



STATE OF ARKANSAS
**Department of Finance
 And Administration**

DRIVER SERVICES
Driving Records
 Ragland Building, Room 1070
 Post Office Box 1272
 Little Rock, Arkansas 72203
 Phone: (501) 683-0984
 Fax: (501) 682-2075
 www.dfa.arkansas.gov

ARKANSAS DRIVING RECORDS RELEASE FORM

I, _____ do hereby authorize the Office of
 Driver Services to release:

A COPY OF MY:

- Insurance - \$8.50
- Commercial (Employment) Record - \$10.00
- History Record- \$8.50 *

Beginning October 1, 2019 Insurance and History Records will increase to \$8.50.

To: _____

 (Address)

 (City, State, Zip)

This release shall remain in full force and effect for the next five years, unless a formal withdrawal is filed by me.

Signature		Date
Date of Birth	Telephone Number	Driver's License Number

Please: Mail Email Fax

My Record To: _____

*** History Driving Records can be purchased in the following ways:**

In Person:	By Mail:
1900 W. 7th St.	P.O. Box 1272
Room 1070	Room 1070
Little Rock, AR 72201	Little Rock, AR 72203