

# CITY OF HOLLYWOOD POLICE DEPARTMENT

## MOBILE CRIME WATCH APPLICATION

NAME \_\_\_\_\_ DOB \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE (HOME) \_\_\_\_\_ PHONE (BUS.) \_\_\_\_\_

DRIVER'S LICENSE# \_\_\_\_\_

HAS YOUR LICENSE EVER BEEN SUSPENDED OR REVOKED? \_\_\_\_\_

HAVE YOU EVER BEEN CONVICTED OF ANY CRIME? \_\_\_\_\_

IF YES, PLEASE PROVIDE DETAILS \_\_\_\_\_

\_\_\_\_\_

IF ON MEDICATION WILL IT AFFECT YOUR DRIVING ABILITIES? \_\_\_\_\_

ARE YOU IN GOOD HEALTH? \_\_\_\_\_

ARE YOU COLOR BLIND? \_\_\_\_\_

### EMERGENCY CONTACT

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE (RES) \_\_\_\_\_ PHONE (BUS) \_\_\_\_\_

I CERTIFY THAT THE INFORMATION ON THIS APPLICATION IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I HEREBY GIVE THE CITY OF HOLLYWOOD PERMISSION TO CONDUCT A BACKGROUND CHECK ON ME.

\_\_\_\_\_  
signature

\_\_\_\_\_  
date