



Authorization and Consent to Release Information

TRADE NAME (DBA):
INDIVIDUAL NAME:
TITLE
BUSINESS ADDRESS:

I, as an applicant for the above liquor license, am required by the City of Greeley to be fingerprinted and to undergo a criminal record review. I consent to be fingerprinted and to said criminal record review, and further agree to the following terms and conditions:

1. The fingerprints will be used to check the criminal history records of the Federal Bureau of Investigation (FBI) and the Colorado Bureau of Investigation (CBI).
2. I hereby authorize the FBI and the CBI to release criminal history information to the City of Greeley.
3. I understand that all information provided to the City of Greeley will be held in a confidential manner by the City Clerk's Office.
4. I hereby release the City of Greeley from any liability or damage which may result from furnishing the information requested. I further authorize the City of Greeley and the Local Licensing Authority to discuss, in a public forum, any and all findings in regard to my moral, and character. I understand that any information or records obtained by the City of Greeley may become public record.

SIGNATURE: _____ DATE: _____

STATE OF _____)) SS. COUNTY OF _____) Subscribed and sworn to

before me this ____ day of _____, 20___. Witness my hand and official seal,

Notary Public Signature
My commission expires _____