

This form is completed by a witness(es) of unsafe driving behaviors that could be attributed to certain medical conditions and affect their ability to operate a motor vehicle. If 2 citizens are completing this form, each must sign the affidavit and have it notarized.

This form is not considered to be confidential and the subject driver of this affidavit has legal authority to request a copy of this form.

For questions about this form, contact the Division of Driver Licensing, Medical Review Board, at (502) 564-1257.