* Effective May 1st, 2012 there will be a \$10 charge for any local records check.



Records Division
900 Longbrook Avenue, Stratford, CT 06614
Phone: 203-385-4130 Fax: 203-380-6756
www.townofstratford.com



Criminal Background Check

Date:	
Name:	Date of Birth:
Address:	
Place of Birth:	U.S. Citizen: Yes / No
Police Department Records fror criminal history, that must be re	ackground Check is based solely on Stratford on the year 2000 to current date. For a complete equested from the State of Connecticut Department equest a CT DPS Criminal History is available at on-line at: www.ct.gov/dps
** This form must be completed Department Records Division to	and signed prior to the Stratford Police complete a Criminal Background Check**
The fee for a Town of Stratford (at the time of request. The fee r check. <i>No personal checks are</i>	Criminal History Check is <u>\$10.00</u> and must be paid may be paid in cash, money order or certified <u>accepted.</u>
requests and requests from bus	completed within 10 business days. Multiple inesses may take more time, but will be processed ormation will ever be provided by phone.
Requestors Name:	
Requestors Address:	
Requestors Phone#:	FAX#:
Requestor's Signature:	Date:
Form of Identification used:	

Records Division Hours: Tuesday-Friday 9am-4pm.