

POLICE CLEARANCE

THERE IS A 48 HOUR WAITING PERIOD
This is Salt Lake City Police Dept jurisdiction only.
Juvenile Check for last 20 yrs only



To submit request IN PERSON, visit the Public Safety Building, 475 S. 300 E., SLC, UT. Lobby open M-F/8-4:30. To submit request BY MAIL, send form along with a notarized copy of your current driver's license to: SLCPD/Records, P.O. Box 145497, SLC, UT 84114-5497

FULL NAME					
Last		First		Middle	
Other Names Used (maide	n, alias, etc.)				
Complete Address					
Place of Birth	Street			Zip Code	
Date of Birth	Other Date	es of birth used			
Social Security Number					
List Criminal Records (If a	any)				
Number of Copies Reques (First two copies \$5.09,		y \$5.09)			
Or To the follo	listed above	-			
Parent or Custodial Parent Type of documentation use					
Signature				_	
*Clerk Receiving Request	(ID #)	Date			
Identification used: Type		Number			
* Completed by (ID #)		Date			
* Mailed by: (ID #)					
* Picked up: Given by ID	#	Date			
Identification used (if pic	ked up) Type	Nur	mber _		