

CONFIDENTIAL

**TOWN OF BELMONT
TOWN HALL
BELMONT, MA 02478**

CRIMINAL RECORD INFORMATION FORM

Managers, Stockholders, Officers and Directors of Corporation and Others

NAME OF CORPORATION: _____

NAME: _____ ALIAS, IF ANY _____

ADDRESS: _____

OCCUPATION: _____

BIRTHPLACE: _____ DATE OF BIRTH: _____

FATHER'S NAME: _____ MOTHER'S NAME: _____

SPOUSE'S NAME, IF ANY: _____

If you have any record of misdemeanors including: drunkenness, simple assault, speeding, minor traffic violations, affray or disturbance of the peace...and such offenses were disposed of ten or more years prior to the filing of this application...you may be considered to have "NO RECORD" for the purpose of furnishing this department information as to your criminal record.

I, _____, APPLICANT FOR A _____ LICENSE IN THE TOWN OF BELMONT, HEREBY STATE THAT I HAVE NOT BEEN CONVICTED FOR VIOLATION OF A STATE OR FEDERAL NARCOTIC LAW.

I, _____, DO HEREBY STATE THAT I HAVE NO RECORD OF CRIMINAL CONVICTIONS IN ANY STATE OR FEDERAL COURT EXCEPT THOSE LISTED AS FOLLOWS: _____

I, _____, DO HEREBY STATE THAT I HAVE NO PENDING CRIMINAL CHARGES AGAINST ME FOR ANY CRIMINAL VIOLATIONS IN ANY STATE OR FEDERAL COURT EXCEPT THOSE LISTED AS FOLLOWS: _____

SIGNED AND SUBSCRIBED TO UNDER THE PAINS AND PENALTIES OF PERJURY THIS _____ DAY OF _____, 20__ BY: _____
Signature

PRINT LAST NAME: _____

ANY STATEMENTS CONTAINED HEREIN FOUND TO BE UNTRUE SHALL BE CAUSE FOR THE CANCELLATION AND/OR REVOCATION OF ANY LICENSE GRANTED TO THE APPLICANT OR COPORATION IN WHICH HE/SHE IS A PRINCIPAL OR AGENT.