



COBB COUNTY POLICE DEPARTMENT

140 North Marietta Parkway
Marietta, Georgia 30060-1454
(770) 499-3900 • fax: (770) 499-4195
www.police.cobbcountyga.gov

J.R. Houser *Chief of Police*

R.L. Prince *Deputy Chief of Police*

C.T. Cox *Deputy Chief of Police*

CRIMINAL HISTORY CONSENT WITH NOTARY INSTRUCTIONS

FOR CURRENT AND FORMER GEORGIA RESIDENTS

****IMPORTANT**** - We **will NOT accept** a fax or copy of the completed form, because that would make the notary seal and stamp null and void.

(A) – You (person being queried) can send via overnight or U.S. Mail the completed notarized form with a money order or cashier's check for \$15 made payable to: Cobb County Police Department.

1. You will sign on the line that states REQUESTER'S SIGNATURE and DATE.
2. You will fill out the portion starting at "check one of the following:" (only check "1" box per line) If none apply, check OTHER.
3. The PERSON BEING QUERIED completes the entire line and if you have a middle name, write it out in full.
4. Write SSN if applicable and DOB (Date of Birth).
5. For RACE, select one. If none apply, select UNKNOWN.
6. For SEX, select one.
7. For QUERIED PERSON'S SIGNATURE, sign your name.
8. The Notary will complete the lines immediately following your signature. PLEASE DO NOT WRITE BELOW THE SOLID LINE. That is for OFFICE PERSONNEL ONLY.
9. Send copy of a valid form of identification. Any picture ID that is issued by a Government Agency within the United States or a foreign passport.
10. Include a self addressed, stamped envelope so we can mail your criminal history report back to you.

(B) – Requester brings the notarized form in for you (person being queried).

IF Requestor is getting (or picking up) criminal history for you with your permission do the following:

1. The fee is \$15 dollars and you can pay by cash, money order or cashier's check. If paying by money order make payable to: Cobb County Police Department. DO NOT SEND A CHECK.
2. You fill out the form leaving the REQUESTER'S SIGNATURE and Date blank. The person bringing the form in will sign and date there, and they will also need to have their valid license or passport.
3. You will fill out the portion starting at "check one of the following:" (only check "1" box per line) If none apply, check OTHER.
4. For PERSON BEING QUERIED, complete the entire line. If you have a middle name, write it out in full.
5. Write SSN # (if applicable) and DOB (Date of Birth).
6. For RACE, select one. If none apply, select UNKNOWN.
7. For SEX, select one.
8. For QUERIED PERSON'S SIGNATURE, sign your name.
9. The Notary will complete the lines immediately following your signature. PLEASE DO NOT WRITE BELOW THE SOLID LINE. That is for OFFICE PERSONNEL ONLY.
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Mail to:

Cobb County Police Department NCIC
140 N. Marietta Parkway
Marietta, GA 30060



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CRIMINAL HISTORY CONSENT FORM

I hereby authorize the Cobb County Police Department to obtain any criminal history information pertaining to me which may be in the files of any state or local criminal justice agency in Georgia.

REQUIREMENTS: Photo identification for the Requester (and Person being inquired on if different). Person being inquired on signature must be notarized if not present at the time of the request. A \$15.00 fee is charged per request.

REQUESTER'S SIGNATURE: _____ **DATE:** _____

To assure that the correct Purpose Codes are used you must **check** one of the following:

Child Care: Elderly Care Mentally Disabled Care Other

PERSON BEING QUERIED: _____
Last First Middle

SSN: _____ **DOB:** _____

RACE: White Black Native American Asian Unknown

SEX: Male Female

QUERIED PERSON'S SIGNATURE: _____

Notary Sworn to and signed before me this _____
day of _____, 20____.

DO NOT WRITE BELOW THIS LINE --- OFFICE PERSONNEL ONLY

UTILIZING GCIC/NCIC ACCESS A CHECK OF THE GEORGIA CRIMINAL HISTORY FILES REVEALED:

NO RECORD FOUND: SEE ATTACHED PRINTOUT:

Police Record Technician Badge Number Date

As per House Bill 314, Notary is not required; however, all forms will be notarized upon request.

Notary Sworn to and signed before me this _____
day of _____, 20____.



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CRIMINAL HISTORY REQUEST FORM

REQUIREMENTS: Photo identification for the Requester. A \$15.00 fee is charged per request.

REQUESTER'S SIGNATURE: _____ **DATE:** _____

FELONY ARREST ONLY

PERSON BEING QUERIED: _____
Last First Middle

SSN: _____ **DOB:** _____

RACE: White Black Native American Asian Unknown

SEX: Male Female

DO NOT WRITE BELOW THIS LINE --- OFFICE PERSONNEL ONLY

UTILIZING GCIC/NCIC ACCESS A CHECK OF THE GEORGIA CRIMINAL HISTORY FILES REVEALED:

NO RECORD FOUND: SEE ATTACHED PRINTOUT:

Police Record Technician Badge Number Date

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