

2019 WebCheck Waiver

I, _____, hereby certify that the personal identifiers provided on this form are
Print Name

accurate, and I voluntarily and knowingly authorize the City of Columbus, Ohio, Department of Public Safety, License Section to submit information to the Ohio Bureau of Criminal Identification and Investigations (BCI&I) to conduct a criminal records check for information relating to me.

By placing my fingerprint images on the WebCheck scanner, I am authorizing BCI&I to disseminate criminal arrest, conviction, and juvenile delinquency adjudication records to the WebCheck agency I have designated to receive this information.

I voluntarily and knowingly release and discharge the Ohio Attorney General's Office, BCI&I and their employees from all claims and liability related to this authorized criminal record review and dissemination.

This waiver is valid for one year from the date this background check was conducted. The background check can take up to 45 days to process.

By signing below, I acknowledge that I am unable to work in the capacity of the license that I have applied to obtain. Furthermore, permits must be picked up within 30 days of receiving notification or attempted notification by the License Section of the record check results.

I have been a resident in the State of Ohio for the past five (5) years. Yes No

The WebCheck results will be sent to the following address:

City of Columbus – License Section
4252 Groves Rd
Columbus, OH 43232
Phone: (614) 645-8366

Phone Number

Signature

Date

For Office Use Only

Transaction Number: **CS01867419**

Completed By: _____

