

PII ACCESS RESPONSE FORM
DEPARTMENT OF TRANSPORTATION
DIVISION _____

Prepared for: _____

Delivered to: _____

- No Records Found
We were unable to locate any information about you in the systems that are accessible. [if desired, you can list the systems searched]

- A copy of the personal information about you in accessible systems is attached.

- Request to access file is granted. File can be viewed during usual business hours which are _____.

If any of your personal information is incorrect, please contact us at the address below and provide an explanation (in writing) of the discrepancy. If your name has changed, please provide proof of the name change (such as a copy of a marriage license or court order showing the change). Return a copy of this form along with change request. We will be happy to update the information for you when proof of correction is received.

Address for Questions or Corrections:

Division Address: _____

For Department Use: (List action taken if change was requested - Copy and File)
(Access responded to within 10 days unless otherwise noted)

Authorized Signature of Person Approving Release: _____