

**BOSSIER CITY POLICE DEPARTMENT  
ABO APPLICATION**

ANSWER ALL QUESTIONS ON BOTH SIDES

CASE # \_\_\_\_\_

DATE: \_\_\_\_\_

NAME: LAST: \_\_\_\_\_ FIRST: \_\_\_\_\_ MIDDLE: \_\_\_\_\_

PHYSICAL ADDRESS: \_\_\_\_\_ APT #: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

DOB: \_\_\_\_\_ AGE: \_\_\_\_\_ PLACE OF BIRTH (CITY/STATE): \_\_\_\_\_

SS# \_\_\_\_\_ PHONE: \_\_\_\_\_

D/L# / ID#: \_\_\_\_\_ STATE: \_\_\_\_\_ HEIGHT: \_\_\_\_\_ FT \_\_\_\_\_ IN WEIGHT: \_\_\_\_\_ LBS

RACE: \_\_\_\_\_ SEX: \_\_\_\_\_ EYE COLOR: \_\_\_\_\_ HAIR COLOR: \_\_\_\_\_

Other names used, including maiden name, previous marriages, and nicknames or stage names:

LAST

FIRST

PLACE USED

DATE USED

\_\_\_\_\_

NAME OF BUSINESS WHERE APPLYING AND POSITION: \_\_\_\_\_ BUSINESS PHONE: \_\_\_\_\_

ADDRESS OF BUSINESS WHERE APPLYING

\_\_\_\_\_

**LIST ALL ARRESTS *EXCEPT TRAFFIC OFFENSES* REGARDLESS OF CONVICTION:  
(ARRESTS LEFT OFF CAN RESULT IN DENIAL OF APPLICATION)**

CHARGE

WHERE

DATE

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

MARITAL STATUS: MARRIED: \_\_\_\_\_ SINGLE: \_\_\_\_\_ SEPARATED: \_\_\_\_\_ DIVORCED: \_\_\_\_\_

ARE YOU A CITIZEN OF THE U.S.? \_\_\_\_\_ YES \_\_\_\_\_ NO

ARE YOU A RESIDENT OF THE STATE OF LOUISIANA: \_\_\_\_\_ YES \_\_\_\_\_ NO

HOW LONG HAVE YOU RESIDED AT YOUR CURRENT ADDRESS? \_\_\_\_\_

Have you ever been arrested for a felony under the laws of the U.S., the State of Louisiana, any other state or country?  YES  NO If yes, explain: Include offenses, location, date and disposition

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ARE YOU ON PROBATION?  YES  NO

NAME OF PROBATION OFFICER: \_\_\_\_\_

OFFENSE: \_\_\_\_\_

LOCATION OF PROBATION OFFICER: \_\_\_\_\_ CITY \_\_\_\_\_ STATE

BEGINNING PROBATION DATE: \_\_\_\_\_ ENDING PROBATION DATE: \_\_\_\_\_

Have you ever been arrested for any the followings acts in this state or country: soliciting for prostitution, pandering, letting the premises for prostitution, contributing to the delinquency of juveniles, keeping a disorderly place, letting a disorderly place, **illegal use or sale of any illegal narcotic, dangerous drug, marijuana or any other controlled substance** or b-drinking?  YES  NO If yes, explain: \_\_\_\_\_

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Have you ever been arrested for violating any provisions of Federal, State or Municipal Alcoholic Beverage Laws?

YES  NO If yes, what was disposition: \_\_\_\_\_

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Have you ever had an Alcoholic Beverage Handling Card to dispense alcohol beverages issued by this City or any other municipality, parish or state, suspended or revoked?  YES  NO If yes, explain: \_\_\_\_\_

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The undersigned applied for an Alcoholic Beverage Handling Card to dispense alcohol beverages of law and/or high alcohol content on the premises of any business licensed under section 3-31

**I certify that I have read each of the questions in this application and that the answers which I have given are true and correct to the best of knowledge; furthermore, I understand that any misstatement or suppression of fact in this application shall be grounds for denial, suspension, or revocation of my Alcoholic Beverage Handling Card and punishable according to law.**

SIGNATURE OF APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_

APPROVED / DENIED: \_\_\_\_\_ DATE: \_\_\_\_\_

AUTHORIZED AGENT