

Zicherheit P.O. Box 408 Selbyville, DE 19975 (855)638-9611

DISCLOSURE AND AUTHORIZATION FORM

Zicherheit LLC may request background information about you from a consumer reporting agency in connection with your employment application and for employment purposes. This information may be obtained in the form of consumer reports and/or investigative consumer reports. These reports may be obtained at any time after receipt of your authorization and, if you are hired by Zicherheit LLC, throughout your employment.

Zicherheit LLC will, in most cases, conduct the investigation itself, however, it does have the ability to partner with a consumer reporting agency who will obtain the reports for the company. These reports may contain information bearing on your character, general reputation, personal characteristics, mode of living and credit standing. The types of information that may be obtained include, but are not limited to: social security number verification; credit reports; criminal history checks; public court records; driving records; education records; licensing and creditication records; drug testing results; etc. The information contained in the reports will be obtained from private and public record sources, including, as appropriate, personal interviews with sources, such as neighbors, friends, and associates.

You may request more information about the nature and scope of any investigative consumer reports by contacting (To Be Completed by Zicherheit LLC):

Company:	
Address:	
Phone Number:	

A summary of your rights under the Fair Credit Reporting Act is also being provided to you.

ADDITIONAL STATE LAW NOTICES

If you are a California, Maine, New York, or Washington applicant, please see the attachment.

AUTHORIZATION

I have carefully read and understand this Disclosure and Authorization form and the attached summary of rights under the Fair Credit Reporting Act. By my signature below, I consent to the release of consumer reports and investigative consumer reports prepared by a consumer reporting agency, to Zicherheit LLC and its designated representatives and agents. I understand that if Zicherheit LLC hires me, my consent will apply, and the company may obtain reports, throughout my employment.



I also understand that information contained in my job application or otherwise disclosed by me before or during my employment, if any, may be used for the purpose of obtaining consumer reports and/or investigative reports.

By my signature below, I authorize law enforcement agencies, learning institutions (including public and private schools and universities), information service bureaus, credit bureaus, record/data repositories, courts (federal, state, and local), motor vehicle records agencies, my past or present employers, the military, and other individuals and sources to furnish any and all information on me that is requested by Zicherheit LLC or the retained consumer reporting agency.

By my signature below, I certify the information I provided on this form is true and correct. I agree that this Disclosure and Authorization form in original, faxed, photocopied, or electronic (including electronically signed) form, will be valid for any reports that may be requested by or on behalf of the Company.

Californian, Minnesota, or Okla copy of any consumer reports or in box below.	i i v	1
I	wish to receive a free copy of the	report
Applicant Last Name:	First:	Middle Initial:
Social Security No.*:	Date of Birth *:	
Current Address:		
City/State/Zip:		
Prior Addresses:		
	From: _	То:
	From:	То:
	From:	То:
Driver's License #:	State:	Expires:
Applicant Signature:	Date:	

* This information will be used only for background screening purposes and will not be taken into consideration in any employment decisions.



CALIFORNIA: Under section 1786.22 of the California Civil Code, you may view the file maintained on you by ______ during normal business hours. You may also obtain a copy of this file, upon submitting proper identification and paying the costs of duplication services, by appearing at ______ offices in person, during normal business hours and on reasonable notice, or by mail. You may also receive a summary of the file by telephone, upon submitting proper identification. ______ has trained personnel available to explain your file to you, including any coded information. If you appear in person, you may be accompanied by one other person, provided that person furnishes proper identification.

NEW YORK: You have the right, upon request, to be informed of whether or not a consumer report was requested. If a consumer report is requested, you will be provided with the name and address of the consumer reporting agency furnishing the report. You may inspect and receive a copy of the report by contacting the agency.

MAINE: You have the right, upon request, to be informed of whether an investigative consumer report was requested, and if one was requested, the name and address of the consume reporting agency furnishing the report. You may request and receive from the Company, within five business days of our receipt of your request, the name, address, and telephone number of the nearest unit designated to handle inquiries for the consumer reporting agency issuing an investigative consumer report concerning you. You also have the right, under Maine law, to request and promptly receive from all such agencies copies of any such reports.

WASHINGTON STATE: If we request an investigative consumer report, you have the right, upon written request made within a reasonable period of time after your receipt of this disclosure, to receive from us a complete and accurate disclosure of the nature and scope of the investigation we requested. You also have the right to request from the consumer reporting agency a written summary of your rights and remedies under the Washington Fair Credit Reporting Act.