



STATE OF SOUTH CAROLINA DEPARTMENT OF CONSUMER AFFAIRS



PAWNBROKER THIRD PARTY CRIMINAL BACKGROUND CHECK ATTESTATION

Mailing Address
P.O. Box 5757
Columbia, SC 29250-5757

S.C. Code Ann. § 40-39-20(C)(1)(a)
www.consumer.sc.gov
803-734-4249/800-922-1594

Street Address
2221 Devine St., Ste. 200
Columbia, SC 29205-2418

Business Name _____

Location Name/DBA _____

IMPORTANT: Print legibly or type information requested on this form in its entirety. Illegible or faxed applications will not be accepted. Attach additional sheets as necessary. If the third party that conducted the criminal background check (CBC) was Identigo, leave the last column about felony conviction blank. **The date the CBC was obtained MUST be after June 9, 2016.**

Name	Job Title (owner, employee, etc.)	Date Background Check Obtained	Name of Third Party Who Conducted Background Check	Has person been convicted of a felony on or after 7/1/1988?

I attest that a national criminal records check has been completed for each person listed above. I swear or affirm and certify that all information contained in this form and any attachments to this form is true, accurate, and complete. I also understand that for purposes of verifying results of background checks done by a third party other than Identigo, I must keep a copy of each background check in a secure manner.

Signature _____

Title _____

Print Name _____

Date _____