DR 2664 (08/17/23)
COLORADO DEPARTMENT OF REVENUE
Driver Control
PO Box 173350
Denver CO 80217-3350
303-205-5613

Per SE/Express Consent Documents Request

Documents submitted by law enforcement will not be made available at the time of hearing; however, Respondents are automatically mailed a copy of the documents when a hearing request is granted and the Department has received all of the Per Se/Express Consent documents. If you wish to request an additional copy of these documents, complete the form below and either mail it to the address listed above, email to the dor_dmv_expressconsent@state.co.us, or deliver it in person to 1881 Pierce Street, Lakewood (Entrance A).

| below and either mail it to the address listed above, email to person to 1881 Pierce Street, Lakewood (Entrance A). | the dor_dmv_expressconsent@state.co.us, or deliver it in |
|---|--|
| The Department may need up to two business days to proce | ess this request once received. |
| Check only one delivery option below to indicate how you wi | sh to receive the documents: |
| ☐ Email the documents to the email address indicated written for legibility and accuracy. | below. Please make sure to double check the email address |
| \Box I will pick up the documents in person at 1881 Pierce | Street. |
| Mail the documents to the respondent/attorney address address provided for legibility and accuracy. | ess indicated below. Please double check respondent/attorney |
| Attorney's Requ | est (Please Print) |
| Date | Case Number/Driver's License Number |
| Respondent Name | Respondent Date of Birth |
| Attorney Name | Attorney Registration Number |
| Attorney Email Address | |
| Attorney Address | |
| I hereby affirm that I am the attorney of record for the Resp | ondent referenced above. |
| Attorney Signature | Telephone Number |
| | DR . |
| Respondent's Re | quest (Please Print) |
| Date | Case Number/Driver's License Number |
| Respondent Name | Respondent Date of Birth |
| Respondent Email Address | |
| Respondent Address | |
| Respondent Signature | Telephone Number |