

Santa Barbara Police Department
Clearance Letter Request

Please Print Legibly

Name of Requestor: (Person filling out form)

Name of person requiring a clearance letter: (If different from the requestor)

Mailing Address (Address/City/State/Zip) <i>The clearance letter will be sent to this address</i>

Phone #

Other names legally used: maiden name, legal name change, etc.	Birth Date

X	
Requestors Signature	Today's Date

Instructions

Complete the form with all required information and mail the completed form along with a photocopy of valid government issued identification and payment to:
Santa Barbara Police Department, 215 E Figueroa St, Santa Barbara, CA 93101
Payment of \$10 must be made to *City of Santa Barbara* in the form of check or money order.
Questions? Call (805) 897-2355

Official Use Only – Do Not Write Below This Line

Request Received: Date: _____ Received By (Name & Body #): _____

ID Verified(Name & Body #): _____ Letter By (Name & Body #): _____ Date: _____

Letter mailed through USPS: