IMPERIAL COUNTY SHERIFF'S OFFICE

P.O. BOX 1040 - 328 APPLESTILL ROAD
EL CENTRO, CALIFORNIA 92243-1040
(442) 265 2125

LOCAL CRIMINAL HISTORY REQUEST

California Penal Code Sections 13300 through 13326 authorize the release of *local summary criminal history information* to the subject of the criminal history, as well as to other persons and agencies authorized by law. For purposes of this notice, *local summary criminal history* refers only to arrest records compiled by the Imperial County Sheriff's Office.

(Please Print)

Date of Request: _____

Applicant Name: _____
Last Name *First Name* *Middle*

Date of Birth: _____ Height: _____ Weight: _____ Hair: _____ Eyes: _____

Driver's License: _____ Social Security Number: _____

Alias Name(s): _____

Address: _____ Phone Number: _____

City: _____ State: _____ Zip Code: _____

Place of Birth: _____

_____ Date: _____
Applicant Signature

Mail ☐ Pick up ☐ Email ☐

For verification purposes, please attach one of the following

California Photo ID/DL # _____

Other State Photo ID/DL # _____

Passport Photo ID # _____

(Office use only)

Received by: _____ Date: _____

Amount Due: ❑ $58.00 (No Record) ❑ $87.00 (Criminal Record)

Receipt Number: _____

Completed by: _____ Date: _____

Right Index

Office use only

Rev: 07/30/26