



Authority to Release Information

To Whom It May Concern:

I hereby grant permission to **Grant County** to conduct a thorough historical background investigation on me. The purpose for the investigation is to construct a record of my personal and professional history to ensure I meet the requirements of the position and duties I have been hired to perform. I understand the investigation will be conducted by a licensed private investigation firm contracted by this company.

I hereby grant the investigator bearing this release, or copy thereof, for a period of 60 days of its date, to obtain any information in your files pertaining to any credit (to include obtaining a copy of your credit report), educational, investigation, motor vehicle report, arrest or conviction of myself on any civil or criminal matter. I hereby direct you to release such information upon the request of this bearer. I hereby release you as custodian of such records for any criminal justice, law enforcement or court agency, including its officers and employees, or related personnel, both individually and collectively, from any and all liability for damages of whatever kind, that may at any time result to me, my heirs, family or associates because of compliance with this authorization and request to release information; or any attempt to comply with it.

Should there be any questions as to the validity of this release, you may contact me as indicated below.

PLEASE PRINT CLEARLY!

Full Name _____

Social Security # _____

Date of Birth _____

Current Address _____

Telephone Number () _____

Driver's License Number: _____ State of License _____ Expiration
Date: _____

Applicant Signature _____ Date _____