

HONS INVESTIGATIONS

Background Check Report

The information in this report is secured and processed by fallible sources (human and otherwise) and that for the fee charged, Hons Investigations cannot be either an insurer or guarantor of the accuracy of the information reported; although we have searched available records in the areas where the applicant has been known to reside, it is possible that there are other areas the applicant resided that we are not aware of, or the applicant could have a criminal record in an area they did not reside, and therefore was not researched by us. This is not a guarantee that the applicant does not have a criminal record, only a due diligence attempt to find any records in places they would MOST LIKELY be found.

CLIENT: ABC COMPANY

Address: PO BOX 9999, ANYTOWN, USA

PHONE: 701-555-5555

FAX: 701-555-1111

CONTACT PERSON: Diane - Human Resources

APPLICANT INFORMATION

File Number: 05-1688B
Full Name: JOHN DOE JONES
AKA Name:
DOB: 8/27/1984
SSN: 502-06-XXXX
Drivers License: JON-84-XXXX
Address: 9999 ANYSTREET, CITY, STATE ZIP
Phone:
Date Submitted: 11/23/05
Date Complete: 11/25/05

SEARCH INFORMATION

			COST
Social Security Trace Completed	YES		\$ 6.00
Adverse Information Found:	NO		
If yes, what:	_____		
County:	Grand Forks Co, ND - Crim	HIT	\$ 10.00
County:	Grand Forks Co. ND - Civ	CLEAR	\$ 10.00
County:	Trail Co. ND - Crim.	CLEAR	\$ 15.00
County:	Trail Co. ND - Civil	CLEAR	\$ 15.00
County:	Polk Co. MN - Crim	CLEAR	\$ 10.00
County:	Polk Co. MN - Civl	CLEAR	\$ 10.00
County:			
State:	NORTH DAKOTA	CLEAR	\$ 20.00
State:	MINNESOTA	CLEAR	\$ 10.00
State:			
DMV HIS	NORTH DAKOTA	see atch	\$ 10.00
Other:	ND SEX OFFENDER	CLEAR	\$ 5.00
Other:	CREDIT REPORT	see atch	\$ 15.00

TOTAL COST: \$ 136.00

HONS INVESTIGATIONS COMMENTS:

GRAND FORKS CO RESULTS:

05-K-xxxx
8/7/05 MINOR IN POSS / B MISD.
8/17/05 CONVICTED - GUILTY - 1 YR UNSUP PROB. \$225 FINE, COMPLETE CHEMICAL DEPENDANCY PROGRAM

04-k-XXXX

1/13/04 DRIVING WITHOUT LIABILITY INSURANCE B MISD.
2/2/04 GUILTY - \$400 FINE, 1YR UNSUP PROB.

In the event an employer plans to take any adverse action based wholly or in part upon information contained in this consumer report, the FCRA requires employers to make certain notifications to the applicant or employee. For employment purposes, an "adverse action" means either 1) a denial of employment of 2) any other decision for employment purposes that adversely affects and current or prospective employee. The FCRA requires and employer to provide a copy of the consumer report to the applicant or employee and provide the applicant or employee with a copy of his/her rights under the FCRA (the "Summary of Rights Under the FCRA") before taking adverse action based upon information contained in the consumer report. After the employer takes adverse action, the employer must provide the applicant or employee with notice of the following: 1) The name, address, and telephone number of the consumer reporting agency issuing the report, 2) A statement that the consumer reporting agency did not make the adverse decision and is not able to explain why the adverse decision was made, 3) A statement regarding the applicant or employee's right to obtain a free disclosure of the applicant or employee's file from the agency if the applicant or employee requests the report within 60 days of notice of the adverse action, and 4) A statement regarding the applicant or employee's right to dispute directly with the consumer reporting agency the accuracy or completeness of any information provided by the agency.

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