



Clayton County Community Development Department
 121 South McDonough Street, Annex 2 Jonesboro, GA 30236

CONSENT FORM FOR CRIMINAL BACKGROUND CHECK

This form must be completely filled out in order to be accepted for processing.

BACKGROUND CHECK FOR: Pawn Shop Massage Parlor Taxi Owner (Type): _____
 Alcohol License Solicitor Employee Other: _____

NAME OF BUSINESS: _____
 LOCATION ADDRESS: _____
 CITY, STATE, ZIP: _____ BUSINESS #: _____

NAME: _____
 (Last) (First) (Middle) (Maiden)
 HOME ADDRESS: _____
 CITY, STATE, ZIP: _____
 PHONE #: HOME: _____ CELL: _____
 EMAIL ADDRESS: _____

RACE: _____ SEX: _____ DATE OF BIRTH: _____
 EYE COLOR: _____ HAIR COLOR: _____ PLACE OF BIRTH: _____
 HEIGHT: _____ WEIGHT: _____ SOCIAL SECURITY #: _____

ATTACH A COPY OF THE GOVERNMENT ISSUED IDENTIFICATION REFERENCED BELOW

DRIVERS LICENSE #: _____ EXPIRES: _____ STATE ISSUED: _____

Within the past ten (10) years in regard to any violation of the law, have you entered a plea of guilty, been found guilty by a court, had accepted a plea of *nolo contendere* or been given first offender treatment by a court? YES _____ NO _____

If yes, list below the offense(s) and date(s):

NOTE: A "YES" above may not necessarily be a bar to a license. **However, failure to disclose such information may be grounds for disqualification.** Licensee should carefully disclose ALL information concerning violations in the space above. I do hereby swear that the above information is true and correct under the penalty of Georgia State Law, 16-10-71 for false swearing and 16-10-20 for false statements. I hereby authorize the Clayton County Police Department and the Clayton County Community Development Department to receive any criminal history record pertaining to me which may be in the files of any state or local criminal justice agency in Georgia.

 Signature Date

Sworn to and subscribed before me this _____ Day of _____, Year _____

 Notary