Private Data Request

Bring or mail this completed form to Driver and Vehicle Services, 445 Minnesota Street, St. Paul, MN 55101-5191.

- This form is intended for use by individuals who have a grave concern for their safety or the safety of their family. Note: If you are requesting private data on your driver's license, an application for duplicate driver's license is required. Bring this form and apply at the location listed above or any driver's license office.
- A valid alternate address is required. If using a business address, check with your employer to ensure mail sent to that address will be delivered to you.

Driver and Vehicle Services complies with all federal and state laws regarding the dissemination of motor vehicle and driver's license data. The name, date of birth, and address information collected on motor vehicle and driver's license applications is restricted and is only released to those entitled by law to receive the information.

Data Privacy Laws: United States Code, title 18, sections 2721, Minnesota Data Privacy Act, Minnesota Statutes, Chapter 13; Minnesota Statutes 168.346 and 171.12 subdivisions 7 and 7a.

General Information (PRINT O	R TYPE)	
Requestor's DL Number (ом	ΓDASHES)	
First Name	Middle Name	Last Name
Residence Address	City/State/Zip	Date of Birth (mm/dd/yy)
Reason For This Request (F	RINT OR TYPE, USING TAB BETWEEN LINES):	
Please Check All That Appl	(USE SPACEBAR AND TAB):	
☐ Name : I request that my r	ame be classified as private data on all	my motor vehicle records.
☐ Motor Vehicle Address: data and reflect the valid		my motor vehicle records be classified as private
☐ Driver's License Addres and reflect the valid altern		on my driving record be classified as private data
Print Valid Alternate Addres	SS (PRINT OR TYPE):	
Residence Address	City/State/Zip	County
not be released to anyone excep	ot law enforcement as defined under Minneso	erstand that this data will be classified as private data and work of the Statues, 13.02, subdivision 12. The alternate address I class and department mailings at the alternate address.
Signature		