



JUDICIAL DEPARTMENT - MAGISTRATES' COURT  
DAME LOIS BROWNE EVANS BUILDING, 58 COURT STREET HAMILTON HM 12, BERMUDA

**RECORD REQUEST FORM**

Receipt # \_\_\_\_\_

I hereby request copies of **CRIMINAL** convictions (if any) for the period:

**Please check one box**

3 years to present     5 years to present     7 years to present

from 1996 to present

**Please Print Below**

Full Name: \_\_\_\_\_  
*First Middle Name(s) Last*

Maiden Name: \_\_\_\_\_

Date of Birth (DD/MM/YYYY) : \_\_\_\_\_  
*Spell out Month*

Current Address: \_\_\_\_\_

Previous Address \_\_\_\_\_

Passport #: \_\_\_\_\_ Drivers Licence # \_\_\_\_\_

Phone Contact #'s Cell \_\_\_\_\_ Home \_\_\_\_\_

**I will Collect:** \_\_\_\_\_

**I authorize:** \_\_\_\_\_ to collect on my behalf.

*I understand that the research for this information takes approximately fifteen (15) working days, together with an administrative fee of \$10.00 per application.  
Valid Color Photo ID is required.*

Signed \_\_\_\_\_ Dated \_\_\_\_\_