

TOWN OF GREENEVILLE BACKGROUND CHECK RELEASE FORM

Disclosure Statement

Having made application for a Certificate of Compliance to sell retail food store wine in the County of Greene, State of Tennessee, Town of Greenville at _____
(store address).

The Town of Greenville will perform a criminal background check through the Town of Greenville Police Department to determine if you have been convicted of a felony within a ten-year period immediately preceding the date of application. The information gathered from this check may be used to deny your Certificate of Compliance.

The Town of Greenville reaffirms its policy to ensure fair and equal treatment in all its practices to all persons, regardless of age, color, disability, national origin, pregnancy, race, religion, sex, and past, present or future military service.

Consent Form

I hereby authorize the Town of Greenville to conduct a criminal background check through the Town of Greenville Police Department. I understand that I am entitled to:

Be informed of the information gathered by the background check and to obtain a copy of the report with six months of filing the request.

Obtain from the Town of Greenville Police Department any record that forms the basis for the report.

Be informed whether the Town of Greenville has denied my application because of the Town of Greenville's response to the background check.

I further understand that the information to be released is private and is controlled by the Town of Greenville Police Department.

If you have ever been convicted of any crime, please attach a description of the crime and the particulars of the conviction.

The background check will use the applicant's name, birth date, social security number, and driver's license to retrieve criminal background information.

Last Name:	First Name:	Middle Initial:
Address:		State:
City:	State:	Zip:
Social Security Number:		
Driver's License Number:		
Date of Last Background Check:		

Signature of Applicant

Date