



Rome Police Department

5 Government Plaza Suite 300

Rome, Georgia 30161

706.238.5179



Alcohol Sales Permit Application

A \$25 Non-Refundable Cash Fee is Due Upon Return

CRIMINAL HISTORY REQUEST

I hereby request and authorize the Rome Police Department to receive a criminal history pertaining to me, from the files of the Georgia Criminal Information Center (GCIC) & National Criminal Information Center (NCIC). This history should reflect any reportable offenses from all local and state criminal justice agencies in Georgia and/or the U.S.A. as per the applicable Purpose Code.

Full Name (Please Print)								
Aliases (Maiden)								
Social Security #		Driver's License #						
Phone #		DOB		Race		Sex		
Street Address								
City		State		Zip				
Place of Employment		Place of Birth (County & State)						
Have you ever been arrested for any felony?					Yes		No	
If yes, when?		Reason						
Location								

I hereby certify the information on this application is true and correct.

Signature		Date	
Notary <i>(If not signed in presence of RPD personnel)</i>		Date	
		Expiration Date	

ATTENTION

In the event an adverse decision is made based on the information contained in this criminal history, the individual or agency making the decision is required, under penalty of law, to inform the record subject of all information pertinent to that decision. "This disclosure must include that a criminal history inquiry was made, the specific contents of the record, and the effect the record had upon the decision." Failure to do so can result in fines and/or imprisonment as provided for in OCGA 33-3-34(b) and GCIC 140-2.04(1)(b)(3).

To be completed by the ID Officer

Approved:		Denied:	
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ID #:		Date Issued:		Received By:	
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