SP 4-164 (12-99)

PENNSYLVANIA STATE POLICE

REQUEST FOR CRIMINAL RECORD CHECK

FOR CENTRAL REPOSITORY USE ONLY
(LEAVE BLANK)

PART I: TO BE COMPLETED BY REQUESTER
(INFORMATION WILL BE MAILED TO REQUESTER ONLY)

DATE OF REQUEST

*** TYPE OR PRINT LEGIBLY WITH INK ***

NOTE: IF THIS FORM IS NOT LEGIBLE OR NOT PROPERLY COMPLETED, IT WILL BE RETURNED UNPROCESSED TO THE REQUESTER. A RESPONSE MAY TAKE THREE WEEKS OR LONGER TO PROCESS.

WARNING: A PERSON COMMITS A MISDEMEANOR OF THE THIRD DEGREE IF HE/SHE MAKES A WRITTEN FALSE STATEMENT, WHICH HE/SHE DOES NOT BELIEVE TO BE TRUE.

REQUESTER NAME	
ADDRESS	
CITY	STATE ZIP

CONTACT TELEPHONE NUMBER (INCLUDING AREA CODE)

[ ][ ][ ] - [ ][ ][ ][ ] - [ ][ ][ ][ ]

REQUESTER IDENTIFICATION (ONLY CHECK ONE BLOCK)

☐ INDIVIDUAL/NONCRIMINAL JUSTICE AGENCY
THE FEE IS NONREFUNDABLE.

☐ FEE EXEMPT NONCRIMINAL JUSTICE AGENCY

CASH OR MONEY ORDER

NAME/SUBJECT OF RECORD CHECK (LAST)	(FIRST)	(MIDDLE)		
MAIDEN NAME AND/OR ALIASES	**SOCIAL SECURITY NUMBER (SOC)**	**DATE OF BIRTH (DOB)**	**SEX**	**RACE**

REASON FOR REQUEST (CHECK ONE BLOCK)

☐ EMPLOYMENT (IF APPLICABLE, CHECK ONE OF THE FOLLOWING) ☐ ELDER CARE ☐ CHILD CARE ☐ SCHOOL DISTRICT

☐ ADOPTION/FOSTER CARE

☐ OTHER (SPECIFY)

ONLY CHECK THIS BLOCK IF YOU WANT TO REVIEW *YOUR ENTIRE* CRIMINAL HISTORY

☐ INDIVIDUAL ACCESS AND REVIEW OR FIREARMS CHALLENGE–ENTIRE CRIMINAL HISTORY
(AVAILABLE ONLY TO SUBJECT OF RECORD CHECK OR LEGAL REPRESENTATIVE WITH LEGAL AFFIDAVIT OF LEGAL REPRESENTATIVE ATTACHED)

REQUESTER CHECKLIST

DID YOU ENTER THE FULL NAME, DOB, AND SOC?

DID YOU ENCLOSE THE **CASH OR MONEY ORDER**

*** DO NOT SEND CASH OR PERSONAL CHECK ***

DID YOU ENTER YOUR COMPLETE ADDRESS INCLUDING ZIP CODE AND TELEPHONE NUMBER IN THE BLOCKS PROVIDED?

Concord Township
43 Thornton Road
Glen Mills, PA 19342-1225

PART II: CENTRAL REPOSITORY RESPONSE ONLY ***DO NOT WRITE BELOW THIS LINE***

INFORMATION DISSEMINATED

☐ NO RECORD ☐ CRIMINAL RECORD ATTACHED

INQUIRY DISSEMINATED BY

SID NUMBER

THE INFORMATION DISSEMINATED BY THE CENTRAL REPOSITORY IS BASED ON THE FOLLOWING IDENTIFIERS THAT MATCH THOSE FURNISHED BY THE REQUESTER.

☐ NAME ☐ SOCIAL SECURITY NUMBER
☐ DATE OF BIRTH ☐ RACE
☐ SEX ☐ MAIDEN/ALIAS NAME

CERTIFIED BY

(DIRECTOR, CENTRAL REPOSITORY)

This response is based on a comparison of data provided by the requester in Part I against the information contained in the files of the Pennsylvania State Police Central Repository only, and does not preclude the existence of criminal records which might be contained in the repositories of other local, state, or federal criminal justice agencies.