

PRUDENCE ISLAND VOLUNTEER FIRE DEPARTMENT, INC.
AUTHORIZATION & INDEMNIFICATION
FOR THE RESEARCH & RELEASE TO AUTHORIZED PERSONS
OF CRIMINAL RECORDS & INFORMATION

(Must be completed by all applicants for active membership)

I, _____, do hereby, without duress, threat, promise or coercion, authorize agents of the Town of Portsmouth, Rhode Island, Police Department to undertake an investigation of any criminal history of record in my name and provide the results of same to the Chief and Assistant Chief of the Prudence Island Volunteer Fire Department. I hereby further indemnify and hold blameless the Town of Portsmouth, Rhode Island and the Prudence Island Volunteer Fire Department, Inc. and any and all of their respective agents for any type of injury or damage resulting from the authorized criminal history and record investigation and eventually released information.

Signed: _____

Date: _____

Witness: _____

..... Please Print or Type Below

Name: _____

Date of Birth: _____ Place of Birth: _____

Address: _____ City: _____ State: _____

Social Security Number: _____

Driver's License Number: _____ State Issued: _____

This form must be returned with all required signatures in order that your application be considered.

..... For Police Department Use Only

() No Criminal Record

() A Criminal Record exists; please contact Portsmouth Police Department for further information.

Authorized Office: _____ Portsmouth Police Department