



Permit Consent Form

Check which permit you are applying for: Alcohol Server Pawn Shop Precious Metals Taxi Delivery

Full Name Printed _____

Street Address _____

City _____

State _____

Zip _____

Cell Phone Number _____

Home Phone Number _____

Email Address _____

Drivers License/Identification # _____

State _____

Sex _____

Race _____

Date of Birth _____

Social Security # _____

Are You A U.S Citizen? Yes No If No, Immigration Number: _____

Business Name _____

Business Address _____

I hereby authorize **Lilburn Police Department** to receive any criminal history record information pertaining to me which may be in the files of any state or local criminal justice agency in Georgia. I verify that the above information is correct and that any falsification of the information will result in the rejection of my application.

Signature _____

THIS SECTION TO BE COMPLETED BY CITY EMPLOYEE: _____

PERMIT ISSUED: YES NO ISSUE DATE: _____

RECEIPT#: _____

By affixing the Unit Seal, I certify that a Criminal History Request through GEORGIA was completed at the Lilburn Police Department using Purpose Code E.

DATE: _____

SIGNATURE OF CLERK: _____