



## Police Department

421 S. St. Augustine St. • PO Box 320  
Pulaski, WI 54162

Mark J. Hendzel  
Chief Of Police

### FEDERAL DRIVER PRIVACY PROTECTION ACT (DPPA) PERMISSIBLE USES FORM

The Federal Driver's Privacy Protection Act (DPPA) (18 U.S.C. § 2721) prohibits the disclosure of certain "personal information" or "highly restricted personal information" which originates from a state motor vehicle record. Under current controlling law, disclosure of each item "personal information" or "highly restricted personal information" must be justified by the specific permissible use identified below. Failure to provide such justification may result in redaction of the record requested. Such information shall not knowingly be disclosed or otherwise made available without the express consent of the person to whom, the information pertains or unless specifically permitted by the DPPA. For the purposes of determining whether such information should be release or redacted. Please complete and return this form.

#### I. Requestor Information

Name of Person Completing Form: \_\_\_\_\_  
Name of Firm/Corporation: \_\_\_\_\_  
Requestor Phone: \_\_\_\_\_  
Requestor Address: \_\_\_\_\_  
State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

#### II. Requested information

Type of records: \_\_\_\_\_  
Dates of Records: \_\_\_\_\_  
Name of person about whom records are requested (if known): \_\_\_\_\_  
Reason for request of particular items of "personal information" or "highly restricted personal information":  
\_\_\_\_\_  
\_\_\_\_\_

#### III. Authorization

I/We are authorized under the Driver's Privacy Protection Act to obtain the identified records containing personal information based upon the following: (Check all that apply)

- Authorized for use, if the requestor has obtained written consent from the person about who, the information pertains.
  - I am requesting a copy of my own record.
  - I am a parent or legal guardian of a minor child and I am requesting a copy of his/her record.
  - I am requesting the record of another person and have attached their written and notarized consent.
- Authorized for use in connection with matters of motor vehicle or driver safety and theft; motor vehicle emissions; motor vehicle product alterations, recalls or advisories; performance monitoring of motor vehicles, motor vehicle parts and dealers; motor vehicle market research activities, including survey research and removal of the non-owner records from the original owner records of motor vehicle manufacturers to carry out the purposes of the Automobile Information disclosure Act, the Anti-Car Theft Act of 1992 and the Clean Air Act.
- A government agency (Federal, State, local or tribal) or employee of such, for the purpose of the government agency to carry out its official functions.

- A Federal, State, circuit, local or Tribal court or employee of such, for the purposes of the court to carry out its official functions.
- Authorized for use in connection with any civil, criminal, administrative or arbitral proceedings in any federal, state, circuit, local or tribal court or agency, or before any self-regulatory body, including the service of process, investigation in anticipation of litigation and the execution of enforcement of judgments and orders, or pursuant to an order of a federal, state, circuit local or tribal court.
- A law enforcement agency or employee of such, for the purpose of the agency to carry out its functions.
- Authorized representative, agent, contractor or employee of such of a legitimate business and the vehicle/driving record requested will be used for the normal course of business; only to verify accuracy of the personal information.
- To obtain correct information if incorrect information is received, but only for the purposes of preventing fraud, pursuing legal remedies or collecting a debt.
- Authorized for use in research activities and producing statistical reports as long as the personal information is not published, re-disclosed or used to contact any individuals.
- Authorized representative, agent, contractor or employee of an insurer, insurance support organization or self-insured entity and the record(s) being requested will be used only in connection with the following:
  - Claims investigation
  - Anti-fraud activities
  - Rating or underwriting
- Authorized for use in providing notice to the owners of towed or impounded vehicles.
- Authorized representative or owner of a licensed private investigative agency or licensed security service and the vehicle/driving record is being requested for the use of purposes permitted under the Driver's Privacy Protection Act.
- Authorized as an employer or its agent or insurer for use in obtaining or verifying information relating to a holder of a commercial driver license (CDL)
- Authorized representative or owner of a private toll transportation facility for use in the operation of the facility.
- For any other use specifically authorized under the laws of the State that hold the record, if such use is related to the operation of a motor vehicle or public safety.

**IV. Certification/Penalties**

I/We agree that the use of the record(s) that I have requested are specifically authorized under the laws of the state of Wisconsin and DPPA and that my intended use of the records are related to the operation of a motor vehicle or public safety or for other use as identified above. I/We certify that the information and statements on this request are true and correct and understand that the unauthorized disclosure of information obtained from these records for a purpose other than stated on this request form, or the sale or other distribution of the information to a person or organization not disclosed in this request, may result in civil and criminal penalties imposed under Title 18 U.S.C. § 2724. I further understand that I have the right to request a mandamus review of the responses provided to this request under Wis. Stat. § 19.37(1).

\_\_\_\_\_  
Requestor Signature

\_\_\_\_\_  
Date Signed

**Office Use Only**

Date of Request: _____	Date Received by Requestor: _____
Approved: <input type="checkbox"/>	Denied: <input type="checkbox"/>
In Person: <input type="checkbox"/>	Mailed: <input type="checkbox"/>
Faxed: <input type="checkbox"/>	
Reason Denied: _____	