Office of the City Clerk

Background Check Form

_____Auctioneer* _____City Sponsored event vendor (if lacking Troy Vendor's License)
____ Vendor* ____Games/Bingo ____ Secondhand dealer *
_____Peddler* ____Dealer in Precious Metal* ____Special Event
* indicates that fingerprinting ((Part D) is required.

PART A
Name: _____
Address: _____
_____
Date of Birth: _____ Social Security Number: _____
List any and all other names you have ever used: _____
_____
List all nicknames you have ever used: _____

PART B
List in reverse chronological order all of the places you have resided in the past ten years.

Street # and name	City or town	State or Province	Country

PART C
Have you ever been convicted of a crime? _____
If yes, Explain: _____

PART D: *Complete only if box is checked.*

☐ Fingerprinting is required. Contact L1 Enrollment Services at 877-472-6915 or www.L1enrollment.com and use ORI#NY0410201. There is a charge for this service; make payment directly to L1.

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