

# KNOXVILLE POLICE DEPARTMENT

## PERMISSION TO RELEASE ARREST INFORMATION

Person / Business Requesting Background Check: \_\_\_\_\_

Name \_\_\_\_\_  
Last First Middle Maiden

Aliases: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Address: \_\_\_\_\_  
Street # Street/Road Name Apt # City State Zip

Date of Birth: \_\_\_\_\_ Sex: \_\_\_\_\_ Race: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_ Status: \_\_\_\_\_

I hereby authorize the Knoxville Police Department to release copies of my arrest record to the person / business requesting the background check named above.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**If NOT applied for in person, Notarization is required**

<u>Inquiry Results</u>	<u>Notarization</u>
Local Warrant Check: _____	State of _____
JIMS Computer Check: _____	County of _____
No Record Found: _____	Personally appeared before me, _____,
Record Found: _____	With whom I am personally acquainted, and who acknowledges that he/she executed the within instrument for the purposes therein contained.
Computer Generated Arrest History Attached Y___ N___	Witness my hand, this _____ day of _____, 20____.
Record Checked By: _____	_____ Notary Public
Date: _____	My commission expires: _____