

RICHMOND FIRE DEPARTMENT

112 Jackson Street, Richmond, TX 77469

AUTHORIZATION TO RELEASE INFORMATION

I hereby request and authorize you to furnish the Richmond Fire Department with any and all information they may request concerning my work record, educational history, military record, financial status, criminal record, and general reputation. This authorization is specifically intended to include any and all information of a confidential or privileged nature as well as photocopies of such documents, if requested. The information will be used for the purpose of determining eligibility for employment by the City of Richmond Fire Department.

I hereby release you and your organization from any liability which may or could result from furnishing the information requested above and from any subsequent use of such information in determining my eligibility and qualifications to serve as an employee of the Richmond Fire Department.

Applicant's Signature: _____ Date: _____

State of Texas
County of _____

Before me, a notary public, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing document and, being by me first duly sworn, declared that the statements therein contained are true and correct.

Given under my hand and seal of office this _____ day of _____, _____.

Notary Public's Signature

(PERSONALIZED SEAL)