing, verification of my academic and/or professional credentials, and information and/or copies of documents from any military service records.

I understand an "investigative consumer report" may include information as to my character, general reputation, personal characteristics, and mode of living that may be obtained by interviews with individuals who may have knowledge concerning any such items of information. I authorize information to be obtained from my former employers to satisfy driver qualification regulations.

DOT Drivers. I understand that Title 49 of the Federal Code of Regulations, § 391.23, requires that my prospective employer and/or its agent(s) may contact all former employers of a driver within the last three years under the regulation of the Department of Transportation. Information such as dates of employment, position, accident history, as well as information pertaining to my drug and alcohol testing history, may be requested from each employer in accordance with Section 391.23 and 49 CFR 40.25.

By signing below, I consent to and authorize the gathering of this information by my prospective employer or employer and those who my prospective employer or employer has engaged to request and obtain this information including former employers, and/or from or through a consumer reporting agency, such as iiX, a Verisk Analytics Business.

I understand and acknowledge that the information provided in the consumer reports or investigative consumer reports may assist my employer or prospective employer to make a determination regarding my suitability as an employee.

I further understand that, under the FCRA, in the event of Adverse Action, I may request a copy of any consumer report from the consumer reporting agency that compiled the report, after I have provided proper identification.

I agree that a copy of this authorization has the same effect as an original. Where permitted, this authorization shall remain in effect over the course of my employment and reports may be ordered periodically during the course of my employment.

Applicant's / Employee's Full Name (Print clearly)

Applicant's / Employee's Signature

_____/_____/_____
Date of Signature

² Customer is urged to consult with its own legal counsel to verify the Disclosure and Authorization created complies with regulatory requirements.

California Applicants: Check here to have a copy of your consumer report sent directly to you. The **employer or prospective employer is to provide a copy of the report to you** in accordance with California Civil Code § 1786.16.

Minnesota and Oklahoma Applicants: Check here to have a copy of your consumer report sent directly to you. If you wish to receive a copy, you must complete the information below. Please print clearly. If this block is marked, the **prospective employer or employer should return this form to iiX** via fax to (201) 748-1449 within **24 hours** of the request for the report.

_____ (PRINTED NAME)	_____ (SIGNATURE)	_____/_____/_____ (SIGNATURE DATE)	
_____ (STREET ADDRESS)	_____ (CITY)	_____ (ST)	_____ (ZIP CODE)
_____/_____/_____ (DATE OF BIRTH)	_____/_____/_____ (SS NUMBER)	_____ (DRIVERS LICENSE)	_____ (STATE OF ISSUE)
_____ (EMPLOYER OR PROSPECTIVE EMPLOYER)			
_____ iiX Customer Name	_____ iiX Customer No.	_____/_____/_____ Date of Request	

AUTHORIZATION TO OBTAIN COPY OF NEBRASKA DRIVING RECORD

This form is to be used only when requesting Nebraska Driving Records for all non-CDL [commercial driving license] employment requests. The availability of records is subject to the provisions of the Uniform Motor Vehicle Records Disclosure Act and Neb. Rev. Stat. § 60-2907.

PLEASE PRINT. FORM MUST BE COMPLETED IN FULL.

Name (as it appears on driver's license): _____

Date of Birth: ____/____/____ Nebraska Driver's License Number _____

Name and Date of Birth OR Name and Nebraska Driver's License Number must be supplied before a record check can be done.

To be completed by iiX customer:

For what purpose will this record be used? _____

Employer/Potential Employer Name: _____ iiX Account # _____

Name of individual requesting record: _____

Under penalty of law, the undersigned certifies that the information contained on the driving record being purchased will be used as authorized by the Uniform Motor Vehicle Records Disclosure Act. The undersigned hereby acknowledges that this request is made with the understanding that any person requesting disclosure of personal information from the Department of Motor Vehicles who misrepresents his or her identity, misrepresents the purpose for which the information requested will be used, or otherwise makes a false statement on the application shall be guilty of a class IV felony.

Signature: _____ Date: ____/____/____

The Department of Motor Vehicles is prohibited from disclosing the information on the record you are requesting unless you have obtained the **notarized** written consent of the record holder on this form as provided below.

To be completed by Applicant/Employee:

I, _____, hereby authorize _____ to obtain a copy of my driving record as described above.

Signature of Record Holder: _____

(Signature must be notarized in box below.)

State of _____ County of _____

The foregoing signature of the **record holder** was acknowledged before me this _____ day of _____, 2_____.

Notary or Designated County Official

Redisclosure

A recipient of a motor vehicle record may only resell or redisclose the information obtained if for one of the uses permitted under the Uniform Motor Vehicle Records Disclosure Act. You shall make and keep for five years records identifying each person to whom you redisclosed the information and the permitted purpose for which it was redisclosed. These records shall be made available for inspection and copying by a representative of the Nebraska Department of Motor Vehicles upon request.