



FLORIDA CARD SCANNING REGISTRATION FORM

FEE - \$79.00

PLEASE SELECT ONE OF THE BELOW OPTIONS FOR PAYMENT:

- CHECK: Made payable to **NBCI or National Background Check, Inc.**
- DIRECT BILL: _____ (for those sending us 50+ cards per year - account setup required)
(Direct Bill Account Company Name)
- CREDIT CARD: (VISA, MasterCard, American Express)

Card #: _____ Expiration Date: ____/____/____
 Name as it appears on card: _____ CVV Code/Security Code _____
 I authorize National Background Check, Inc. to charge the above credit card for fingerprint card processing.

Signature _____ Title _____ Date _____

APPLICANT INFORMATION:

Name: _____ **Daytime Phone Number:** (____) _____ - _____
Address: _____
Race: _____ **Date of Birth:** ____/____/____
Gender: _____ **Place of Birth:** _____
Eye Color: _____ **Citizenship:** _____
Hair Color: _____ **SSN:** ____ - ____ - ____ (REQUIRED for AHCA background checks)
Height: _____ ft. _____ in. **Email:** _____
Weight: _____ lbs.

COMPANY/AGENCY INFORMATION:

What is the ORI#: _____ **What is the OCA#** _____
 *If no ORI# is provided it will delay service (Only if applicable)

School/Facility/Agency Name _____

RELEASE OF BACKGROUND CHECK RESULTS

I hereby certify that I have given FastFingerprints permission to obtain all criminal history information pertaining to me in the files of the Florida Department of Law Enforcement (FDLE), the Federal Bureau of Investigation (FBI) (if requested), and release that information to the company/agency indicated above. By placing my fingerprint images on the Live scan scanner, I am authorizing FDLE to release criminal history information about me to FastFingerprints. and the company/agency indicated above. I hereby release BCI&I and any and all individuals connected therewith from all liability in connection with the dissemination of such criminal history information.

I understand FastFingerprints cannot guarantee that my fingerprint images will be deemed readable by FDLE, in which case I may need to be re-fingerprinted. I understand this does NOT constitute a refund due to charges incurred by FDLE immediately after the data is transmitted.

FastFingerprints will assist me with the process to complete this background check if I am rejected a second time.

Mailing Address:

FastFingerprints
 Florida Card Scanning Division
 9280 Bay Plaza Blvd #712
 Tampa, FL 33619

Applicant Signature: _____

Date: _____