



P.J. Tanner
Sheriff

OFFICE OF SHERIFF
BEAUFORT COUNTY
POST OFFICE BOX 1758
BEAUFORT, SOUTH CAROLINA 29901

AREA CODE (843)

SHERIFF	255-3200
CHIEF DEPUTY	255-3192
CRIMINAL RECORDS	255-3232
CRIMINAL WARRANTS	255-3228
CIVIL PROCESS	255-3188
JUDGMENTS	255-3189
FAX#	255-9405
WEB SITE	www.bcsco.net

Personal Inquiry Waiver
Authority for Release of Information

To: Concerned Person or Authorized Representative of any Organization, Institution or Repository of Records.

Applicant's Name: _____
D.O.B. _____ S.S.N. _____

I respectfully request and authorize you to furnish the Beaufort County Sheriff's Office any and all information that you may have concerning my work record, personal history, criminal record, civil process record, school record, driving record, reputation and financial and credit status. This information is to be used to assist the Sheriff's Office in determining my qualifications and fitness for the position I am seeking with the Beaufort County Sheriff's Office.

I have been advised and am fully aware that I will be requested to submit to a polygraph examination. The purpose of the examination is to assist in verifying all information furnished in this application and obtained during the applicant investigation. I am willing to take the polygraph examination.

(Initial) YES _____ NO _____

I hereby release you, your organization or others from any liability or damage, which may result from furnishing the information, requested above.

Applicant's Signature Date

Address

AFFIDAVIT

State of _____
County of _____

Before me personally appeared the said, _____, who says he/she executed the above instrument of his own free will and accord, with full knowledge of the purpose therefore.

Sworn to and subscribed in my presence this _____ day of _____, 20 ____.

_____, 20 ____.
My Commission Expires

Notary Public



Beaufort County Sheriff's Office... "Dedicated, Professional Service."