

**Franklin Police Department  
Criminal Record Check Consent Form**

**(Precious Metals Permit)**

**RELEASE:**

I authorize the North Carolina Department of Justice through the State Bureau of Investigation, Division of Criminal Information to perform a name and/or fingerprint search of the State's criminal history record file and/or the Federal Bureau of Investigation for a national criminal history record check in connection with my suitability to obtain a Precious Metals Permit pursuant to N.C.G.S. 66-165.

In addition, I authorize the Franklin Police Department to conduct a name check through use of the Administrative Office of the Courts (AOC) data system. I understand that the North Carolina State Bureau of Investigation, Division of Criminal Information, the Administrative Office of the Courts, and their officials and employees shall not be held legally accountable in any way for providing this information to the Franklin Police Department and I hereby release said agencies and persons from any and all liability which may be incurred as a result of furnishing such information.

I further understand the Franklin Police Department cannot release the results of the criminal history record check to me.

I understand failure to consent is just cause to deny my request for a Precious Metal Dealer Permit and a criminal history may serve as a basis to deny my application.

Full name: \_\_\_\_\_

Race: \_\_\_\_\_ Sex: \_\_\_\_\_ DOB: \_\_\_\_\_

Social Security Number \_\_\_\_\_

Signed: \_\_\_\_\_ Date \_\_\_\_\_