

Village of South Roxana

Background Check Authorization and Waiver Form

Permit Applicant Information

- Full Name: _____
- Address: _____
- Phone Number: _____
- Email Address: _____
- Date of Birth: _____
- Driver's License/ID Number: _____
- Permit Type Applied For: _____

Authorization for Background Check

I, the undersigned, hereby authorize the Village of South Roxana, its agents, employees, and representatives to conduct a background check as part of my application for a permit. This background check may include, but is not limited to, the following:

- Criminal history records
- Verification of any other information provided in my application

I understand that the background check is a prerequisite for considering and possibly issuing the permit for which I am applying. I further understand that any false or misleading information provided in my application may result in the denial of the permit.

Waiver of Liability

I hereby release, discharge, and hold harmless the Village of South Roxana, its officers, employees, and agents from any and all claims, damages, losses, liabilities, costs, or expenses arising from or related to the background check conducted in connection with my application for a permit.

I acknowledge that I have read and fully understand this Background Check Authorization and Waiver Form, and I voluntarily agree to its terms.

Acknowledgment and Signature

- **Applicant's Signature:** _____
- **Date:** _____

For Office Use Only

- **Date Received:** _____
- **Received By:** _____
- **Background Check Conducted By:** _____
- **Date Background Check Completed:** _____

Instructions for Applicants:

1. Complete all fields in the "Permit Applicant Information" section.
 2. Sign and date the form where indicated.
 3. Submit the completed form with your permit application to the Village Clerk's office.
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