

Please be advised that when requesting Newfoundland and Labrador records for insurance and employment purposes, the end-user is required to have a release form signed by the prospective applicant/employee. This release form must be fax to Softech at **1-305-647-6504**.

PROVINCE SPECIFIC INFORMATION:

1. Client Information – Pre Filled
2. Intended Use - Pre Filled
3. Application/Subject Information
 - Last Name, First Name – Pre Filled
 - Date of Birth – Pre Filled
 - Driver's License Number – Pre Filled
4. Driver Release
 - Driver Signature and Date – Please have applicant/employee sign and date.

IMPORTANT:

The **Newfoundland and Labrador Release form:**

1. Must be completed and faxed to Softech at **1-305-647-6504** in order for the request to be filled.
2. **DO NOT SEND A FAX COVER SHEET**
3. Must be completed as directed and kept on file by the end-user/employer.



Softech International Inc.

PO Box 164922
Miami, Fl. 33116-4922
Toll Free: 888.318.7979

General Release and Authorization

For Newfoundland and Labrador

Client Information:

Company Name: _____ **Account #:** _____

Contact Name: _____ **Phone #:** _____

Intended Use (Please select one): **Insurance** **Employment**

Applicant/Subject Information:

Name (Last, First MI): _____

(PLEASE PRINT)

Date of Birth (mm/dd/yyyy): _____

Drivers License Number: _____

I do hereby authorize and allow Softech International Inc to obtain a copy of my driver abstract information, which will be used for the above stated purpose. I authorize, without reservation, any party or agency contacted to furnish the above mentioned information and release all parties involved from any liability and/or responsibility for doing so. I understand that this authorization and consent shall be valid in an original, fax or copy form.

Driver's Signature: _____ **Date:** _____

Please fax this signed release form to 1-305-647-6504

For Softech use only