



PERSONAL INQUIRY WAIVER AUTHORITY TO RELEASE OF INFORMATION

TO WHOM IT MAY CONCERN:

I respectfully request and authorize you to furnish the City of Tuscumbia any and all information, including that of a confidential or privileged nature you may have concerning me. This includes police records, work records, financial and credit status records, medical and mental records, military records, and other information requested. This information will be used to assist in determining my qualifications and fitness for the position that I am seeking with the City of Tuscumbia or the position of authority I am seeking that required approval by the City of Tuscumbia.

Intending to be legally bound hereby, I release you, your organization and others from liability or damage which may result from furnishing the information requested. Photo static copies of this authorization carry the same authority as the original.

Signature

Date

Street Address

City/State/Zip Code

Before me personally appeared _____ who stated this Document and its intent was explained to him/her that he/she has full knowledge of its purpose and that he/she executed this instrument of his/her own free will and accord.

Subscribed and sworn to me in my presence this _____ day of _____, 20____.

Notary Public

SEAL

My Commission expires _____
_____, 20____.