

**BEFORE THE NORTH CAROLINA UTILITIES COMMISSION
RALEIGH, NORTH CAROLINA**

**HOUSEHOLD GOODS CARRIER
ALTERNATIVE CRIMINAL HISTORY RECORDS CHECK FORM and
AFFIDAVIT**

NOTE: This Form and Affidavit are to be completed and submitted in compliance with Commission Rule R2-8.1(a)(3)(f), in those instances where the subject individual's fingerprints have been rejected by the U.S. Federal Bureau of Investigation (FBI) on at least two separate occasions because the quality characteristic of the individual's fingerprints is too low or otherwise inadequate for processing by the FBI and where on at least one of those occasions of rejection the fingerprints submitted to the FBI had been taken at a law enforcement agency.

In Re:

T- _____

Carrier's Name and Company Number T- _____

1. Name of Affiant: _____
First, Middle, Last, Suffix (e.g., Sr., Jr., II, etc.) (Print) Title/Position

2. Date of Birth: _____, Phone Number: (____) _____ - _____, and
Email Address: _____

3. Provide and mark as "Appendix 3" all correspondence from the FBI showing that on at least two occasions, the FBI rejected affiant's fingerprints because the quality characteristic of affiant's fingerprints, as submitted, was too low or otherwise inadequate for processing.

All Correspondence attached _____ YES or _____ NO (Check one.)

4. Provide receipt or other documentation (and mark as "Appendix 4") showing that, on at least one of the occasions where the FBI rejected affiant's fingerprints, a law enforcement agency such as a local police department, sheriff's office, or city/county bureau of identification took the fingerprints that affiant submitted to the FBI in an attempt to comply with Commission Rule R2-8.1

Receipt or other documentation attached _____ YES or _____ NO (Check one.)

Alternative Criminal History Records Check Form and Affidavit – Continued
Page 2

5. Provide the names of all of the states in the United States where affiant has lived in the preceding 10 years other than North Carolina, if any.

6(a). In the past 10 years, has affiant been convicted of any criminal offense including major traffic offenses?

___ YES or ___ NO (Check one.)

6(b). Does affiant have any criminal charges that are pending or that have not been finally dismissed and/or that may be reinstated?

___ YES or ___ NO (Check one.)

6(c). If affiant answered “YES”, to 6(a) and/or 6(b) above, please describe, in detail below, each and every criminal offense, pending charge, or charge that may be reinstated. In addition, include the name of the arresting/charging agency; approximate date of arrest/charge; sentencing court; date of sentence; sentence or penalty imposed; indicate whether affiant pleaded guilty or not guilty; and indicate if affiant is currently under any supervision by a court or department of corrections for each offense. If additional space is needed, please indicate below that affiant has enclosed such information and mark this enclosure as “Appendix 6(c).”

Alternative Criminal History Records Check Form and Affidavit – Continued
Page 3

7. If affiant has used different names, aliases, or social security numbers within the preceding 10 years, provide the different names, aliases, and social security numbers that affiant utilized within that period.

8. Please contact the North Carolina State Bureau of Investigation (SBI) and obtain a copy of affiant’s North Carolina criminal history record using the SBI’s Right to Review Process. Attach the results of the search (i.e., all original SBI response documents), including the “formal response letter on SBI letterhead indicating the findings of the Right to Review Process” and affiant’s criminal history record, if any, supplied by the SBI and mark as “Appendix 8”. (A copy of the Right to Review Request Form can be found at: http://www.ncdoj.gov/getdoc/97522fed-73d5-4549-9f2c-d804e90bc57a/Right-to-review_packet.aspx.) The SBI requires the submission of fingerprints in connection with this process. **To satisfy the Commission’s requirement in this regard, affiant’s fingerprints must be taken by a local law enforcement agency in order to ensure that good quality fingerprints are submitted to the SBI. Attach receipt or other documentation showing that the fingerprints submitted to the SBI were taken in that manner and mark as “Appendix 8-1.”** As of January 2011, the date of adoption of this requirement, the SBI’s fee for processing each criminal history records check is \$14. For more information on the Right to Review Request Form, the SBI can be reached at (919) 662-4509, extension 6266.
-

Alternative Criminal History Records Check Form and Affidavit – Continued
Page 4

VERIFICATION UNDER OATH REGARDING ACCURACY OF THE INFORMATION IN ITEM NOS. 1 THROUGH 8 OF THE AFFIDAVIT

(NOTE: THIS VERIFICATION SHALL BE COMPLETED BY THE INDIVIDUAL NAMED IN ITEM NO. 1, PAGE 1.)

Under the penalty of perjury,

I, _____ (print name), the affiant, am an applicant, sole proprietor, principal, partner, or member with respect to the above-referenced company and I state and attest that the information on this form and the attached information is filed on my behalf as required by the North Carolina Utilities Commission; that all of the information provided on this form and attached is true, correct, and complete; and that copies of any documents presented to the Commission as part of this information are genuine. This certification is made under oath and under penalty of perjury. To the best of my knowledge, information, and belief, all of the information contained herein and attached is accurate and true, no material information or fact has been knowingly omitted or misstated. (Note: Providing false information to the Commission is punishable by fine and/or imprisonment pursuant to N.C.G.S. 62-310 and N.C.G.S. 62-326.)

Signature of Person Making Verification
(Affiant)

Title

Date

Subscribed and sworn before me this the _____ day of _____,

Notary Public Signature

Printed Name of Notary

My Commission Expires: _____

*This Form and Affidavit, including attachments, (original and two copies) should be returned to the North Carolina Utilities Commission, Chief Clerk's Office, 4325 Mail Service Center, Raleigh, NC 27699-4325. Each page of the original and all copies should be clearly marked **CONFIDENTIAL**.*