

**TOWN OR PD LETTERHEAD**  
**CIVIL FINGERPRINTING CONSENT FORM**

I, \_\_\_\_\_, consent to the collection of my fingerprints as part of the application process for the following license: \_\_\_\_\_.

I acknowledge and understand that my fingerprints will be searched against the database maintained by the Federal Bureau of Investigation.

\_\_\_\_\_

Signature

\_\_\_\_\_

Date

\_\_\_\_\_

Name (printed)