

**NOTICE- BACKGROUND INVESTIGATION/ RELEASE OF INFORMATION**

**If you have ALREADY SUBMITTED this form and are still the current chairperson  
You DO NOT need to complete this form again.**

In connection with your bingo application with Marion County Code Enforcement, notice is hereby given that a consumer report and/or investigative consumer report may be obtained from a consumer reporting agency for chairperson purposes. These reports may contain information about your character, general reputation, personal characteristics and mode of living, whichever are applicable. They may involve personal interviews with sources such as your neighbors, friends or associates. The reports may also contain information about you relating to your criminal history, credit history, driving and/or motor vehicle records, education or employment history, or other background checks.

You have the right, upon written request made within a reasonable time after the receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report prepared by contacting the Company and Accurate Background Check, Inc., 519 South Pine Avenue, Ocala, Florida 34471 – Phone: 352-291-1155. For information about Accurate Background Check's privacy practices see [accuratebackgroundcheck.com](http://accuratebackgroundcheck.com). The scope of this notice and below authorization is not limited to the present and, if you choose, will continue throughout the course of your being chairperson and allow Marion County Code Enforcement to conduct future screenings for retention, promotion or reassignment, as permitted by law and unless revoked by you in writing.

**ACKNOWLEDGEMENT AND AUTHORIZATION**

By signing below, I hereby authorize the obtaining of consumer reports and/or investigative consumer reports by Marion County at any time after receipt of this authorization and throughout the course of my holding the position of chairperson.

Signature: \_\_\_\_\_

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

Print Name: \_\_\_\_\_ Last Four Digits of SSN: \_\_\_\_\_

## Chairperson Information

The following information is required to conduct a background check to become a Bingo Chairperson.

Please Print Clearly

Name \_\_\_\_\_  
First Middle Name Last (Maiden)

Print All Former Names Used (1) \_\_\_\_\_ (2) \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Sex \_\_\_\_\_ Race \_\_\_\_\_

Date of Birth: I I Phone Number \_\_\_\_\_

Current Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State of Issuance \_\_\_\_\_

Email Address: \_\_\_\_\_

May We Contact Your Current Employer(s): \_\_\_\_\_ May We Contact Your Current Supervisor(s) \_\_\_\_\_

Comments:

\_\_\_\_\_

Print Residences in the previous 7 years to include City & State:

(1) City: \_\_\_\_\_ State: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

(2) City: \_\_\_\_\_ State: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

(3) City: \_\_\_\_\_ State: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

The following questions are to be filled out in its entirety only upon a conditional job offer from the employer.

1. Have you ever been convicted of any crime or offense: Yes \_\_\_\_\_ No \_\_\_\_\_

2. Have you ever been involved in a Civil Action as the Plaintiff or Defendant: Yes \_\_\_\_\_ No \_\_\_\_\_

If you answered Yes to Numbers 1 or 2, provide the Case Numbers, Date of Action, City & State, Disposition and Current Status below:

Please explain. If more space is needed, please use the back of this form to continue explanation:

\_\_\_\_\_  
\_\_\_\_\_

By signing below, you are certifying that the above information is true and correct:

Signature: \_\_\_\_\_

Date: I I