

**For Office Use Only:**

Today's Date: _____

Received By: _____

Clearance Letter Request Form

San Ramon Police Department
2401 Crow Canyon Rd. San Ramon, CA 94583

The San Ramon Police Department will conduct a local records check and document the results at your request. The local records check reflects criminal contacts made within the City of San Ramon from June 8, 2007 to present and does not include any other agency, County or State. For San Ramon records prior to June 8, 2007, please contact the Contra Costa County Sheriff's Office at 925-335-1570.

This service is offered to current and former San Ramon residents only. Please contact the San Ramon Police Department with any questions at 925-973-2700.

Fees (Check all that apply):☐ Current & Former San Ramon Residents: \$42☐ Notarized – additional: \$10**Important Instructions:**

- Complete all fields below
- Attach a clear, color, copy of your driver's license or passport
- Hand deliver or mail* this form and copy of ID to the San Ramon Police Department
- ***If mailing you must attach a notarized copy of your driver's license or passport**
- This process will take approximately 5 to 7 business days

First Name: _____

Middle Name: _____

Last Name: _____

A.K.A: _____

(Maiden Name/Any other name(s) you have legally used)

Date of Birth: _____ Social Security Number: _____

Telephone Number: _____

San Ramon Home Address: _____

Current Address (if different from above): _____

How long have you been a resident of San Ramon? (Years/months): _____

Reason for clearance letter: _____

I hereby authorize the San Ramon Police Department to conduct a records check in order to complete the request as indicated above.

Date: _____

Signature: _____