

Criminal Charges/Conviction Attestation

Occupational Licensing and Registration Division

Note: To complete form, you must first save this document to your computer. (attach additional pages as necessary)

Section I: Basic Information

TCEQ License #(if known)	Last Name	First Name	Middle N	Name	Suffix
Last 4 of SSN Email Address		Date of Birth (MM/DD/YYYY)		Maiden/Ot	her Names

Please check one of the following boxes:

I attest that I have **<u>never</u>** been arrested or received a criminal conviction, deferral or dismissal. (*If this box is checked, skip Sections II & III and sign and date the form.*)

I have previously submitted a Criminal Charges/Conviction Attestation **with the TCEQ** and my criminal history has not changed since the last submittal.

I have been arrested or received a criminal conviction and have attached a Texas DPS report orcourt documents attesting to the criminal history.

I request to use the Fingerprint Search to document my criminal history.

I am currently subscribed to the agency's fingerprint option.

I have been arrested or received a criminal conviction and my history is listed in Section II/III.

Section II: Conviction Information*

(List all convictions, including deferred or dismissed cases, above a Class C Misdemeanor regardless of age.)

Date Convicted (Required) Convicted Offense(s) (Required)					
Docket Number (if kn	own)		Trial Date (if known)		
Court Where Convic	ted (if known) Co	ourt Mailing Add	ress (if known)		
City (Required)	State	County	ZIP	Phone Number (xxx) xxx-xxxx	
Section III: Arrest Information*					
(List all arrests, regardless of age)					
Date of Arrest/Charge (<i>Required</i>) Charged Offense(s) (indicate felony or misdemeanor and class)					
County and/or Court where Charges are Pending (Required)					
Docket Number (if kn	own)		Trial D	ate (if known)	
Name of Arresting Agency (if known) Arresting Agency Mailing Address (if known)					

State	County	ZIP	Phone Number (xxx) xxx-xxxx
	State	State County	State County ZIP

I affirm that the above information is true and correct. I understand that fraudulent or falsified information could result in denial of this application pursuant to Tex. Admin. Code § 30.33 or revocation of my license pursuant to Tex. Water Code § 7.303.

Typing your name on the signature line below constitutes an electronic signature and is legally equivalent to your written signature.

Signature	Date
TCEQ Staff use only: No ERC Required	Eligible/Previously Eligible by ERC (# & Date)
Admin Approved ERC (Date) Other

Section I: Basic Information

License Program – TCEQ License type for which you want to apply. Last Name/First Name - as it appears on your Government-issued ID M.I. - as it appears on your Government-issued ID Suffix - Jr., Sr., III, etc., as it appears on your Government-issued ID Last 4 of SSN - Last 4 digits of your Social Security Number Email Address - email address at which we can contact you Date of Birth - MM/DD/YYYY (ex: 04/01/1978), as it appears on your Government-issued ID

Section II: Conviction Information - (List all convictions, including deferred or dismissed cases, above a Class C Misdemeanor, regardless of age.)

Date Convicted - date of guilty verdict (MM/DD/YYYY)

Offense(s) List all convictions, dismissals, and deferred cases. Convicted Of - List all offenses of which you were convicted. Include the class and level of charge — for example, First Degree Felony or Class C Misdemeanor.

Docket Number - What is the number of your court proceedings? **Trial Date** - When was your trial (MM/DD/YYYY)? **Court Where Convicted** - ex: Travis County Court # 3 **Court Mailing Address/City/State/ZIP+4/Phone Number**

Section III: Arrest Information - (List all arrests, regardless of age.)

Date Arrested or Charged - date of arrest or court appearance (MM/DD/YYYY)

County and/or Court, Address, Phone #, Where Charges are Pending - ex: Travis County Court # 3 **Offense(s) Charged With (indicate felony or misdemeanor and class)** - List all offenses you have been charged with here. Include the class and level of charge — for example, "Class A Felony" or "Class C Misdemeanor."

Docket Number - What is the number of your court proceedings?

Trial Date - What is your trial date (MM/DD/YYYY)

Name of Arresting Agency - What law enforcement agency arrested you?

Arresting Agency Mailing Address/City/State/ZIP+4/Phone Number

*If you cannot recall arrest(s) or conviction(s), you may go to one of the websites below and purchase a report to submit along with this signed form. You must also attest to any criminal arrest or conviction outside the state of Texas.

- To locate websites for courts in Texas, visit the jurisdiction map with the County/ District number index: <u>https://card.txcourts.gov/DirectorySearch.aspx</u>
- Texas Department of Public Safety Public Criminal History Search: https://publicsite.dps.texas.gov/ConvictionNameSearch/

Contact Information:

Mailing Address:

Occupational Licensing Section, MC-178 P.O. Box 13087 Austin, TX 78711-3087 Phone: (512) 239-6133 Email: <u>licenses@tceq.texas.gov</u> Webpage: <u>www.tceq.texas.gov/licensing</u>

Please submit this form to licenses@tceq.texas.gov or the mailing address above.