



**Miracle Hill**  
MINISTRIES

## MOTOR VEHICLE REPORT (MVR) REQUEST AND RELEASE AUTHORIZATION

MIRACLE HILL MINISTRIES, INC.  
P.O. Box 2546, Greenville, SC 29602

In connection with my application to be an employee or volunteer for **Miracle Hill Ministries Inc.**, I understand that a Motor Vehicle Report (MVR) will be required that will include information on my motor vehicle operation history from state resources.

**I hereby authorize, without reservation, any law enforcement agency, administrator, state agency, institution, information service bureau or insurance company contacted by MHM its agent's subcontractor, or employees to furnish the below mentioned information.**

I further acknowledge that a telephonic facsimile (FAX) or photographic copy shall be as valid as the original. I further allow MHM its representatives or agents, to request a motor vehicle record on an annual basis, or as needed if I am involved in an incident or accident.

**Please check all that apply:**

- |   |  |   |  |
|---|--|---|--|
| <input type="radio"/> Driving MHM Vehicle | <input type="radio"/> Driving Personal Vehicle |   |  |
| <input type="radio"/> Employee            | <input type="radio"/> Guest                    | <input type="radio"/> Volunteer (Children's Mentor) | <input type="radio"/> Volunteer (Adult Facility) |
| <input type="radio"/> Male                | <input type="radio"/> Female                   |   |  |

Please indicate which MHM facility you will be employed or serving as a volunteer:

**Please provide the following:**

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Name as it appears on your driver's license - If name changed through marriage or otherwise please print previous name below

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Previous name as it appeared on your driver's license

Place driver's license here for photo copy



## MHM Employee and Volunteer Vehicle Use Form

### Driver Information

Driver Name (please print)	Date of Birth	
Street Address	Telephone #	
State & Driver's License #	Expiration Date	Social Security Number
Moving violations received in the past 3 years	Number of at fault accidents in the past 3 years	

### Personal Vehicle Information

Make & Model of Vehicle	Year of Vehicle	State & Vehicle License Plate #
Insurance Carrier	Policy #	Policy Expiration Date
\$ Public Liability (per person)	\$ Public Liability (per accident)	\$ Property Damage
Seating Capacity with Seatbelts	Registered Owner	

### Requirements for All Drivers

- Possess a current driver's license for the classification of the motor vehicle being operated with no restrictions preventing transport of children.
- Ensure the vehicle is equipped with appropriate safety devices and that individual seat belts are worn by all occupants while in operation.
- Ensure vehicle is not being driven in unsafe or hazardous driving conditions including snow, ice or thick fog.
- Ensure cell phones or other electronic devices are not in use while operating the vehicle.
- Ensure information provided to MHM regarding driving record, vehicle type, license plate number and insurance is accurate and up-to-date and that any changes will be reported in writing.

### Requirements for Drivers Using Personal Vehicle

- Possess the South Carolina minimum or better for automobile liability insurance of \$25,000 per person, \$50,000 per accident and \$25,000 for property damage.
- Ensure the vehicle is regularly maintained and kept in good mechanical condition.

### Acknowledgement

*I understand that if I am involved in a motor vehicle accident that is my fault while driving my personal vehicle for MHM my liability insurance will be used first and that the MHM liability policy will be responsible beginning at \$100,000 per person, \$300,000 per accident and \$100,000 for property damage. If there is a gap in coverage between my liability policy and MHM's liability policy, I understand that I will be responsible for the financial difference related to that. MHM does not cover, nor are they responsible for, comprehensive and collision coverage to my vehicle.*

Driver Signature: \_\_\_\_\_

MHM Authorization: \_\_\_\_\_