



Fairview Police Department
Information for Letter of Good Conduct



Date: _____

Name: Last _____ First _____ MI _____

Social Security: _____ - _____ - _____

Date of Birth: month _____ date _____ year _____

Proof of Identification (attach a photo copy with request):

Driver License: state _____ number _____

Resident Alien: _____

Passport: _____

Other: _____

Current Address: _____

Date arrived in Fairview: month _____ date _____ year _____

Date moved from Fairview: month _____ date _____ year _____

Arrest date(s) _____

Arrest location(s) _____

Best contact phone number: _____