

(Name of Job Applicant/Employee)
(Street Address)
(City, State, Zip)

(Date)

(Company Name/Name of Employer)
(Street Address)
(City, State, Zip)

Dear (Company Name/Name of Employer):

Consumer reports may be obtained as part of the (Company Name/Name of Employer)'s evaluation of my job application/employment. The reports may be procured by our insurance broker and may include my driving record, and assessment of my insurability under the Company's insurance coverages or other consumer reports. By signing this disclosure, I hereby authorize (Company Name/Name of Employer) to procure such reports and additional reports about me from time to time, as it deems appropriate, to evaluate my insurability or for other permissible purposes.

Sincerely,

(Signature of Job Applicant/Employee)
(Typed Name of Job Applicant/Employee)