

Effective September 29, 2025

SECTION A: COMPANY INFORMATION

Company Name					AirTera Client ID:				
Street Address									
City				State			Zip		
Company Admin Name				Title					
Email					Phone number				

SECTION B: EMPLOYEE / APPLICANT INFORMATION

First Name			Last Name			Middle Name		
Street Address								
City				State				
Zip Code			Country of Residence					
Date of Birth			Social Security Number *					

SECTION C: BACKGROUND CHECK SERVICES

☐	FAA Pilot Records Database Records Retrieval (<i>per employee</i>) ¹	\$99.95
☐	FAA Pilot Records Database Historical Record Entry Enrollment - AirDock DOT & FAA Database non-subscribers (<i>per employee</i>)	\$99.95
☐	FAA Pilot Records Database New Record Entry (<i>per page</i>) ¹	\$5.00
☐	FAA Pilot Records Database Historical Record Entry Enrollment - AirDock DOT & FAA Database subscribers (<i>per employee</i>)	\$69.95
☐	National Driver Register Check (NDR)	\$49.95
☐	Drug & Alcohol History Records Request (<i>per employer</i>)	\$59.95
☐	DASSP Airman File Check	\$59.95
☐	Motor Vehicle Driving Record Check ^{3 & 4}	\$32.95
☐	FAA Certificate/License Check	\$29.95
☐	FAA Accident, Incident and Enforcement (AIE) Report ²	\$59.95
☐	U.S. Employment Verification (<i>per employer</i>) ^{3 & 4}	\$21.95

* If employee is already in the AirTera platform, only the last four digits of the SSN are required.

¹ AirDock DOT & FAA Database subscription pricing applies.

² If ordering PRD Retrieval service, this check is automatically included.

³ **A \$25.90 application-processing fee will be charged for web-enabled services per employee/applicant.**

⁴ Direct pass-through expenses shall be invoiced.

If submitting by email, please send to services@airtera.com.



AIRTERA

Request For National Driver Register (NDR) File Check on Current or Prospective Employee

Rev. 20250912

ACCOUNT #

48267

Instructions:

1. All portions of this form must be filled out completely and legibly.
2. This form must be signed and notarized unless you have a valid DMV Record Inquiry Account that is qualified to receive personal information.
3. ~~Mail this form to: DMV, 1905 Lana Av. Salem OR 97314.~~
4. Pursuant to Section 502 of the Pilot Improvement Act of 1996, if you are seeking employment with an air carrier as a pilot, this serves as a notice of a request for NDR information concerning your driving record and your right to a copy of such information.
5. This file check of the NDR will result in a printed report that will be sent only to the employer listed on this form. The report will indicate either (1) that the NDR does not contain a record matching your identification or (2) that the NDR has a probable identification (match) from the state(s) listed on the report.
6. A separate check of state files is required to (1) verify the identification or (2) obtain the driving record. It is the responsibility of the employer to obtain the state driver record(s) and to determine or verify that the record(s) belong to the employee.

Current or Prospective Employer to Receive the NDR Search Results

EMPLOYER OR AGENCY NAME C/O AirTera, a service mark of NATA Compliance Services		☐ Driver Employer	☐ Railroad Company	☒ Air Carrier
TO THE SPECIFIC ATTENTION OF:		SUBSCRIBER TELEPHONE (703) 842-5317		
MAILING ADDRESS: NUMBER AND STREET 9440 Double R BLVD		FAX (866) 768-2881		
CITY, STATE AND ZIP CODE Reno, NV 89521				

Driver Information

DRIVER'S (EMPLOYEE OR PROSPECTIVE EMPLOYEE) FULL LEGAL NAME (FIRST, MIDDLE AND LAST)
OTHER NAMES USED (MAIDEN, PRIOR NAME, NICKNAME, PROFESSIONAL NAME, OTHER)
DRIVER LICENSE NUMBER AND STATE
DATE OF BIRTH (MONTH - DAY - YEAR)

EMPLOYEE UNDERSTANDING: I understand that the National Driver Register (NDR) search will result in a printed report which will be sent only to the employer or agency listed above on this form. Under the Privacy Act, I have the right to request record(s) pertaining to me from the NDR. I also understand that if convictions, suspensions or revocations of mine are found which I have not shown on my applications or interviews, I might not be hired as a driver or could lose my job as a driver, and the State where I am licensed may also take action on my driver license including suspension, cancellation or revocation. I hereby, with my signature, authorize a one-time file search of the NDR and any resulting reports to be sent to the employer or agency named on this form.

DRIVER'S SIGNATURE (EMPLOYEE OR PROSPECTIVE EMPLOYEE)	DATE
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N O T A R Y	State of _____
	County of _____
	This instrument was acknowledged before me on _____, 20____
	by _____,

	Notary Public - State of _____