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Billy Kight
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Laurens County Board of Commissioners

MOTOR VEHICLE REPORT (MVR) CONSENT FORM

I HEREBY AUTHORIZE AND FULLY UNDERSTAND THAT PRIOR TO MY APPLICATION BEING CONSIDERED FOR EMPLOYMENT BY LAURENS COUNTY THAT THE HUMAN RESOURCES DEPARTMENT WILL ACCESS MY DRIVER'S LICENSE HISTORY, OTHERWISE KNOWN AS A MOTOR VEHICLE REPORT (MVR).

I HEREBY AUTHORIZE AND FULLY UNDERSTAND THAT AN MVR WILL BE ACCESSED ON AN ANNUAL BASIS DURING MY EMPLOY WITH LAURENS COUNTY.

PRINTED NAME

SEX

DATE OF BIRTH

ADDRESS

DRIVER'S LICENSE NUMBER

CITY, STATE, ZIP

EXPIRATION DATE

SIGNATURE

DATE