

Judicial Council of Georgia

CERTIFIED PROCESS SERVER RENEWAL APPLICATION

1.	(Last Name)	(First Name)	(Middle Initial)
2.	Address		
	City	State	Zip Code
3. W	ork Telephone ()	4. Alternate Telep	hone ()
5. Da	ate of Birth	6. Race (optional)	7. Gender (optional)
8. Er	nail address		
	re you now, or have you es No	ever been, licensed to carry	a firearm in this or any other state?
	_	onal sheets as necessary):	rresponding license number, and the
	-		ederal licensing agency or authority
grant traffi drug polic	ted first offender treatm ic violation or (2) any tr s, homicide or feticide l	ent upon being charged with raffic violation that involved copy vehicle, fleeing the scene of	tea of nolo contendere to, or been (1) any criminal offense other than a driving under the influence of alcohol or of an accident, attempting to elude a r? Yes No (If yes, please attach
accor the co respe	npanying forms are true, c ertifying sheriff or Georgia ect are grounds for denial o	omplete, and correct. I understar Sheriff's Association finds to be	ication and any attached explanations and ad that any information provided by me that false, incomplete, or misrepresented in any after certification, are grounds for ion of my certificate.
Sign	ature	Dat	e
O C O C Cove O C	opy of the annual commerage opy of Certified Proces opy of Driver's License	s Server ID card	ur Continuing Education f Errors and Omissions Insurance
		fingerprint based criminal based	ckground check