

**UNION POLICE DEPARTMENT**  
Certification of Child Related Business

Business Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

1. Names submitted as owners, managers, and operators:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

2. I hereby verify that this business does qualify as a “child-related” business in accordance with Section 605 of the Union Code of Ordinances. I further verify that as such, the owner, manager, and operator of said business have supplied all material(s) required by the City’s Code of Ordinances and as a result of my review of the material(s) submitted, I hereby certify that the business license for which this applicant has applied herein may be issued in accordance with Section 605 of the Union Code of Ordinances.

\_\_\_\_\_  
Chief of Police or Representative

\_\_\_\_\_  
Date

3. I hereby verify that this business does qualify as a “child-related” business in accordance with Section 605 of the Union Code of Ordinances. I further verify that as such, the owner, manager, and operator of said business have supplied all materials(s) required by the City’s Code of Ordinances and as a result of my review of the material(s) submitted, **I hereby direct the City Clerk, at the request of the applicant, to schedule a hearing before the Union Board of Alderman during which the applicant shall be given the opportunity to present reason(s) why the license should be issued.**

\_\_\_\_\_  
Chief of Police or Representative

\_\_\_\_\_  
Date



Union Police Department  
 City of Union, Missouri  
 Background Check Consent Form  
 Union Business License

Name of Business:
Contact Phone Number:

**PLEASE NOTE:** One completed form is required for each owner, manager and/or operator of business.

In relation to the business license being applied for I am the:

- Owner       Manager       Operator      (Check all that apply)

Last Name	First Name	Middle Name	Maiden Name
Prior Names Used			
Social Security Number	Date of Birth	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Telephone Number
Street Address (Home)	City	State	Zip Code

**SECTION 605.065: CHILD RELATED BUSINESSES**

Any applicant who desires to obtain a permit for a business license intended to or could reasonably expect to serve or attract minors shall, in addition to all other requirements of this Chapter, be subject to a criminal background check. Any such applicant shall provide the consent of the owner, manager and operator of the business to obtain a criminal history to the City Clerk at the time the application is filed. Such consent shall be forwarded to the Chief of Police for the purpose of performing a criminal history check. The Chief of Police shall submit to the City Clerk his recommendation for approval with respect to all applications which have no criminal history reported or which do not reflect a criminal history which would cause concern regarding involvement with minor children. In those instances wherein the criminal history of an applicant causes concern to the Chief of Police, the Chief of Police shall so notify the City Clerk

The information provided herein is complete and accurate to the best of my knowledge. I grant my permission for the Union Police Department to obtain any and all background information to process this request. Furthermore, I authorize the Union Police Department to use any information discovered as a result of the background check to determine whether there is anything contained therein which may cause concern relative to issuance of the City of Union Business License. I understand that if any information is discovered which may cause issuance of a City of Union Business License questionable, I have the right to a hearing before the Union Board of Aldermen pertaining to said application. In addition, I hereby hold the City of Union and the Union Police Department harmless in it's use of materials discovered as a result of the background check I am authorizing.

Signature of Applicant (Required in ink)	Date
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