



MIKE COOPER  
Mayor

**CITY OF COVINGTON**  
OCCUPATIONAL LICENSE DEPARTMENT  
419 N. New Hampshire Street  
Post Office Box 778  
Covington, Louisiana 70434  
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## POLICE BACKGROUND CHECK\*

**\*Required with applications for liquor/beer/wine licenses, daycare businesses and peddler's permits.**

**Date of Application:** \_\_\_\_\_

This form must be filled out separately by all individuals involved in business ownership/participation.

**Type of activity for which the right to do business is desired:**

- |   |                                       |   |
|---|---------------------------------------|---|
| <input type="checkbox"/> Liquor License   | <input type="checkbox"/> Beer License | <input type="checkbox"/> Wine License               |
| <input type="checkbox"/> Daycare Business | <input type="checkbox"/> Cart Sales   | <input type="checkbox"/> Soliciting Funds/Donations |

Other  Describe: \_\_\_\_\_

*The following business has submitted an application for one of the above listed categories. Please conduct appropriate checks and return this form and the results as soon as possible.*

**Business Name:** \_\_\_\_\_

**Business Address:** \_\_\_\_\_

**Applicant's Full Name:** \_\_\_\_\_

**Have you ever used any other name, nickname or alias?** Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, list all names or aliases: \_\_\_\_\_

**Applicant's Address:** \_\_\_\_\_

If you have lived at your current address for less than two years, list your addresses for the past two years:

\_\_\_\_\_

\_\_\_\_\_

**Applicant's Telephone:** \_\_\_\_\_ **Applicant's SS#:** \_\_\_\_\_

**Applicant's Date of Birth:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **Applicant's Email:** \_\_\_\_\_

**Corporation:** Yes \_\_\_\_\_ No \_\_\_\_\_

**Are any co-owners, partners, counter letters involved in this business ownership?** Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, attach corporation documents and identify corporation officer, including home address.

**Have you submitted an application for a Louisiana State Alcoholic Beverage Control Liquor License?**

Yes \_\_\_\_\_ Date of Application \_\_\_\_/\_\_\_\_/\_\_\_\_ No \_\_\_\_\_

**Have you ever been arrested?** Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, on an attached sheet state date(s) and place(s) of arrest(s) and charge(s).

**Have you ever been convicted of any crime, misdemeanor or violation of any municipal ordinance?**

Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, on an attached sheet state the date(s), location(s), nature(s) of offense(s), and punishment(s) or penalty (fees) assessed.

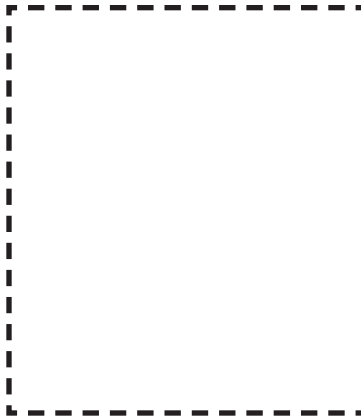
If filing an application for a Peddler's Permit,

1. List the last five municipalities where you have worked before coming to Covington, Louisiana.

Five horizontal lines for listing municipalities.

2. Have your attached documentation to your application if it requires that you post with the City a Surety Bond? Yes \_\_\_\_\_ No \_\_\_\_\_

3. Attach below a photograph taken within 60 days prior to the date of the application. Photo must be two inches by two inches showing head and shoulders in a clear and distinguishing manner.



4. The applicant shall submit to fingerprinting by the Chief of Police.

**ATTACH TO THIS APPLICATION A COPY OF YOUR CURRENT DRIVER'S LICENSE.**

I affirm that the information provided and attached is true and correct and hereby authorize the Covington Police Department to conduct any criminal checks on me as deemed necessary. Please initial all attachments.

\_\_\_\_\_  
Applicant Signature Initials Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

\_\_\_\_\_  
Chief of Police Signature Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Office use only:

Fingerprint