

NOTICE AND CONSENT FOR ROAD TEST VIDEO/AUDIO RECORDING

For the safety of our customers and employees, training, and quality assurance purposes, it is the policy of the Tax Collector's Office for Polk County that ALL Driver License Road Tests are video and audio recorded. I understand and acknowledge that my road test will be video and audio recorded for training and quality control purposes. Test recording records are retained in accordance with public records laws. These recordings will be retained for a period of one month (30 days) from the date of recording. Under no circumstance will the audio/video be used to dispute the final decision of the examiner. By signing below, I hereby consent to the use of the recording in any vehicle for the duration of the road test, and I indemnify, release, and hold harmless the Polk County Tax Collector's Office and the Florida Department of Highway Safety and Motor Vehicles for any damages caused to the vehicle from the recording device, and I hereby give consent for the recording device to be used for the duration of the road test.

Customer Signature	Date
Print Name	
nterpreter Signature (if applicable)	 Date
Print Name	
f under 18, parent or guardian must sign below.	
JNDER PENALTIES OF PERJURY, I DECLARE THAT I F THE FACTS STATED IN IT ARE TRUE.	HAVE READ THE FOREGOING DOCUMENT AND THAT
Parent/Guardian Signature	Date
Print Name	