



**INSTRUCTIONS FOR COMPLETING THE
CONSENT FOR DISCLOSURE OF CRIMINAL RECORD INFORMATION FORM
FOR THE PURPOSE OF LIQUOR LICENSING
(RMCP GRC 3584)**

Attached is the Consent for Disclosure of Criminal Record Information Form. If you have any questions about completing this form, please call the Liquor Control and Licensing Branch (LCLB) toll-free at 1-866-209-2111.

Instructions:

Part 1 – Complete all boxes that apply to you.

Part 2 – Enter “LCLB” in the box labelled “Name of organization” and leave the remaining boxes empty.

Part 3 – Read the Waiver & Release portion before signing Part 4.

Part 4 – Sign and date the form.

Part 5 – Read the introductory information.

Initial the boxes under the heading "initials" beside numbers 1 - 4.

Please submit your completed form to the Liquor Control & Licensing Branch (address below) for processing.

**Ministry of Public Safety
and Solicitor General**

Liquor Control and
Licensing Branch

Mailing Address:
PO Box 9292 Stn Prov Govt
Victoria BC V8W 9J8
Telephone: 250 952-5787
Facsimile: 250 952-7066

Location:
Fourth Floor, 3350 Douglas St
Victoria BC V8Z 3L1

www.pssg.gov.bc.ca/lclb



Royal Canadian
Mounted Police

Gendarmerie royale
du Canada

CONSENT FOR DISCLOSURE OF CRIMINAL RECORD INFORMATION

PART 1

IF COMPLETED MANUALLY, PLEASE PRINT

Surname		Given name (1)		Given name (2)		Sex <input type="checkbox"/> M <input type="checkbox"/> F		Tel. no. (incl. area code)	
Address (no., street, apt.)			City		Province		Postal code		
Date of birth (yyyy-mm-d)		Place of birth		Driver's licence no.		Usual first name or alias		Maiden name/Any other Surname	
Previous address if less than 5 years at current address									
Address (no., street, apt.)			City		Province		Postal code		

PART 2

Pursuant to Section 8(1) of the Privacy Act of Canada, I hereby authorize the Royal Canadian Mounted Police to disclose my personal information to:

Full name		Title		Name of organization				
Address (no., street, apt.)			City		Province		Postal code	

PART 3

WAIVER AND RELEASE:	
I hereby release and forever discharge Her Majesty the Queen in Right of Canada, the Royal Canadian Mounted Police, their members, employees, agents and assigns from any and all actions, causes of actions, claims and demands for damages, loss or injury, which may hereafter be sustained by myself, howsoever arising out of the above authorized disclosure of information and waive all rights thereto.	

PART 4

This consent is valid for a period of three months from the date of signature.	
Signed this _____ day of _____	Signature of applicant _____

PART 5

Following is information contained in the records of the RCMP or records from other police forces accessible through computer queries and is based on a name and date of birth check only. ****A record may or may not exist** for the subject of this inquiry, positive identification and a certified criminal records check can only be obtained through a fingerprint check. This can be made with the submission of a complete set of fingerprints to:

INFORMATION AND IDENTIFICATION SERVICES
CANADIAN CRIMINAL RECORD INFORMATION SERVICES
1200 Vanier Parkway
OTTAWA, ONTARIO K1A 0R2

YOUNG OFFENDER INFORMATION - The Youth Criminal Justice Act/Young Offenders Act make it an offence to disclose young offender information. In cases where an adult's record contains young offender information or a young offender requests a copy of his/her criminal record, the criminal record information **MUST** be given to the requester. Individuals can disclose their own information, but even with consent the RCMP are not legally permitted to disclose young offender information.

INSTRUCTION TO REQUESTERS: The following section contains varying degrees of police information.

- Confirm with the party identified in PART 2, the exact information they require.
- Choose the category which best symbolizes the information you are providing consent for the RCMP to disclose and place your initials in the appropriate INITIALS box.
- The party identified in PART 2 will be advised accordingly of negative checks.
- Checks resulting in possible "hits" for information identified in categories 1, 2 or 3 will require confirmation by the submission of fingerprints.
- You will be required to confirm that information located through the checks stipulated in category 4, is your personal information.
- You may withdraw this consent prior to disclosure.

No.	Initials	Category of Information for Disclosure	FOR POLICE USE ONLY
1.		Records of criminal convictions found in the Identification Data Bank attainable through the Canadian Police Information Centre (CPIC) for which a pardon has not been granted. RCMP: Make CPIC Criminal Record "LEVEL 1" Query ONLY.	<input type="checkbox"/> None located <input type="checkbox"/> ** May or may not exist
2.		Records of criminal convictions attainable through CPIC for which a pardon has not been granted plus records of outstanding criminal charges which the RCMP are aware of or indicated within the Investigative Data Bank of CPIC. RCMP: Make CPIC Criminal Record "LEVEL 1" Query AND a Persons CPIC Query.	<input type="checkbox"/> None located <input type="checkbox"/> ** May or may not exist
3.		Records of criminal convictions and summary of police information (including records of outstanding criminal charges which the RCMP are aware of or indicated within the Investigative Data Bank of CPIC) attainable through CPIC for which a pardon has not been granted plus records of discharges which have not been removed from the Identification Data Bank in accordance with the Criminal Records Act. This will include all charges regardless of disposition. RCMP: Make CPIC Criminal Record "LEVEL 2" Query AND a Persons CPIC Query.	<input type="checkbox"/> None located <input type="checkbox"/> ** May or may not exist
4.		Police information located on computer systems (e.g. Police Information Retrieval System (PIRS), CPIC, PROS, PRIME, LEIP) and information located through local police indices checks. This will include all information related to non convictions and all charges regardless of disposition. RCMP: Make Persons Queries on PIRS, CPIC, PROS, PRIME and LEIP. In view of the general nature of this information, confirm with requester this is in fact information pertaining to him/her. Requesters MUST confirm information which pertains to them prior to disclosure. If a discrepancy exists, do not disclose this information.	<input type="checkbox"/> None located <input type="checkbox"/> ** May or may not exist

COMPLETED BY

Member (signature)		Reg. no.		Unit		Date	
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