

LANDLORD/TENANT RECORD CHECK

TO: Madison Police Department
Fax to 608- 267- 1117

Full Name: _____ Other Names Used: _____

Address: _____ Date of Birth: _____

_____ Race: _____ Sex: M F

Drivers License #: _____ State of Issue: _____

Social Security #: _____

City of Madison Arrests or Citations

Wisconsin Criminal Arrests

Wisconsin Circuit Court Information

Requester: _____

Date: _____

Company: _____

Address: _____

FEE \$8.00 PER NAME

Telephone #: _____

Mail _____ Fax _____

Fax #: _____

Pick up _____ Email _____