

Antioch Police Department
Local Summary Criminal History Record Review Application

In accordance to California Penal Code Sections 13320-13323, any person desiring to examine a record relating to him or herself shall make application to the agency maintaining the record.

***Valid identification and payment of \$42 fee is required at time of application.
(Fingerprints may be required)***

*****Please type or print. All sections MUST be completed.*****

The undersigned hereby applies to obtain a copy of his/her Local Criminal History Record:

Date: _____ **Telephone Number:** _____

Applicant Name: _____
Last First Middle

Also Known As: _____
(or Maiden Name) *Last First Middle*

Date of Birth: _____ / _____ / _____ **Driver Lic/ID:** _____ / _____
Month/ Day/ Year Number State

Current Address: _____
Number Street

City State Zip Code

**Prior Address
in Antioch:**

Number Street

City State Zip Code

X _____
Signature of Applicant

Note: You will be contacted by phone when your record is ready for pick up which should be in approximately seven (7) days.*****

Date:	Receipt #	Empl#	() Mail () Pick Up
--------------	------------------	--------------	-----------------------------