Request for Hawaii Driver History Record STATE OF HAWAII

Name of Current or Prospective Motor Carrier: Kamehameha Schools Hawai`i							
To the specific attention of: Ray K. Iyo				Business Telephone (808) 982 - 0028			
Mailing Address (Number and	d Street) 16-716 Vol	cano Rd.					
^{City} Keaau		State	HI	Zip Code 96749			
history of convictions, accide	raffic Violations Bureaus of the nts, and withdrawals pertaining	g to the driver ide	ntified in thi	a one-time search of the driver's license information and his part, provided that the driver signs the consent below. ding licensing actions received from other states.			
Type or	Print Clearly (Complete all it	ems. Inquiries tha	at cannot be r	read will not be processed.)			
Driver License Number							
Month, Day, and Year of Birt	h /						
Driver's Full Legal Name: First Name Middle Name Last Name							
Other Names Used (Maiden, Prior Name, Nickname, Professional Name, Other)				Daytime Telephone Number ()			
Part II - DRIVER'S CONSENT TO SEARCH RECORDS I hereby authorize the Traffic Violations Bureau of the District Courts to perform a one-time search of my driver history record. I understand that the search will result in a printed report that will indicate: (1) No record was found matching my identification, or (2) the driver history record. I further understand that if a current or prospective motor carrier has requested my driver history record, the printed report will only be sent to that motor carrier. If a current or prospective motor carrier has requested my driver history record, I understand that I also have the right to obtain my own copy of the driver history record from the Traffic Violations Bureau of the District Courts upon written request and payment of applicable fees. Driver's Signature							
Official Use Only				NOTARIZATION Required only if the Driver History Record Request is not made in person by the current or prospective operator .			
Date Received	Date Sent			Sworn to and ascribed before me Notary Public Seal or Stamp			
TYPE OF IDENTIFICATION: □ Valid Photo Driver License □ Valid Photo □ Valid Passport □ Valid Military ID			issued ID	this day of 20 in the County of			
Clerk (Print Name)		Signature		State of Hawaii			

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http://hawaii.gov/dot/highways/about/hwy-v/mvso/htm Phone: 808.692.7659 Email: DRIVERRECORDS.HWYV@HAWAII.GOV

Who May Obtain a Hawaii Driver History Record

- Any person may ask to know whether there is a record on him or her and may obtain a copy of the record if one exists.
- A motor carrier or prospective motor carrier may request a driver's driver history record, provided the request is made by the driver in person or notarized. The mailed results of the driver history record check will be sent only to the current or prospective motor carrier. If no motor carrier is named on the form or it is changed, the request will not be processed. "Motor carrier" means any person who owns a motor vehicle used in, or engages in the transportation of persons or property by motor vehicle on the public highways in the furtherance of any commercial, industrial, or educational enterprise.

A Driver History Record Shows

- The name, the date of birth, and the mailing address of the driver.
- The driver license class, endorsements, and restrictions.
- The current status and the expiration date of the driver license.
- Accidents, moving traffic violations, failures to appear, and suspensions or revocations of the driver license, including those from other states.
- Information reported within the past 3 years from the date of the inquiry and suspensions and revocation over five years old that are still in effect.

How to Request a Driver History Record

To request a copy of your own record. Complete Part I, show your identification, and pay the \$9.00 fee. Acceptable identification documents include a valid driver's license, state identification card, passport, or military identification card.

To request the record of your current or prospective driver. Complete this form, including the notarization, and pay the \$9.00 fee. Attach a self-addressed stamped envelope for return of the requested information.

To order a driver history record by mail. Your request MUST BE NOTARIZED to certify identity. Mail completed form with cashier's check or money order made payable to: District Court. Attach a self-addressed stamped legal-sized envelope (#10) for return of the requested information. Mailed requests will have a turnaround time of 5-10 days.

Location of Driver History Records

Records on individuals can be made available to those individuals, within a reasonable time after request, for personal inspection and copying during regular working hours at 8:00 a.m. to 4:00 p.m., each day except Saturdays, Sundays, and State legal holidays. The address for requesting record information in writing or for making requests in person is as follows:

Honolulu District Court	Wahiawa, HI 96786-2274	55 Makaena Street	Kona District Court	
Traffic Violations Bureau		Kaunakakai, HI 96748	Keakealani Building	
1111 Alakea Street, 2nd Floor	Waianae/Nanakuli District Court	Mailing address: P.O Box 284	79-1020 Haukapila Street	
Honolulu, HI 96813-2897	87-1784 Farrington Highway	Kaunakakai, HI 96748-0284	Kealakekua, HI 96750	
	Waianae, HI 96792			
Ewa/Pearl City District Court		Lanai District Court	South Kohala District Court	
870 Fourth Street	Wailuku District Court	730 Lana'i Avenue, Suite 131	67-5187 Kamamalu Street	
Pearl City, HI 96782-3312	Traffic Violations Bureau	Lanai City, HI 96763	Kamuela, HI 96743	
	2145 Main Street, Room 137	Mailing address: P.O. Box		
Abner Paki Hale, Kaneohe	Wailuku, HI 96793-1679	631376	Lihue District Court	
Courhouse		Lanai City, HI 96763-1376	3970 Kaana Street	
45-939 Pookela Street	Lahaina/Hana District Court		Lihue, HI 96766	
Kaneohe, HI 96744-5725	1870 Honoapi'ilani Highway	Hawaii District Court		
	Lahaina, HI 96761-1856	777 Kilauea Avenue		
Wahiawa/Waialua District Court		Hilo, HI 96720		
1034 Kilani Avenue	Molokai District Court			