

CRIMINAL HISTORY REQUEST

The Caldwell Police Department does not release criminal history information from other jurisdictions. You will receive only the criminal history information and involvements that occurred within the City of Caldwell and the letter will indicate the same.

Please fill out all information as completely as possible. A telephone number is required for contact purposes. Requests not picked up within 30 days will be destroyed.

DATE: _____

NAME:

First _____

Middle _____

Last _____

DOB: _____ **SSN#:** _____

Contact Number _____ - _____ - _____

Current Address:

Reason for Request:

Officers: Attach a copy of identification
Attach records for review.