



Darien Police Department

Solicitor Checklist

Date: _____
Solicitor ID #: ____--_____

Yes	No	N/A	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	RMS check
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SPRC check (printout)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Local state check (printout)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Warrant check (in state and out)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PRAWN check
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	TLO
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Copy of vehicle registrations
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Copy of CT Sales Tax Permit
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Copy of Certificate of Insurance
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Vehicle's run through COLLECT
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fingerprint taken
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Photograph taken
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Photo ID provided and copied
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Checks made payable to Darien Police Department
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Instructions given, initialed, and understood
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Application filled out in full