

EMPLOYER

Please type or print in ink

## COMMERCIAL EMPLOYER PULL NOTICE ENROLLMENT OR DELETION OF DRIVERS

Department of Motor Vehicles Information Services Branch Employer Pull Notice—H265 P.O. Box 944231 Sacramento, CA 94244-2310

DATE

REQUESTER CODE

CHECK ONLY *ONE* PROCESS PER FORM

BROLL OR

DELETE

CURRENT	ADDRESS				TELEPHONE						
CITY		STATE	ZIP CODE		( )	ERSON'S NAME AND TITLI	Ext. E (FIRST, MI, LAST)				
							, , , , , ,				
CLASS LICENSE											
I .		ss B with passenger ss C with Hazardous		omont	C/S - Class C						
	RNIA DRIVER LICENSE OR	luois	dorsement C/P - Class C with PUC permit issued county								
	PORARY "X" NUMBER	DRIVER'S LAST NAME ONLY	CLASS LICENSE			DIVISION/DE	PARTMENT				
1)											
2)											
3)											
4)											
5)											
6)											
7)											
8)											
9)											
10)											
11)											
12)											
13)											
14)											
15)											
_	TOTAL DRIVERS	ADDED (A \$5 ENROLLI	MENT FEE FOR	EACH	H DRIVER V	VILL BE BILLED TO	YOUR ABIS AC	CCOUNT)			
-	TOTAL DRIVERS	<b>DELETED</b> (NO FEE)									
FOR	ENROLLMENT										
ONLY: I certify under penalty of perjury, under the laws of the State of California, that driver(s) listed above are (1) mandated for enrollment under California Vehicle Code §1808.1. OR (2) have signed an "Authorization for Release of driver Record Information" form (INF 1101) or internal document with similar language AND are currently in an employer/employee relationship AND frequently drive during the course of their employment.											
Executed	l at _	TV.	, _		COLINITY	, _	0.7	A.T.C.			
Date _		gnature <u>X</u>			COUNTY		SIA	ATE			
Printed i	Printed name and title _										