Application for Clearance Letter

Letter needed for (check one):	□Adoption □Tra	wel □Other:		
If a notarized copy of this letter is Please advise staff if you will be t		nsibility of the appl	icant to arrange for notary service.	
Delivery Method: Mail	☐ Pick-Up			
APPLICATION INFORMATION	<u>ON</u>			
LAST NAME:	FIRST NAM	ME:	Middle Initial	
ALIAS:		DATE OF BIRTH:		
EYE COLOR: HA	IR COLOR:	HEIGHT:	Weight:	
SEX: MALE FEMALE DRIVER'S LICENSE NUMBER STA			STATE:	
RESIDENCE ADDRESS:				
CITY:	STAT	ГЕ:	ZIP CODE:	
CITIZEN'S SIGNATURE:			Date:	
Please contact us to verify your clearance letter is available for pickup. Your clearance letter will be ready for pickup within (2) business days, unless specified above that you wished the letter to be mailed to you. The clearance letter for travel purposes and other miscellaneous purposes will only show that the applicant has no outstanding warrants with Citrus Heights Police Department. The clearance letter for adoption purposes will show that the applicant has no outstanding warrants and that the applicant has no criminal history with the Citrus Heights Police Department.				
****** FOR DEPARTMENT USE ONLY *******				
REQUEST PROCESSED BY:			DATE:	
DISTRIBUTION COMPLETED BY:			DATE:	