



Screening Application

Pawnbroker Mobile Food Vendor Solicitor

Internal Use Only
Date of Application
/ /
Receipt Number
Permit #

BUSINESS INFORMATION

Business Name: _____ (DBA) _____		
Business Address: _____ City _____ State _____ Zip _____	Business Phone: () _____ - _____	
Business Owner: _____	Owner Phone: () _____ - _____	
Business Owner Address: _____ City _____ State _____ Zip _____	Vehicle License: _____	State: _____

APPLICANT INFORMATION

Name: _____			Middle: _____			Last: _____		
Additional Names Used: _____ _____			Drivers License #: _____			State: _____		
			Telephone Number: () _____ - _____			Cellular Number: () _____ - _____		
Date of Birth: / /	U.S. Citizen: Yes _____ No _____	Sex: M F	Height: _____	Weight: _____	Eyes: _____	Hair: _____		

ADDRESS HISTORY

Current Address: _____	City: _____	State: _____	Zip: _____	From: _____
Address: _____	City: _____	State: _____	Zip: _____	From: _____ To: _____
Address: _____	City: _____	State: _____	Zip: _____	From: _____ To: _____
Address: _____	City: _____	State: _____	Zip: _____	From: _____ To: _____

EMPLOYMENT

Current Employer: _____	Telephone Number: () _____ - _____	From: _____
Address: _____	City: _____	State: _____ Zip: _____
Previous Employer: _____	Telephone Number: () _____ - _____	From: _____ To: _____
Address: _____	City: _____	State: _____ Zip: _____
Previous Employer: _____	Telephone Number: () _____ - _____	From: _____ To: _____
Address: _____	City: _____	State: _____ Zip: _____

CRIMINAL HISTORY DISCLOSURE

Have you ever been convicted of a felony or misdemeanor? _____ Yes _____ No

If you answered yes to the question above, please complete the following:

Charges: _____

Date: _____ City: _____ State: _____ Zip: _____

Charges: _____

Date: _____ City: _____ State: _____ Zip: _____

Charges: _____

Date: _____ City: _____ State: _____ Zip: _____

BOND INFORMATION

Have you ever forfeited a bond? _____ Yes _____ No

If you answered yes to the question above, please complete the following:

Charges: _____

Date: _____ City: _____ State: _____ Zip: _____

Charges: _____

Date: _____ City: _____ State: _____ Zip: _____

I swear under penalty of perjury, all statements in this application are true and correct to the best of my knowledge. I understand an investigative report may be prepared on all information contained herein, and I hereby consent to such an investigation. Incomplete applications will not be investigated.

Applicant Signature: _____ **Date:** _____

Print Name: _____

BACKGROUND SCREENING FEES SHALL BE ASSESSED IN ACCORDANCE WITH THE ADOPTED FEE SCHEDULE.

**PLEASE SUBMIT COMPLETED APPLICATION AND PAYMENT TO CITY OF MOSES LAKE
FINANCE DEPARTMENT - 401 S. BALSAM ST., MOSES LAKE, WA 98837**

**PLEASE BRING THIS COMPLETED APPLICATION AND RECEIPT TO THE MOSES LAKE POLICE DEPARTMENT,
LOCATED AT 411 S. BALSAM ST., FOR FINGER PRINTING ON THURSDAYS FROM 2:00 P.M. TO 4:00 P.M.
IF AN APPLICANT IS UNAVAILABLE ON THURSDAYS, CALL (509) 764-3887 TO SCHEDULE AN APPOINTMENT.**

MOSES LAKE POLICE DEPARTMENT USE ONLY

Investigation Completed By: _____ Date: _____

Approved: _____ Denied: _____

Signature of Authorized Agent: _____



Moses Lake Police Department

WAIVER OF CONFIDENTIALITY CITY BUSINESS LICENSE FINGERPRINTING

The City of Moses Lake requires that all applicants for taxi cab drivers, solicitors, mobile food vendors, pawn shop and second hand dealers in the city of Moses Lake are finger printed as part of the background check process. These results will be used to determine your eligibility to possess a city license to drive a taxi cab, solicit door to door, work as a mobile food vendor, work as a pawn shop or second hand dealer within the city limits of Moses Lake.

By signing this form, I hereby acknowledge that criminal background information and other criminal history related information received from the Washington State Patrol and Federal Bureau of Investigation criminal background check will be used by the Moses Lake Police Department to determine your eligibility to possess a city license.

I understand my fingerprint background check will be submitted to both the Washington State Patrol and FBI to check criminal history records. _____ (initial)

I understand that if I have a criminal history record, I will have 30 days from the issue date of my city ID card to verify or challenge the results of the records obtained. _____ (initial)

I understand that my criminal history record check results will only be used for authorized purposes by the Moses Lake Police Department and is not disseminated to other agencies or individuals. _____ (initial)

I understand I will immediately be provided a copy of my WSP/FBI criminal history record if I request it. _____ (initial)

Print Name

Signature

Date

Moses Lake Police Department 411 S Balsam Ave, Moses Lake, WA 98837 (509)764-3887

Professionalism, Integrity, Compassion, Service

AGENCY PRIVACY REQUIREMENTS FOR NONCRIMINAL JUSTICE APPLICANTS

Authorized governmental and non-governmental agencies/officials that conduct a national fingerprint-based criminal history record check on an applicant for a noncriminal justice purpose (such as employment or a license, immigration or naturalization matter, security clearance, or adoption) are obligated to ensure the applicant is provided certain notices and that the results of the check are handled in a manner that protects the applicant's privacy. All notices must be provided in writing.¹ These obligations are pursuant to the Privacy Act of 1974, Title 5, United States Code (U.S.C.), Section 552a, and Title 28, Code of Federal Regulations (CFR), Section 50.12, among other authorities.

- Officials must ensure that each applicant receives an adequate written FBI Privacy Act Statement (dated 2013 or later) when the applicant submits his/her fingerprints and associated personal information.²
- Officials must advise all applicants in writing that procedures for obtaining a change, correction, or update of an FBI criminal history record are set forth at 28 CFR 16.34. Information regarding this process may be found at <https://www.fbi.gov/services/cjis/identity-history-summary-checks> and <https://www.edo.cjis.gov>.
- Officials must provide the applicant the opportunity to complete or challenge the accuracy of the information in the FBI criminal history record.
- Officials should not deny the employment, license, or other benefit based on information in the FBI criminal history record until the applicant has been afforded a reasonable time to correct or complete the record or has declined to do so.
- Officials must use the FBI criminal history record for authorized purposes only and cannot retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.³

The FBI has no objection to officials providing a copy of the applicant's FBI criminal history record to the applicant for review and possible challenge when the record was obtained based on positive fingerprint identification. If agency policy permits, this courtesy will save the applicant the time and additional FBI fee to obtain his/her record directly from the FBI by following the procedures found at 28 CFR 16.30 through 16.34. It will also allow the officials to make a more timely determination of the applicant's suitability.

Each agency should establish and document the process/procedures it utilizes for how/when it gives the applicant the FBI Privacy Act Statement, the 28 CFR 50.12 notice, and the opportunity to correct his/her record. Such documentation will assist State and/or FBI auditors during periodic compliance reviews on use of FBI criminal history records for noncriminal justice purposes.

¹ Written notification includes electronic notification, but excludes oral notification.

² See <https://www.fbi.gov/services/cjis/compact-council/privacy-act-statement>

³ See 5 U.S.C. 552a(b); 28 U.S.C. 534(b); 34 U.S.C. § 40316 (formerly cited as 42 U.S.C. § 14616), Article IV(c); 28 CFR 20.21(c), 20.33(d), 50.12(b) and 906.2(d).