CITY OF RAMSEY
REQUEST FOR BACKGROUND CHECK INFORMATION

DATA PRIVACY ADVISORY: The data supplied on this form will be used to assess the qualifications for a license. This data is not legally required but the City will not be able to grant the license without it. If a license is granted, the data will constitute a public record. The data is needed to distinguish this application from others, to identify this application in City license files, to verify the identity of the applicant, to contact the applicant if additional information is required and to determine if the applicant meets all ordinance requirements.

INFORMATION TO BE USED FOR BUSINESS LICENSE PROCESSING ONLY

Ramsey Police Department Records Division

Please print legibly – All Fields MUST Be Completed *(Enter "N/A" if not applicable)*

Type of License Applied For:

□ *Liquor* □ *Massage* □ *Peddler/Solicitor* □ *Rental* □ *Tobacco* □ *Transient Merchant* □ *Other:* _____

Business Name: _____

Business Address: _____

Applicant Information: *Address on ID must match address listed below.*

Driver's license, State ID, or Military ID Number (*attach color copy of ID*): _____

Full Name: _____ Date of Birth: _____
First Middle Last

Phone (*daytime*): _____ Sex: _____ Race: _____

Local Address: _____ MN _____
Street City State Zip Code

Other Names Used (*in past 5 years*): _____

Other Addresses (*in past 5 years*): _____
(Attach separate sheet if necessary)

I, the undersigned, do hereby authorize the RAMSEY POLICE DEPARTMENT to disclose all criminal history record information for the purpose of licensing with the City of Ramsey. This authorization shall be valid for one year from the date of my signature.

_____ _____
Applicant Signature *Date*

FOR OFFICE USE ONLY

Checks: □ MN Criminal History □ Local Police Records

Comments: _____

Background Check Processed by: _____ Date: _____

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