



**INSTRUCTIONS FOR REQUESTING
DMV RECORD INFORMATION USING FORM MV-15**

(PLEASE READ INSTRUCTIONS FIRST)

Use this form to request ONLY those items listed on Page 3.

Follow steps on pages 1, 3 and 4. We cannot process incomplete forms, or forms received without enough information to conduct a search.

STEP 1 Complete your return receipt located on the bottom portion of this page.

STEP 2 Complete name and return address section, and attach a copy of your driver license, driver identification card issued by a state motor vehicle authority, or 6 points of identification (*see form ID-44 for acceptable proof of identity*).

PART A

Be sure to check the box or boxes next to each of the items you are requesting.

PART B

Provide as much information as possible about the motorist or vehicle records requested.

STEP 3 **Required compliance with the Federal Driver’s Privacy Protection Act (DPPA)**

Please read this section carefully and place your initials on the line next to each permissible use you select (Page 4).

IMPORTANT: If you are requesting only your own records, you may skip to STEP 4. ***Title abstracts or title application photocopies may contain the names of other individuals. If you are requesting these documents, you must complete STEP 3.***

STEP 4 Sign and print your name. **Remember to attach a copy of your identification.**

Mail your completed application, along with your ID and check or money order (exact fee, no starter checks accepted), payable to the Commissioner of Motor Vehicles, to:

**MV-15 Processing
NYS Department of Motor Vehicles
6 Empire State Plaza
Albany NY 12228**

STEP 1 Your return receipt

Name: _____
DOB: _____
Plate: _____
VIN: _____

OFFICE USE ONLY

Records Found No Records Found
Amount Received
from you \$ _____
Fee \$ _____
Refund (if any) . . . \$ _____
Operator _____
Date _____

Print/Type name and address where records are to be mailed.

STEP 2**To process this request, we need to identify you, the requester.**Attach a copy of **your** driver license, non-driver identification card issued by a state motor vehicle authority, or 6 points of identification (see form ID-44 for acceptable proof of identity).**Print your name and return address below, and fill in the payment method.**

PAYMENT METHOD		• Do NOT SEND CASH •								
<input type="checkbox"/> DMV account number (for account holders only)										
<table border="1"> <tr> <td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td> </tr> </table>										
<input type="checkbox"/> Check	<input type="checkbox"/> Money Order	<input type="checkbox"/> Exempt								
PAYABLE TO COMMISSIONER OF MOTOR VEHICLES										

Daytime Phone No. (optional):

Check below the type of records you are requesting.**PART A**

- | | |
|--|------------------------------|
| <input type="checkbox"/> DRIVING RECORD | \$10 |
| <input type="checkbox"/> VEHICLE REGISTRATION RECORD | \$10 |
| <input type="checkbox"/> VEHICLE TITLE RECORD | \$10 |
| <input type="checkbox"/> COMPLETE 19A ROSTER. PROVIDE BUS CO. FEDERAL EMPL. ID. # _____
(SKIP PART B) | \$10 for each driver. |
| <input type="checkbox"/> DRIVER LICENSE APPLICATION Photocopy | \$11 |
| <input type="checkbox"/> CONVICTION Photocopy (Write ticket no. or case no. in Part B below) | \$11 each |
| <input type="checkbox"/> DRIVER LICENSE SUSPENSION OR REVOCATION ORDER Photocopy (Write order # in Part B below) | \$11 each |
| <input type="checkbox"/> DRINKING DRIVER PROGRAM COMPLETION CERTIFICATE Photocopy (Write ticket # in Part B below) | \$11 |
| <input type="checkbox"/> TICKET/SUMMONS Photocopy (Write ticket no., date of violation and offense, if known, in Part B below) | \$11 each |
| <input type="checkbox"/> VEHICLE REGISTRATION/TITLE APPLICATION Photocopy | \$11 each |
| <input type="checkbox"/> VEHICLE REGISTRATION SUSPENSION ORDER Photocopy | \$11 each |
| <input type="checkbox"/> VEHICLE & TRAFFIC LAW BOOKS (How many? _____) | \$3.50 each |

PART BProvide as much information as you know about the records you are requesting. Please print clearly.

Last Name		First	M.I.	Date of Birth (Month/Day/Year)		Sex	
				/ /		<input type="checkbox"/> M <input type="checkbox"/> F	
Mailing Address (Include Street & No.)		Apt. #	City		State	Zip Code	
Previous New York State Address (if known)		Apt. #	City		State	Zip Code	
9-digit Driver License ID Number or Number from Non-Driver ID Card							
Plate Number		Class of Vehicle (from registration)		Year of Vehicle	Make of Vehicle		
Vehicle Identification Number (from vehicle registration)							
Ticket, Case or Order Number (if known)		Date of Violation		Offense			



New York State Department of Motor Vehicles
REQUEST FOR DRIVING AND/OR VEHICLE RECORD INFORMATION

STEP 3

The Federal Driver's Privacy Protection Act (DPPA) regulates access to Motor Vehicles records. **You must tell us why you want the records you are requesting.** Place your initials next to each permissible use you select.

- _____ Use in any civil, criminal, administrative, or arbitral proceeding in any court or agency, including the service of process, investigation in anticipation of litigation, and the execution or enforcement of judgments and orders or pursuant to a court order.
- _____ Use by an insurer or insurance support organization or self-insured entity in claims investigations, anti-fraud activities, rating or underwriting activities.
- _____ Use in providing notice to the owners of towed or impounded vehicles.
- _____ Use by an employer, its agent or insurer to obtain information relating to the holder of a commercial driver's license required under Chapter 313 of Title 49 of the U.S.C.
- _____ Use in preventing fraud by, pursuing legal remedies against, or recovering on a debt or security interest against an individual in order to verify or correct the accuracy of personal information submitted by the individual to a legitimate business or its agents, employees, or contractors.
- _____ Use required under NYS Vehicle and Traffic Law, Article 19A - Special Requirements for Bus Drivers.
- _____ Use required under NYS Vehicle and Traffic Law, Article 19B - Special Requirements for Commercial Motor Carriers.
- _____ Use by any government agency in carrying out its functions.
- _____ Use by any private person or entity acting on behalf of a federal, state, or local agency in carrying out its functions.
- _____ Use in matters of motor vehicle or driver safety.
- _____ Use in matters of motor vehicle theft.
- _____ Use in matters of motor vehicle emissions.
- _____ Use in matters of motor vehicle product alterations, recalls or advisories.
- _____ Use in performance monitoring of motor vehicles, motor vehicle parts and dealers.
- _____ Use in motor vehicle market research activities, including survey research.
- _____ Use in removal of non-owner records from the original owner records of motor vehicle manufacturers.
- _____ Use in the operation of private toll transportation facilities.
- _____ Use by any requester who has obtained the written consent of the motorist.
- _____ Use specifically authorized under NYS law, IF such use is related to the operation of a motor vehicle or public safety. Cite the specific NYS law here: _____
- _____ Use in research activities and in producing statistical reports, **as long as the personal information is not published, disclosed or used to contact individuals.**
- _____ **License records** without the motorist's address. These records include either the client identification number or the driver's name and date of birth, if such information has been provided by the requester.

STEP 4

I certify that I shall use the information provided by DMV only for the use described in Step 3 of this form, and **that I will comply fully with the Driver's Privacy Protection Act (18 USC Sec. 2721, et seq).** I also agree to defend, hold harmless and indemnify DMV from all actions brought against DMV, or damages alleged against DMV, for my negligent, improper or unauthorized use or dissemination of the information provided by the DMV.

REMEMBER TO ATTACH A COPY OF YOUR ID. (See Step 2 of Instructions.)

Signature _____ **Date:** _____

Print Name _____

To knowingly make a false statement or conceal a material fact in this written statement is a criminal offense, punishable under Penal Law Section 210.45. In addition, anyone who makes false representation to obtain any personal information from an individual's Motor Vehicles record is subject to federal criminal fines under the Driver's Privacy Protection Act (DPPA).