

**LIGHTHOUSE INVESTIGATIONS, LLC**  
**PO Box 310, Newcastle, OK 73065**  
**Phone: (405) 329-9990 Fax: (405) 329-9992**

**REQUEST FOR CRIMINAL RECORDS CHECK AND AUTHORIZATION**

I hereby request and authorize the release of any information which pertains to any records of convictions contained in law enforcement files or in any criminal file maintained on me whether local, state, or national. I hereby release local, state, and national law enforcement agencies from any and all liability resulting from such disclosures.

**NAME OF COMPANY/PERSON REQUESTING CRIMINAL SEARCH:**

\_\_\_\_\_

**Please Complete Entire Form~**

**\*Print Your Name:**

\_\_\_\_\_

**\*Print Entire Name As Shown On Your Birth Certificate & All Aliases: (Maiden Name/Adopted Name Change/Married Name(\$))**

\_\_\_\_\_

\_\_\_\_\_

**\*Address:** \_\_\_\_\_

**\*City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**\*DATE OF BIRTH:** \_\_\_\_\_

**\*SOCIAL SECURITY NUMBER:** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ **Please Print Legibly**

**\*DRIVER'S LICENSE NUMBER:** \_\_\_\_\_ **\*ISSUING STATE:** \_\_\_\_\_

\_\_\_\_\_

**TODAY'S DATE:** \_\_\_\_\_

**CONTACT:** \_\_\_\_\_ **PHONE:** ( ) - \_\_\_\_\_

\_\_\_\_\_

***OFFICE USE ONLY***

**Request Received by:** \_\_\_\_\_ **Date Received:** \_\_\_\_\_

**FAX COMPLETED FORM TO**  
**LIGHTHOUSE INVESTIGATIONS (405) 329-9992**