



CRIMINAL BACKGROUND AND CREDIT CHECK AUTHORIZATION

Each member, partner, officer, director, or principal; owner of 10 percent or more of the corporation; owner if applicant is an entity other than a corporation; and proposed manager of the location must complete and sign the following:

Name:			Position or title:		
Home street address:			Home mailing address, if different:		
City:	State:	ZIP:	City:	State:	ZIP:
Home phone: - -			E-mail:		
Office street address:			Office mailing address, if different:		
City:	State:	ZIP:	City:	State:	ZIP:
Office phone: - -			Fax: - -		
Social Security number: - -			Date of birth (mm/dd/yyyy): - -		
Driver license no.:			Percentage of ownership:		
Have you been convicted of a felony in the past 10 years? <input type="checkbox"/> No <input type="checkbox"/> Yes, explain:					
Have you been convicted of a misdemeanor for fraud, misrepresentation, or deceit during the past 10 years? <input type="checkbox"/> No <input type="checkbox"/> Yes, explain:					
Have you been the subject of an administrative action in any state that resulted in civil penalties or action taken against a license you held during the past 10 years? <input type="checkbox"/> No <input type="checkbox"/> Yes, explain:					
Have you had any entry of any money judgments that are not paid in full? <input type="checkbox"/> No <input type="checkbox"/> Yes, explain:					
Have you filed for voluntary or involuntary bankruptcy protection during the past 10 years? <input type="checkbox"/> No <input type="checkbox"/> Yes, explain:					
Attach a resume of the past five years of work experience.					

I certify that the information I've provided is current and accurate as of the day it was signed and I understand that my signature authorizes an investigative consumer report as defined in the Fair Credit Reporting Act (15 USC 1681 et seq.).

 Signature of member, partner, officer, owner, principal, or manager

 Date

