

# AUTHORIZATION TO PROVIDE RECORD OF ARRESTS AND CONVICTIONS TO THIRD PARTIES FOR THE PURPOSE OF LANDLORD TENANT SCREENING ONLY

## Section 1 – For Perspective Tenants Age 17 and older

By completing this authorization form, you are giving the City of Joliet Police Department your permission to provide information relating to your arrest and conviction record (if any) to the person listed in Section 2. You must complete a separate form for each person who will be residing at the rental property.

### **PRINT ALL INFORMATION CLEARLY AND LEGIBLY**

Name: \_\_\_\_\_

Alias Name/ Maiden Name: \_\_\_\_\_

Male \_\_\_\_\_ Female \_\_\_\_\_

Black \_\_\_\_\_ Hispanic \_\_\_\_\_ White \_\_\_\_\_ Other \_\_\_\_\_

Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Social Security Number \_\_\_\_/\_\_\_\_/\_\_\_\_

Driver's License \_\_\_\_\_ State \_\_\_\_\_

By my signature below, I hereby state that the information provided is accurate and correct. I hereby voluntarily request that the City of Joliet Police Department provide the person listed in Section 2 with information relating to my attest and conviction record(s) (if any). I understand that this information is being sent to the person in Section 2 and that a copy will be sent to me also upon my request. If the information appearing in the report is inaccurate or incomplete, I understand that I must notify the Joliet Police Department of the error(s) within seven (7) days of the date I received the report. If the Joliet Police Department reveals errors in the report, a revised report will be provided to the person identified in Section 2 at no cost.

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Perspective Tenants Signature

Date

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Mailing Address (Print Clearly)

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City, State, Zip Code