



APPLICATION FOR CHARACTER LETTER (*\$5.00 FEE*)

Please complete the following information. Give a detailed explanation for your request. We will check your local record and prepare a letter reflecting that check, which will be signed by the Sheriff. The letter will be mailed to the mailing address you provide. If you would prefer to pick the letter up once it has been signed, please let us know.

NAME: _____

PHYSICAL ADDRESS: _____

MAILING ADDRESS: _____

TELEPHONE #: _____

DATE OF BIRTH: _____ PLACE OF BIRTH: _____

FORM OF ID: CADL#: _____ EXP DATE: _____

CAID #: _____ EXP. DATE: _____

OTHER DL# _____ EXP. DATE: _____

REASON FOR REQUEST: _____

SIGNATURE: _____ DATE: _____

ID VERIFIED BY: _____

REV. ACSO 01/09/07