



Carthage Police Department

120 South Mechanic Street
Carthage, New York 13619
Phone 315-493-1141
police@villageofcarthageny.gov



John J. Poggi III
Chief of Police
Zoning Officer

Protect & Serve

Name (Print Clearly: Last, First, Middle) _____

DOB _____

SS # _____

AUTHORITY TO RELEASE INFORMATION AND RELEASE OF LIABILITY

To: Any person who has knowledge of my conduct or activities, or any past, present or future Employer, Credit Bureau, Bank, Financial Institution, Dean, Registrar, Principal, Counselor, Instructor, or School, Law Enforcement Agency, Government Agency or Armed Forces:

I, _____ hereby authorize the Village of Carthage Police Department, to conduct an appropriate background investigation of me and prepare a consumer report or investigative report which may be used as a factor in determining my eligibility for employment, promotion or retention.

I understand this report may include information from personal interviews about my character, general reputation, personal characteristics and mode of living as well as public and private sources including but not limited to the acquisition of criminal records, employment records, school records, driving records or abstracts, etc.

I further understand the information contained in report may be used as a factor in any employment decision. I authorize all persons who may have information relevant to this investigation to disclose it to The Village of Carthage and its agents, and I release all persons from any liability on account of such disclosure. I hereby further authorize that a photocopy of this authorization may be considered as valid as an original.

Employee Signature: _____ Date: _____

Notary

Sworn to before me this _____ day of _____, 20_____

Notary Signature