

City of Henderson Limited Business License Background Investigation Checklist 240 Water Street Henderson, Nevada 89015 • 702-267-1730

After submitting the Limited Background Investigation packet and paying the background investigation fees, the applicant must submit their investigation packet in person to the Henderson Police Department at 223 Lead Street between the hours of 9:00 am and 4:00 pm, Monday through Thursday. The processing time for the Limited Background Investigation averages 4 business days. For questions relating to the background investigation process, please contact the Business Operations Division at 702-267-1730.

All questions within the Limited Background Investigation Packet must be answered completely.

The following items must be submitted to constitute a complete Limited Background Investigation Packet:

Complete Criminal Background Authorization – Business License Limited Investigation form
Complete Nevada Department of Public Safety Civil Applicant Waiver form
A copy of the applicant's valid Driver's license or government issued ID must be attached to the Criminal Background Authorization – Business License Limited Investigation form in order for the Police Department to process the application. Therefore , all applicants must be prepared to present a valid US government issued picture identification. The ID must be presented at the time of fingerprinting.
Limited Investigation Fee - \$50.00



Criminal Background Authorization – Business License Limited Investigation

HPD 0087C

Revised: 01/15/2020

PAGE 1 OF 1

I authorize the Henderson Police Department to run a nationwide computer based background check on myself.

I waive my rights under Title 5, United States Code, Section 552A, Privacy Act of 1974, with the understanding that only the City of Henderson will use the information furnished.

This waiver applies to all information covered by Title 5 as well as any relevant information not covered by that statute.

I hereby release you, your organization and others from any liability or damage which may result from furnishing the information requested, including any liability pursuant to any state or local code or ordinance or any similar laws.

I understand that I may be requested to provide arrest information and obtain documentation from other law enforcement agencies.

I understand that the approval or denial of suitability reached by the Business Operations Division as a result of this investigation will be provided to my employer.

I further understand that failure to disclose arrests and convictions with any other agency or failing to obtain the requested information in a timely manner, can result in disqualification of eligibility to volunteer, contract with or work for the City of Henderson and failure to provide all required information or providing false or misleading information constitute grounds for denial of this application and/or finding of suitability.

Print Full Name		Signature						Date	
			Business	Licen	se Limited Inv	vest i	igation <i>A</i>	Applicant Infor	mation
License Classification(s) of Employer(s): (Check all that apply.) Mobile food vendor Non-profit liquor Teenage dancehalls and nightclubs Sexually oriented business									Attach passport photograph taken within last six (6) months here.
Home Address:									
Email Address:									
Individuals Position in Business:									
City of Henderson Business License Numbers: City of Hend						ness	Names:		
Date of Birth:		Place of Birth:		Social Security Number:		r:	Driver's License Number:		
Cell Phone:			Home Phone:			I			
Eye Color:	Hair Color: Race: Sex:		Sex:	Height: Weight:		Weight:			
Copy of Driver's License/ID must be attached to form to process background					ss background				Date Above Photo Was Taken:
			Please Do	Not W	rite Below This	Line	e - For He	enderson PD Us	e Only:
Has Active Warra	ant:	Yes	☐ No		☐ No HPD Arr	ests		Yes, HPD Arrests	S
Arrest Date:		Ch	arge(s):				Location	n:	
Arrest Date:		Ch	Location:						
Arrest Date: Charge(s):					Location:				
Arrest Date: Charge(s):						Location:			
Date Reviewed by Civil Processing:						Date Result Received by BL:			
PD Employee Signature						Date			



FINGERPRINT BACKGROUND WAIVER

As an applicant who is the subject of a Federal Bureau of Investigation (FBI) fingerprint-based criminal history record check for a noncriminal justice purpose you have certain rights which are discussed below.

- 1. You must be notified by (enter name of requesting agency)the City of Henderson Police Department that your fingerprints will be used to check the criminal history records of the FBI and the State of Nevada.
- 2. If you have a criminal history record, the officials making a determination of your suitability for the job, license or other benefit for which you are applying must provide you the opportunity to complete or challenge the accuracy of the information in the record. You may review and challenge the accuracy of any and all criminal history records which are returned to the submitting agency. The proper forms and procedures will be furnished to you by the Nevada Department of Public Safety, Records Bureau upon request. If you decide to challenge the accuracy or completeness of you FBI criminal history record, Title 28 of the Code of Federal Regulations Section 16.34 provides for the proper procedure to do so:
 - 16.34 Procedure to obtain change, correction or updating of identification records. If, after reviewing his/her identification record, the subject thereof believes that it is incorrect or incomplete in any respect and wishes changes, corrections or updating of the alleged deficiency, he/she should make application directly to the agency which contributed the questioned information. The subject of a record may also direct his/her challenge as to the accuracy or completeness of any entry on his/her record to the FBI, Criminal Justice Information Services (CJIS) Division ATTN: SCU, Mod. D-2, 1000 Custer Hollow Road, Clarksburg, WV 26306. The FBI will then forward the challenge to the agency which submitted the data requesting that agency to verify or correct the challenged entry. Upon the receipt of an official communication directly from the agency which contributed the original information, the FBI CJIS Division will make any changes necessary in accordance with the information supplied by that agency.
- 3. Based on 28 CFR § 50.12 (b), officials making such determinations should not deny the license or employment based on information in the record until the applicant has been afforded a reasonable time to correct or complete the record or has declined to do so.
- 4. You have the right to expect that officials receiving the results of the fingerprint-based criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal or state statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.
- 5. I hereby authorize (enter name of requesting agency) the City of Henderson Police Department, to submit a set of my fingerprints to the Nevada Department Public Safety, Records Bureau for the purpose of accessing and reviewing State of Nevada and FBI criminal history records that may pertain to me. In giving this authorization, I expressly understand that the records may include information pertaining to notations of arrest, detainments, indictments, information or other charges for which the final court disposition is pending or is unknown to the above referenced agency. For records containing final court disposition information, I understand that the release may include information pertaining to dismissals, acquittals, convictions, sentences, correctional supervision information and information concerning the status of my parole or probation when applicable.

6. I hereby release from liability and promise to hold harmless under any and all causes of legal action, the State of Nevada, its officer(s), agent(s) and/or employee(s) who conducted my criminal history records search and provided information to the submitting agency for any statement(s), omission(s), or infringement(s) upon my current legal rights. I further release and promise to hold harmless and covenant not to sue any persons, firms, institutions or agencies providing such information to the State of Nevada on the basis of their disclosures. I have signed this release voluntarily and of my own free will.

A reproduction of this authorization for release of information by photocopy, facsimile or similar process, shall for all purposes be as valid as the original.

In consideration for processing my application I, the undersigned, whose name and signature voluntarily appears below; do hereby and irrevocably agree to the above.

Applicant's Name:
Applicant's Name:(PLEASE PRINT LAST, FIRST, MIDDLE)
Address:
Applicant's Signature:
Date:
Submitting Agency: City of Henderson Police Department
Address: 223 Lead Street, Henderson NV 89015
Agency representative:
(PLEASE PRINT LAST, FIRST, MIDDLE
Agency representative's Signature:
Date: