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Fingerprint Criminal History Record Consent and Request

City of Perry, City Hall NCJ ORI (On File)
for Alcohol License

I hereby authorize the City of Perry to conduct an inquiry for the purpose of obtaining an alcohol license. This inquiry will include fingerprinting for obtaining national and the State of Georgia criminal history record information as authorized by state and federal law.

Full Name Printed			
Address where you reside			
Sex	Race	Date of Birth	Social Security Number

This authorization is valid for 30 days from date of signature

Signature Date

Date of Inquiry: _____ Time of Inquiry: _____ Operator's Initials: _____

Purpose Code: ALCOHOL LICENSE APPLICATION

The inquiry resulted in the following: (check all that apply)

<input type="checkbox"/>	No Criminal Record Available
<input type="checkbox"/>	Criminal Record (Attached/Released)
<input type="checkbox"/>	No NCIC/GCIC Warrant
<input type="checkbox"/>	Possible NCIC/GCIC Warrant (List Wanting Agency Below)

Wanting Agency Name: _____

Wanting Agency Telephone: _____

Agency Designee Signature and Title