



# NEW LONDON POLICE DEPARTMENT



## CRIMINAL HISTORY CONVICTION INFORMATION REQUEST

This department reports only *Adult Criminal Convictions* for arrests made by the **New London Police Department**. We **do not** search other arrests from other agencies within Connecticut. Our criminal conviction records are only searched for the past **ten years**. Complete criminal history information **should** be obtained by contacting the State of Connecticut Department of Public Safety, SPBI Records Division, PO. Box 2794, Middletown, CT. 06457-9294.

Motor vehicle offense information is not reported by this department but can be obtained by contacting the State of Connecticut Department of Motor Vehicles.

*Juvenile records are not public and will not be released.*

All record checks will be done on the Name and Date of Birth provided. Complete history information requires that you provide the department with any maiden or alias name information on the subject.

**PLEASE BE ADVISED THAT IT MAY TAKE UP TO  
10-14 BUSINESS DAYS TO COMPLETE YOUR REQUEST**

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### INSTRUCTIONS

Complete this form in its entirety and return it to the New London Police Department Records Division. Please provide a stamped envelope addressed to the person/agency that you wish to receive the report. The fee for this service is twenty dollars payable by check or money order made payable to the City of New London. Those filing this request at the window may use cash. Generally, these requests take ten working days to complete.

### SUBJECT'S INFORMATION

Date of Request: \_\_\_\_\_

Subject's Last Name: \_\_\_\_\_

Subject's First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Subject's Aliases (Other Names Used) \_\_\_\_\_

Subject's Date of Birth: \_\_\_\_\_ Social Security # \_\_\_\_\_

Check the box that is applicable:

I AM the subject of the background check.

I am NOT the subject. My name is: \_\_\_\_\_

Please mail the Criminal Conviction History to:

Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_