



COLORADO & NEW MEXICO FORM INSTRUCTIONS

The following information will assist you in completing this form to access Motor Vehicle Records in Colorado and New Mexico. Completing this form will grant access to both Colorado and New Mexico records.

1. Include your First Advantage ADR Account Number
2. Initial alongside each authorized permissible purpose
 - a. If for **insurance purposes**, please complete: 1) "By an insurer or insurance support agency in connection with claims, investigations, anti-fraud activities, rating or underwriting"; and 2) "By an employer/agent or insurer of a Commercial Driver License Holder."
 - b. If for **employment purposes**, please complete: 1) "By an employer/agent or insurer of a Commercial Driver License Holder."; and "By a legitimate business that has obtained written consent of the person whose record is being requested."
3. Provide the requested information.

When complete, mail or fax the completed forms to:

First Advantage ADR
Attn: Compliance Department
2860 Gold Tailings Court
Rancho Cordova, CA 95670
Fax: 916-456-3332



**AFFIDAVIT OF INTENDED USE
(Colorado & New Mexico)**

ADR Account # _____

To obtain record(s), you must declare your intended use of the record(s).

**INFORMATION MAY BE USED ONLY FOR THE FOLLOWING APPROVED
PURPOSES:**

- _____ By a business that will use the information to verify the accuracy of information submitted by individuals for the purposes of preventing fraud, pursuing legal remedies against or recovering a debt or security interest.
- _____ In connection with a civil, criminal, administrative or arbitral proceeding in any court or before a self-regulatory body, including process service, investigation, execution of judgment, or pursuant to a court order.
- _____ By an insurer or insurance support agency in connection with claims, investigations, anti-fraud activities, rating or underwriting.
- _____ By an employer/agent or insurer of a Commercial Driver License Holder.
- _____ By a legitimate business that has obtained written consent of the person whose record is being requested.

Under penalty of perjury, I attest that I shall not obtain, resell, transfer, or use the information in any manner prohibited by law. I understand that motor vehicle or driver records that are obtained, resold, or transferred for purposes prohibited by law may subject me to civil penalties under federal and state law.

X _____ Date: _____
Signature

Printed Name: _____ Date of Birth: _____

Name of Company Represented: _____

Address: _____

City, State, Zip: _____