



Forsyth County General Services Department
201 N. Chestnut Street
Winston-Salem, NC 27101
hoj.ids@gmail.com
(336) 703-2200

APPLICATION FOR COUNTY ISSUED HALL OF JUSTICE IDENTIFICATION BADGE
TEMPORARY

REASON FOR APPLICATION:	RENEWAL	LOST	NEW		
NAME OF APPLICANT:	<hr/>				
	Last	First	M.I.		
EMAIL ADDRESS:	<hr/>				
FIRM NAME:	<hr/>				
	PHONE # <hr/>				
BUSINESS ADDRESS:	<hr/>				
	<hr/>				
HOME ADDRESS:	<hr/>				
	<hr/>				
COUNTY LOCATION:	Forsyth	Davie	Davidson	Guilford	Rockingham
Check All that apply	Stokes	Surry	Yadkin		
If none of the above counties apply specify County location: <hr/>					
TIME PERIOD BADGE REQUESTED:	<hr/>				
	Beginning Date: mo/day/yr		Ending Date: mo/day/yr		

Certification of Sponsoring Attorney

I certify the applicant named above is a lawyer, paralegal, legal assistant, law clerk, or runner employed with my law firm who will be conducting regular business in the Forsyth County Hall of Justice for the temporary period of one week or more as specified above. I further certify the applicant is located in the County office indicated above and that a background check has been completed for this employee. I understand I must make every effort to retrieve the person's ID badge and turn it into General Services when this person is no longer employed with my law firm.

Signature of Sponsoring Attorney

Print Name

NC Bar #

PLEASE READ BEFORE SIGNING BELOW:

I certify my law firm maintains an active law office located in at least one of the following counties: Forsyth, Davie, Davidson, Guilford, Rockingham, Stokes, Surry, and Yadkin or specified county.
I will present my ID badge to Security Personnel upon every entrance into the Hall of Justice.
I understand I will be required to pass through security screening if I cannot produce my ID badge upon entry into the Hall of Justice and I agree to pass through security screening if such an event occurs.
I will maintain my ID Badge on my person and visible at all times while in the Hall of Justice.
I understand the ID badge issued to me cannot be loaned to anyone and agree I will not loan it to anyone.
I will not carry unauthorized items into the courthouse, including weapons or objects that could be used as a weapon.
It is my duty to secure my ID badge. If it is lost or stolen, I agree to contact the Forsyth County General Services Department at (336)703-2200 immediately to report the missing badge.
I understand the ID badge issued to me is Forsyth County property, and as such, privileges may be rescinded by the Forsyth County Hall of Justice Security Committee.
I understand my ID badge expires on the ending date specified above.
If I change law firms or my name, I will notify Forsyth County General Services to make arrangements to update my information and be issued a new ID badge, if necessary. I will notify the County and make arrangements for a new ID badge no later than 10 days after the effective date of the change(s).
If I am no longer employed by my sponsoring law firm, I will notify Forsyth County immediately to surrender my ID badge.
Any violations of the terms listed here may result in suspension or revocation of ID badge privileges, being found in contempt of court, and a fine.
I understand I must have a photo ID on my person at all times while conducting business in the Forsyth County Hall of Justice.

I have read the policies regarding the use of this badge and will adhere to the specified terms.

Signature of Applicant

Date

For Office Use Only

GS Employee Name

ID Badge #