## A COPY OF YOUR OWN DRIVING RECORD CAN BE PURCHASED FOR \$8.00 AT ANY SECRETARY OF STATE BRANCH OFFICE.

Please be sure to have sufficient identification when requesting a copy of your record.

## MICHIGAN DEPARTMENT OF STATE - REQUESTING YOUR OWN RECORD

## If you are requesting **your own record information, please complete this form.** If you are requesting records about **someone other than yourself, use form BDVR 154, Record Lookup Request.**

Accurate and complete information will help us locate the record you are requesting. Even if no record is found, you are still responsible to pay the \$7.00 lookup fee for each record requested. Driving records for a driver's personal use show all activity, including accidents where the driver was not at fault. Records produced for insurance, employment, or credit inquiries do not include certain administrative entries or accidents for which the driver did not receive a corresponding court conviction or civil infraction determination.

Section 1. Requestor's Information (Please print or type all information.)							
If you require your information faxed or mailed to an address other the must complete Section 5 on the reverse side of the form and check the		ord with the Secretary of State, you					
Your Name (First, Middle, Last)	Daytime Telephone Number						
		( ) -					
Current Street Address							
City	State	Zip Code					
Section 2. Requesting Your Own Driving Record							
Michigan Driver's License or Personal Identification Card Numb	er	Date of Birth					
<i>Check boxes that apply:</i>	e						
□ Driving Record for: - Court							
(Shows last reported address)							
Original License Issue Date     Current Application							
Application History*     For partial histories, please comp	late from	to / /					
Address History*							
Other Driving-Related Record(s)		Date// (Hearing, Offense, License Status, etc.)					
Section 3. Requesting Your Own Vehicle Record							
(If you only need your driving record, leave the vehicle information b	olank or you will be charged fo	or both records.)					
License Plate or Vehicle Make and Model	Vehicle or Hull Id	entification Number					
Registration Number Year							
Check boxes that apply:							
Current Vehicle Owner and Lienholder Information							
<ul> <li>Registration Information as of//</li> <li>Copy of Current Title Application and Related Forms</li> </ul>							
Complete Title History*							
Complete Registration History*							
Partial Title History*							
□ Partial Registration History* ∫	·						
Check box if you want: All motor vehicles registered or titled							
☐ All other registered or titled assets un		sted in Section 1.**					
* Buying a complete or partial title, application, and/or address history expensive as records are retained for ten years. There is a \$7.00 charge							
lookup. Personal information on individuals other than yourself will be re							
revealed) from vehicle history records. If you need personal information	on previous						
vehicle owners, you need to complete a BDVR-154 "Record Lookup Req	uest" form.						
** For address searches not listed in Section 1, you will need to attach addition	onal information						
and/or instructions. You will be charged for each record located. You wi a lookup fee for any address search that finds no vehicles and/or assets at		For Office Use Only					

<b>Section 4. Payment Method</b> (Payment or credit card billing information must be included.) The cost for each record looked up is \$7.00. Each certified record provided is \$8.00. Certified records will not be faxed.							
If "no record" is found, you are still responsible to pay \$7.00 for each record lookup.							
Check or Money Order			Certified record needed				
(Payable to "State of Michigan")			(\$1.00 additional per record)				
Name on Credit Card ( <i>PLEASE PRINT</i> )			Credit Card				
			Discover D MasterCard VISA				
Credit Card Account Number			Expiration Date				
If paying by credit card, I authorize charging the total amount to my	credit card.						
X			/	/			
Signature of Cardholder		_	/ Date	_/			
			2000				
Section 5. Special Delivery Instructions							
If you want the record(s) sent to another person or company, complete this section. If address is the same as on the front, leave this section blank.							
Please $\square$ Fax $\square$ Mail my record(s) as indicated below. $\left\{ \begin{array}{c} If \text{ the record is faxed and mailed, you will be charged for each delivery method. Certified records will not be faxed. \\ \end{array} \right\}$							
Name	Attention ( <i>if required</i> )						
Mailing Address Daytime Telephone		ephone N	lumber	Fax Number			
	( ) -			( ) -			
City	State			Zip Code			
Explain the reason why you need the record(s) sent to another person or to a company:							
Section 6. Requestor Certification (This section must be completed or request will not be processed.)							
Explain the reason why you are requesting your own record information:							
I certify that I am requesting my own record information.							
X							
Penalties for Misuse: Under Michigan law, a person who makes a false representation or a false certification to							
obtain personal information or who uses personal information for a purpose other than a permissible purpose							
identified in law is guilty of a felony, which may be punishable by imprisonment for up to 5 years and/or a fine of up to \$5,000. Subsequent convictions may result in imprisonment for up to 15 years and/or a fine of up to \$15,000.							
Mail mount completed are seen at the							
Mail your completed request to: Michigan Department of State Record Lookup Unit 7064 Crowner Drive							

Call **517.322.1624** for help in completing this form. Completed requests may be faxed to **517.322.1181** but must be charged to a credit card.





Lansing, Michigan 48918-1540

www.Michigan.gov/sos

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