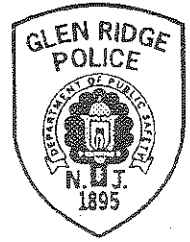




Borough of Glen Ridge
Department of Public Safety
Police Department

3 Herman Street, Glen Ridge, New Jersey 07028



Sean Quinn
Chief of Police

Today's Date _____

Applicant Number _____
Police use only

Main (973) 748-5400
Records (973) 748-2995
Records Fax (973) 748-2595

Reference: Request for Letter of Good Conduct

Dear Chief Quinn,

I respectfully request _____ Letter(s) of Good Conduct, \$10.00 each for the following reason(s):

Reason for request: _____

Name of Applicant: _____
First Name Middle Name Last Name

If Applicant is a Juvenile: _____ / _____
Signature Printed name of parent/guardian

Current Home Address: _____
Proof of Residency required and must be submitted with this request.

Home Phone: _____ E-mail address: _____

Length of time residing at the above address: From: _____ To: _____

Date of Birth _____ Age: _____ Sex: Male or Female
Month / Day / Full Year Circle

Social Security Number: _____ Resident Alien Number: _____

Place of Birth: _____
City and State Country if outside U.S.A

Eye Color: _____ Hair Color: _____ Height: _____ Weight: _____ Lbs.

Business: _____ Position held: _____
Business Name or Name of School If you answered "School" what year are you in

Business/School Address: _____

Have you ever been arrested or refused a letter of Good Conduct? Yes or No
If you answered "yes" provide the details on the back of this application. Circle

I certify that the above statement is true and accurate, and that any false or misleading information is a criminal act, which I may be criminally charged for under New Jersey Criminal Code.

Signature of Applicant Date
The process of this request may take up to fourteen days. Upon approval you will be notified via phone or email.

FOR POLICE DEPARTMENT USE

Approved: _____ Denied: _____ Certified by: _____