



**SOBEL AFFILIATES**  
A BROWN & BROWN COMPANY  
*Insurance since 1904*

**DRIVING RECORD RELEASE AUTHORIZATION**

I hereby give permission to Sobel Affiliates: A Brown & Brown Company, to release information relating to my driving record (including a copy of any motor vehicle report) obtained for insurance underwriting purposes to \_\_\_\_\_ (insert employer name) & Sobel Affiliates: A Brown & Brown Company. This authorization shall remain in effect for one year from the date signed.

\_\_\_\_\_  
Signature of Individual

\_\_\_\_\_  
Date