

Driver Licence Information Form

Name	DOB
Address	
Division	Job Title
Driving Licence No	
DVLA Check Code	
<u>Declaration</u>	
By using the above DVLA check code I give	e my consent for WEC Group Ltd to view
any licence information relating to myself, including entitlement to drive and any	
information about disqualifications, offen	ices and endorsements.
I understand this information may be sha	red between interested divisions within
WEC Group Ltd and any insurance companies involved with fleet cover.	
Sign	
Date	