AUTHORIZATION FOR RELEASE OF INFORMATION FOR INSURANCE UNDERWRITING

Driver Record Consent Form

I hereby authorize Embark Safety LLC and its designated agents and representatives to conduct a comprehensive review of my driver record background through a consumer report and/or an investigative consumer report to be generated for insurance purposes. Upon Request, Embark Safety LLC will supply a copy of the completed consumer report along with a copy of an individual's rights under the Fair Credit Reporting Act.

Authorization and Release

I _______(driver's name), authorize the complete release of these records or data pertaining to me which an individual, company, firm, corporation, or public agency may have. I authorize the full release of the information described above, without any reservation, to my insurance company_______(company name). I hereby release Embark Safety LLC, LLC, and its agents, officials, representatives, or assigned agencies, including officers, employees, or related personnel both individually and collectively, from any and all liability for damages of whatever kind, which may at any time, result to me, my heirs, family or associates because of compliance with this authorization for release form. I certify that all information provided below and on my insurance application is correct to the best of my knowledge. This authorization and consent shall be valid in original, fax, or copy form. The following information is required by law enforcement agencies and other entities for identification purposes when checking records. It is confidential and will not be used for any other purpose.

	Middle Name		Date of E	Date of Birth		
Applicant's First Name		Last Name	(Month)	(Day)	(Year)	
Drive License Number	State					
Notice to California Applicat proper identification, the nature any reports on you, which Emb maintained on you by Embark S identification. Upon making a w Notice to Maine Applicants:	e and substance of all inforr ark Safety LLC has previous Safety LLC during normal bu rritten request, you may rec	nation in files pertaining to yo sly furnished within the two-y usiness hours. You may also o eive a summary of your repo	ou, including the sources ear period preceding you obtain a copy of this file u rt.	of information, r request. You pon submitting	, and recipients of may view the file g proper	

within 5 business days of such a request to whether or not an investigative consumer report was requested. If such report was obtained, you may contact the Consumer Reporting Agency and request a copy.

Notice to Massachusetts Applicants: Under Mass. Ann. Laws chapter. 93 §§ 50, a Consumer Reporting Agency may furnish a report if intended to be utilized for employment purposes.

Notice to New York Applicants: Under Article 25 Section 380-c (b) (2) of the New York General business Law, you have the right, upon written request, to be informed of whether or not an investigate consumer report was requested. Under Article 25 Section 380-g of the New York General Business Law, should a consumer report received by an employer contain criminal conviction information, the employer must provide to the applicant or employee who is the subject of the report, a printed or electronic copy of Article 23-A of the New York Correction Law, which governs the employment of persons previously convicted of one or more criminal offenses.

Signature

Date