



# Golden Police Department

911 Tenth Street, Golden, Colorado 80401  
Telephone: 303/384-8045  
Facsimile: 303/384-8036

## Clearance Letter Request Form

Date \_\_\_\_\_

Due to the fact that I am not in the local area and/or I am unable to come to the police department in person for one of the following reasons (check all that apply)

- Out of the Country     
  Out of the Denver Metro Area     
  Medically/Physically unable to travel

I would like to request a criminal history check on myself. Listed below is my personal information and I understand that I must have my signature witnessed and notarized by a public notary. Additionally, I understand the Clearance Letter/Background check letter must be sent back to me by mail and can not be faxed.

Name \_\_\_\_\_  
(Last, First, Middle)

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Race \_\_\_\_\_ Sex  Male  Female

Social Security Number \_\_\_\_\_ Drivers License number and state \_\_\_\_\_

Current Address \_\_\_\_\_  
(full street address information)

Mailing Address \_\_\_\_\_  
(if different than current address)

AKA(s) \_\_\_\_\_  
(include any additional social security numbers or dates of birth)

Previous Address in Colorado \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Note: Please include the following with this notarized request:

1. Copy of your current driver's license or photo ID (ENLARGED, LEGIBLE COPY WITH PHOTO)
2. \$15.00 check or money order made payable to City of Golden (must be pre-printed check and from a United States bank)
3. Self-addressed, self-stamped envelope

**Requestor's Signature** \_\_\_\_\_  
(must sign in presence of Notary)

### Notary

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ in the County of \_\_\_\_\_,

State of \_\_\_\_\_ by \_\_\_\_\_  
(Printed Name)

(SEAL)

\_\_\_\_\_  
Notary Signature

\_\_\_\_\_  
My Commission Expires

\_\_\_\_\_  
Full Address and Phone Number