

**CORPORATE
HEADQUARTERS**
Tel: 631.862.9300
Fax: 631.862.7471



MAILING ADDRESS
5000 CORPORATE COURT
HOLTSVILLE, NY 11742

Subject: **INDIA CRIMINAL RECORD VERIFICATION**

Please confirm from your records, whether our employee, whose details are given below, has had any criminal case booked against him during the period(s) as indicated below:

Name: _____

Father's/Husband's Name: _____
*Indicate if name is father's or husband name

Residential Address:

Door Number/House Number/Flat Number/Plot Number

Building Name/Colony Name/Apartment Name

Street Name/Road Name/Sector Number/Phase Number/Main and Cross Street/Block Name or Number

Name of Area/Locality/Landmark

District Name

Village/Taluka/Tehsil/City Name

State Name

PIN (ZIP) Code

Dates at Address:

From: _____

To: _____

Thank you for your cooperation.

CARCO Group, Inc.

I hereby authorize all persons, courts, and law enforcement agencies to release such information without restriction or qualification. I authorize CARCO and any of their designees or agents to obtain a Consumer Report on me contingent upon the limitations stated above. I am willing that a Photostat or electronic duplication of this authorization be considered as effective and valid as the original. This authorization does not include the release of any medical information. This authorization is valid only for the purpose set forth herein.

Printed Name: _____

Signature: _____ **Date of Birth:** _____

Today's Date: _____ (NOTE: This form is valid for three (3) months only).