



**COUNTY OF ERIE**  
**OFFICE OF HUMAN RESOURCES**  
ERIE COUNTY COURT HOUSE  
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KATHY DAHLKEMPER  
COUNTY EXECUTIVE

SABRINA K. FISCHER  
DIRECTOR OF HUMAN RESOURCES

**AUTHORIZATION FOR RELEASE OF INFORMATION  
FOR PURPOSES OF DRIVING HISTORY CHECK**

I, \_\_\_\_\_, authorize the County of Erie to run a certified driver history check through the PA Department of Transportation Bureau of Driver Licensing. I understand that a clean record is a condition of employment for said position with the County of Erie, and that a job offer is tentative until the check is completed with acceptable results.

I attest that the following information is accurate. (Please print or type)

NAME: \_\_\_\_\_  
(First) (Middle) (Last)

SOCIAL SECURITY NUMBER: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
(Mo) (Day) (Year)

Driver License Number \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date