



Evansville Police Department

15 N.W. Martin Luther King, Jr. Blvd.
Evansville, Indiana 47708

TX 812-436-7896 • TDD 812-436-7975 • FAX 812-435-6175 • E-MAIL info@evansvillepolice.com

Billy Bolin
Chief of Police

REGULATORY LICENSE APPLICATION FOR ALARM BUSINESS AGENT

Name: _____
Last First Middle

Any Other Names Used (e.g. Maiden): _____

Applicants Address: _____

City: _____ State: _____ Zip Code: _____

Previous Addresses (City and State) use back of page if needed _____

City: _____ State: _____ Zip Code: _____

Date of Birth: ____/____/____ Social Security Number: ____/____/____

Employer's Name (Alarm Business Name): _____

Have You Ever Been Convicted of a Felony (circle one)? YES NO

I SOLEMNLY SWEAR THAT ALL OF THE INFORMATION FURNISHED IN THIS PERMIT APPLICATION IS TRUE, ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I AUTHORIZE INVESTIGATION OF ALL INFORMATION CONTAINED IN THIS APPLICATION. I UNDERSTAND THAT MY MISREPRESENTATION(S) OR FALSIFICATION(S) OF THE INFORMATION PROVIDED WILL DISQUALIFY ME FROM FURTHER CONSIDERATION.

Applicant's Signature Date

THIS IS AN APPLICATION, NOT A LICENSE OR PERMIT. A VALID PERMIT WILL BE SENT TO YOU AFTER PROCESSING THIS APPLICATION.

There is a Background Check Fee of \$20.00 that is to be payable to Veriscreen.

There is a Application Fee of \$35.00 for your Alarm Agent Permit. Make that check payable to "The Evansville Police Department" and send it along with your completed application to:

Evansville Police Department
Attn: Alarm Coordinator
15 NW Martin Luther King JR BL
Evansville IN 47708



in partnership with the community

1704 S. Green River Rd.
Evansville, IN 47715
812-402-0740 Voice
812-474-0745 Fax



EMPLOYMENT INQUIRY RELEASE

In connection with my application for employment, I understand that investigative inquiries on my background, in accordance with the Fair Credit Reporting Act and all state and federal laws, are to be made on me, including information as to my personal character, abilities, work habits, mode of living, residency, general reputation, performance, experience, and other qualities pertinent to my qualifications for employment, including reasons for termination of past employment.

I understand that my prospective employer/current employer and/or VeriScreen, Inc. may make inquiries, including but not limited to my consumer credit history, education, professional licensing, criminal history and driving history. Furthermore, I understand that prospective employer/current employer and/or VeriScreen, Inc. may request information from various federal, state and other agencies that maintain records concerning my past driving history, credit history, criminal history, military history, civil and other experiences. If hired by the prospective employer I, also, understand that the prospective employer may check all of the above entities on a yearly/quarterly basis or during the process of determining a promotion.

I understand that according to the Fair Credit Reporting Act, I am entitled to know if employment or promotion is denied because of information obtained by my perspective employer from a Consumer Reporting Agency. Upon written request, I will be informed whether an investigative consumer report was requested and will be given full information as to the nature and the scope of the investigation, as well as the name of the reporting agency or sources of information.

I authorize without reservation, any party (including, but not limited to, employers, law enforcement agencies, state agencies, institutions and private information bureaus or repositories) contacted by prospective employer/current employer and/or VeriScreen, Inc. to furnish any or all of the above mentioned information. In addition, I hereby release VeriScreen, Inc. and prospective employer from any and all liability for damages arising from the investigation and disclosure of the requested information. I further release and discharge all liability from all companies, agencies, officials, officers, employees and other persons, who, in good faith provide to prospective employer and/or VeriScreen, Inc. the above mentioned information as requested, in order to successfully complete a background investigation for my application of employment, retaining employment, or promotion. I will allow a photocopy of this authorization to be as valid as the original.

Print Full Name: _____

Social Security _____ *Date of Birth _____ / _____ / _____

Driver's License # _____ State _____

Current Address _____

City/State/Zip _____

Current Employer _____

Applicants Signature _____

** Notary Signature _____ Printed _____

State _____ County _____ Commission Expires _____

* Date of birth is being requested only for the purpose of identification in obtaining accurate retrieval of records, and will not be used for discriminatory purposes.

** Only when requested.

Credit Card Authorization

My signature below authorizes VeriRent, Inc., DBA VeriScreen, to charge the credit card listed below for any orders submitted by me for my individual background screening. The Nationwide Criminal Background Screening product is priced at \$20 per search. Any additional search information requested may require additional fee.

Card Type (check one): Master Card Visa Discover American Express

Card Number (please write
clearly)

Expiration
Date

Name on Card

Credit Card Billing Address (include city, state, zip)

Authorized
Signature

Date