

**AUTHORIZATION FOR CRIMINAL BACKGROUND CHECK**

For and in consideration of my/our applying for ownership or renting in Strawberry Square, Inc., to make inquiries to SARMA Background Screening, a consumer reporting agency, of any public record of any conviction or dishonesty. The fee for this is \$18.25 per person for the background check. If Canadian, the cost is \$30.00 per person. Made payable to Strawberry Square Inc. and mailed to 4401 Promenade Blvd. Plant City, FL 33563. Please include a copy of your DL in the mailing as well.

I/We further authorize any government agency where such conviction information is on file or any company where such incident occurs and SARMA Background Screening to disseminate such reports.

I/We have been informed and understand that I/We may obtain a copy of such report and that I/We may dispute the accuracy or completeness of the information reported to Strawberry Square, Inc., to do so please write or call SARMA Background Screening at the address or telephone number listed below.

Full Name \_\_\_\_\_  
Address \_\_\_\_\_  
City, ST, Zip \_\_\_\_\_ County \_\_\_\_\_  
DOB \_\_\_\_\_ SSN \_\_\_\_\_  
DL# \_\_\_\_\_ DL State \_\_\_\_\_ Expire Date \_\_\_\_\_  
Email \_\_\_\_\_ Phone Number \_\_\_\_\_

X \_\_\_\_\_  
Signature of Applicant (1) \_\_\_\_\_ Date \_\_\_\_\_

Full Name \_\_\_\_\_  
Address \_\_\_\_\_  
City, ST, Zip \_\_\_\_\_ County \_\_\_\_\_  
DOB \_\_\_\_\_ SSN \_\_\_\_\_  
DL# \_\_\_\_\_ DL State \_\_\_\_\_ Expire Date \_\_\_\_\_  
Email \_\_\_\_\_ Phone Number \_\_\_\_\_

X \_\_\_\_\_  
Signature of Applicant (2) \_\_\_\_\_ Date \_\_\_\_\_

Full Name \_\_\_\_\_  
Address \_\_\_\_\_  
City, ST, Zip \_\_\_\_\_ County \_\_\_\_\_  
DOB \_\_\_\_\_ SSN \_\_\_\_\_  
DL# \_\_\_\_\_ DL State \_\_\_\_\_ Expire Date \_\_\_\_\_  
Email \_\_\_\_\_ Phone Number \_\_\_\_\_

X \_\_\_\_\_  
Signature of Applicant (3) \_\_\_\_\_ Date \_\_\_\_\_