



FLORIDA STATE FORM INSTRUCTIONS

The following information will assist you in completing the form to access MVRs in this state.

- Be sure to include your *Insurance Information Exchange (iiX)* Account Number.
- Fill in your company's name.
- Sign and date the form in the fields provided.
- Only a person who is authorized to execute contracts for your company should complete and sign this form.
- Send signed form to:

iiX, A Verisk Business
Attn: Compliance
1574 Crescent Pointe Parkway,
College Station, TX 77845

iiXsetup@verisk.com



ADDENDUM TO SUBSCRIPTION AGREEMENT FOR FLORIDA MOTOR VEHICLE REPORTS

This Addendum ("Addendum") supplements the existing Subscription Agreement (the "Agreement") between Customer and ISO Claims Services, Inc. through its Insurance Information Exchange unit, ("iiX"), and applies solely to the Customer's access to and use of Florida driver license, motor vehicle reports ("MVRs"), crash, and insurance record information (collectively, "Florida Data") provided by iiX pursuant to its Memorandum of Understanding ("MOU") with the Florida Department of Highway Safety and Motor Vehicles ("FLHSMV").

Terms and Conditions Relating to Access to Florida Data:

1. Customer agrees to use the Information Services originating from Florida only for the purpose explicitly set forth in the Agreement and permitted under the Driver's Privacy Protection Act ("DPPA"), Florida Statutes §§119.0712(2), 316.066, and 324.242, and any other applicable federal or state laws.
2. Customer shall not use Florida Data for marketing, surveys, or solicitations, or for any purpose not expressly authorized by the Agreement, this Addendum, and Federal or State laws.
3. Customers who rediscover Florida Data to third parties, including Outsourcers, must have written contracts with those entities. These contracts must include established controls to ensure that all recipients of Florida Data are subject to the terms and conditions of the Agreement and this Addendum, as well as the DPPA and Florida Statutes §§119.0712(2), 316.066, and 324.242. Pursuant to Florida MOU, a copy of such contract must be provided upon request. Failure to provide a copy of such agreement within the timeframe specified in the request may result in immediate termination of access to Florida Data.
4. Customer shall ensure that any authorized user or Outsourcer accessing or utilizing Florida Data obtained through iiX maintains the confidentiality of such information as required by DPPA and Florida Statutes §§119.0712(2), 316.066, and 324.242.
5. Customer shall ensure that any authorized user or Outsourcer accessing or utilizing Florida Data obtained through iiX shall only use such information to assist Customer for the purpose set forth in the Agreement.
6. Customer agrees to, at its own expense, implement administrative, technical, and physical safeguards to detect or prevent unauthorized access, use, or disclosure of Florida Data. Customer shall encrypt all Florida Data in transit using TLS 1.2 or higher.
7. Customer shall notify iiX immediately upon becoming aware of unauthorized access, use, or disclosure of Florida Data, any breach of security as defined under Florida Statutes §501.171, or any litigation, regulatory action, or termination of agreements related to misuse of Florida Data.
8. Customer understands that access to Florida Data is subject to any restrictions, limitations or conditions enacted by the Florida Legislature, which may affect any or all terms of the MOU.
9. Customer acknowledges that access to Florida Data may be suspended upon failure of Customer, or its authorized users, including Outsourcers, to comply with this addendum or applicable law.
10. Customer acknowledges that any person who knowingly violates Florida Statutes §§119.0712(2) or 316.066 may be subject to criminal punishment and civil liability as prescribed in Florida Statutes §§119.10 or 316.066.

This Addendum does not modify, alter, expand, or delete any other terms or conditions of the Subscription Agreement.

IN WITNESS WHEREOF, the customer certifies that each has read, understands, and agrees to the terms and conditions described herein in this Addendum.

Name of Company _____ Account Number: _____

Signature _____ Date _____

Owner or Officer or Legally Authorized Representative

Name (Printed) _____