LIVE SCAN OPERATOR – PLEASE USE 90008 – FINGERPRINT ONLY

STATE OF CALIFORNIA
BCIA 8016SHDPB
(orig. 04/2001; rev. 05/2013)

APPLICANT TO PAY LAW ENFORCEMENT AGENCY THE $300
$32 FEE + ROLLING FEE

REQUEST FOR LIVE SCAN SERVICE
(Secondhand Dealer/Pawnbroker)

Applicant Submission

CA0349400
ORI (Code assigned by DOJ)

LICENSE
Authorized Applicant Type

☐ Secondhand Dealer ☐ Pawnbroker
Type of License/Certification/Permit OR Working Title (Maximum 30 characters - if assigned by DOJ, use exact title assigned)

Contributing Agency Information:

DEPARTMENT OF JUSTICE
Agency Authorized to Receive Criminal Record Information

05467
Mail Code (five-digit code assigned by DOJ)

P.O. BOX 903387
Street Address or P.O. Box

SHDPB UNIT
Contact Name (mandatory for all school submissions)

SACRAMENTO
City

CA
State

94203-3870
ZIP Code

Contact Telephone Number

Applicant Information:

Last Name

First Name

Middle Initial

Suffix

Other Name (AKA or Alias) Last

First

Suffix

Date of Birth

Sex ☐ Male ☐ Female

Driver's License Number

Height

Weight

Eye Color

Hair Color

Billing Number BIL - Applicant to pay at Site
(Agency Billing Number)

Place of Birth (State or Country)

Social Security Number

Misc. Number
(Other Identification Number)

Home Address Street Address or P.O. Box

City

State

ZIP Code

Your Number:
OCA Number (Agency Identifying Number)

Level of Service: ☒ DOJ

If re-submission, list original ATI number:
(Must provide proof of rejection)

Original ATI Number

Employer (Additional response for agencies specified by statute):

N/A
Employer Name

N/A
Mail Code (five digit code assigned by DOJ)

N/A
Street Address or P.O. Box

N/A
City

State

ZIP Code

N/A
Telephone Number (optional)

Live Scan Transaction Completed By:

Name of Operator

Date

Transmitting Agency

LSID

ATI Number

Amount Collected/Billed