



COLUMBUS CONSOLIDATED GOVERNMENT

Georgia's First Consolidated Government

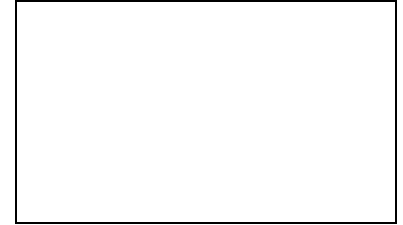
0101-099-1999-4869

FINANCE DEPARTMENT

REVENUE DIVISION - Occupation Tax Section

3111 Citizens Way, P.O. Box 1397 Columbus, Georgia 31902-1397

706-653-4100, Fax 706-225-3780



Amount To Be Validated: **\$20.00**

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Alcoholic Beverage License

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Pawnbroker Application

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Coin Operated Amusement Machines

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Taxicab Application

WAIVER FOR POLICE RECORDS CHECK

I understand that in order for the Finance Department to review and/or approve my application for the above checked item, the Columbus Police Department will have to perform a criminal record check on me. I hereby authorize the Columbus Police Department to conduct such a criminal record check locally and statewide, and release the information to the Finance Department, or it's authorized agent.

Full Name: _____

Maiden Name: (if applicable) _____

Any Aliases Used: (if applicable) _____

Social Security Number: _____

Date of Birth: _____ Gender: _____ Race: _____

Signature of Applicant/Principal

Sworn and subscribed before me this _____ day of _____, _____.

Notary Public

My Commission Expires: _____