

REQUEST FOR LIVE SCAN SERVICE

Applicant Submission

ORI: A0522 Type of Application: Security Guard
Code assigned by DOJ

Job Title or Type of License, Certification or Permit: _____

Agency Address Set Contributing Agency:
Bureau of Security & Investigative Services 06078
Agency authorized to receive criminal history information Mail Code (five digit code assigned by DOJ)

P.O. BOX 989002 Licensing
Street No. Street or P.O. Box Contact Name (Mandatory for all school submissions)

West Sacramento CA 95798-9002 (916) 322-4000
City State Zip Code Contact Telephone No.

Name of Applicant: _____
(please print) Last First MI

Alias: _____ Driver's License No. _____
Last First

Date of Birth: _____ Sex: Male Female Misc. No. BIL- N/A
Agency Billing Number (if applicable)

Height: _____ Weight: _____ Misc. No: _____

Eye Color: _____ Hair Color: _____ Home Address: _____
Street or P.O. Box

Place of Birth: _____
City, State and Zip Code

SOC or ITIN: _____

Your Number: _____ Level of Service DOJ FBI
OCA No. (Agency Identifying No.)

If resubmission, list Original ATI No. _____

Employer: (Additional response for agencies specified by statute)

Employer Name _____

Street No. _____ Street or P.O. Box _____ Mail Code (five digit code assigned by DOJ) _____
City _____ State _____ Zip Code _____ () _____
Agency Telephone No. (optional)

Live Scan Transaction Completed By: _____ Date: _____
Name of Operator

Transmitting Agency _____ ATI No. _____ Amount Collected/Billed _____

ALLIED GUARD SERVICES INC

PPO 119680
110 S La Brea Ave suite 425
Inglewood CA 90301
Tel: 424-227-9912 Fax 424-227-5051

BIOMETRIC INFORMATION FORM

INSTRUCTIONS: Must answer all the questions, must print in **blue** or **black ink**.

Date _____ Phone Number _____ E-mail _____

Date of Birth _____ Country of Birth _____ SSN/ITN _____

Last Name _____ First Name _____ Middle Name _____

Address _____ Apt _____ City _____ State _____ Zip _____

Sex M [] F [] DL/ID No _____ State _____

Weight _____ Hair Color _____

Height _____ Eyes Color _____

Have Ever Applied For Guard before: Yes [] No []

Guard Card No _____ Exp Date _____

Have Ever Been Convicted of, Pled Guilty or nolo Contender of ANY Crime? Yes [] No []

Is Any Crime action pending against you? Yes [] No []

Have ever served or Are you currently Serving in the US Military? Yes [] No []

Applicant Signature _____

Date _____