NEW YORK STATE DEPARTMENT OF MOTOR VEHICLES DRIVERS PRIVACY PROTECTION ACT

I have been given a copy of the Department of MotorVehicles Driver's Privacy Protection Act (DPPA). I agree to abide by the NYS DMV regulations regarding the confidentiality of the usage of this information. If at any time I have a question or need any clarification of this regulation I can direct my question to management or contact the R.A.D.A.

Dealership Name:		
Employee Name (Please Print)	Employee Signature	Date