



**JUNEAU POLICE DEPARTMENT  
CLASS C DRIVER'S PERMIT  
APPLICATION**

City and Borough of Juneau, Alaska  
Juneau Police Department  
6255 Alaway Ave, Juneau, AK 99801  
Ph (907) 586-0600

| FOR POLICE DEPARTMENT USE ONLY                |              |                          |
|---|--------------|--------------------------|
| Reviewer:                                     | Comments:    |                          |
| Approved Yes ( ) No ( )                       | Date:        | Date Denial Letter Sent: |
| Fee Collection Receipt Number:                | Received By: |                          |
| Amount Received:                              | Taken By:    |                          |
| Date Photos Taken:                            | Taken By:    |                          |
| Date Fingerprints Taken:                      | Taken By:    |                          |
| REQUIRED ATTACHMENTS                          |              |                          |
| Driving Record: Yes ( ) No ( ) Date Received: |              |                          |
| Permit Number:                                | Issue Date:  | Issued By:               |

**\*\*PLEASE TYPE OR PRINT ALL INFORMATION\*\***

| <b>Personal Information</b> | First Name   | Middle Name               | Last Name                 |              |
|-----------------------------|--|---------------------------|---------------------------|--------------|
|                             | Social Security Number   | Operator's License Number | License Issuing State     |              |
|                             | Driving for what company?  |                           |                           |              |
|                             | Date of Birth  |                           | Place of Birth            |              |
|                             | Height   | Weight                    | Hair Color                | Eye Color    |
|                             | Current Place of Employment  |                           |                           |              |
|                             | Employer Name  | Address                   |                           | Phone Number |
|                             | Are you a natural born or fully naturalized citizen of the United States? Yes ( ) No ( ) |                           |                           |              |
|                             | Where did you obtain your visa?  | Date of Entry into U.S.   | Alien Registration Number |              |
|                             | <b>Contact Information</b>   | Contact Information       |                           |              |
| Mailing Address             |  |                           |                           |              |
| City                        |  | State                     | Zip                       |              |
| Phone Number                |  | Cell Phone Number         | E-mail Address            |              |
| Physical Residence          |  |                           |                           |              |
| City                        |  | State                     | Zip                       |              |

**Under penalty of perjury, I attest that to the best of my knowledge that the information provided on this application is true and correct.**

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

| Physical Residence Last Ten Years |                |      |       |     |
|-----------------------------------|----------------|------|-------|-----|
| Dates of Residence                | Street Address | City | State | Zip |
|                                   |                |      |       |     |
|                                   |                |      |       |     |
|                                   |                |      |       |     |
|                                   |                |      |       |     |
|                                   |                |      |       |     |

| Employment History Last Five Years |            |          |         |
|------------------------------------|------------|----------|---------|
| Dates of Employment                | Occupation | Employer | Address |
|                                    |            |          |         |
|                                    |            |          |         |
|                                    |            |          |         |
|                                    |            |          |         |
|                                    |            |          |         |

| Licensing and Professional Driving History   |             |           |
|--|-------------|-----------|
| Have you ever held a cab driver's permit, chauffer's license or a Professional Driver's Permit?    Yes ( <input type="checkbox"/> )    No ( <input type="checkbox"/> ) |             |           |
| If Yes, Date(s):   | City/State: |           |
| Has such a permit or license ever been suspended or revoked?    Yes ( <input type="checkbox"/> )    No ( <input type="checkbox"/> )                                    |             |           |
| If Yes, when   | Where?      | How long? |

| Conviction History and Pending Charges  |
|---|
| Have you ever been convicted of a felony?    Yes ( <input type="checkbox"/> )    No ( <input type="checkbox"/> )<br>If yes, please list the crime(s) and dates for all such conviction(s):  |
|   |
| Have you ever been convicted or forfeited bail for a misdemeanor, including moving traffic offenses, during the past 10 years?    Yes ( <input type="checkbox"/> )    No ( <input type="checkbox"/> )<br>If yes, please list the offense(s) and the dates for all such conviction(s) or bail forfeiture(s): |
|   |
| Do you have any felony charges pending against you at this time?    Yes ( <input type="checkbox"/> )    No ( <input type="checkbox"/> )<br>If yes, please list the crime(s) for all such pending felony charges:  |
|   |
| Do you have any misdemeanor offenses, including moving traffic, pending at this time?    Yes ( <input type="checkbox"/> )    No ( <input type="checkbox"/> )<br>If yes, please list the offense(s) for all such pending misdemeanor or moving traffic offense(s):   |
|   |

|  |
|--|
| <b>Required Attachments:</b><br>Alaska Business License<br>Applicant Statement of Understanding of CBJ Code Section 20.40 & CBJ CPV Regulations 20 CBJAC 40.<br>Original Driver's License Records obtained from the Div. of Motor Vehicles |
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Background Information