REQUEST FOR LIVE SCAN SERVICE - APPLICATION SUBMISSION

DFPI-CFL 8018 (Rev. 04-21)



Applicant Submission

A0334	FINANCE LENDER 22101.5 FC Authorized Applicant Type			
ORI (Code assigned by DOJ)				
CALIFORNIA FINANCING LAW LICENSE				
Type of License/Certification/Permit OR Working Title (Maximum 30 characters - if	assigned by DOJ, use exact title assigned)		
Contributing Agency Information:				
DEPT. OF FINANCIAL PROTECTION AND INNOVATION				
Agency Authorized to Receive Criminal Record Information	Mail Code (five-digit code assigned by DOJ)			
320 WEST 4TH STREET, SUITE 750				
Street Address or P.O. Box	Contact Name (mandatory for all school submissions)			
LOS ANGELES CA 90013-2344	(866) 275-2677			
City State ZIP Code	Contact Telephone Number			
Applicant Information:				
Last Name	First Name	Middle Initial Suffix		
Other Name: (AKA or Alias)				
Last Name	First Name	Suffix		
Sex Male Female				
Date of Birth	Driver's License Number			
	Billing			
Height Weight Eye Color Hair Color	Number			
	(Agency Billing Number)			
Place of Birth (State or Country) Social Security Number	Misc. Number			
Social Security Number	(Other Identification Number	er)		
Home				
Address Street Address or P.O. Box	City State ZIP Code			
I have received and read the included Privacy Notice, Pri	vacy Act Statement, and	Applicant's Privacy Rights		
That's received and read the meladed i hivaey rection, i hi	vacy her cratement, and	7 Applicante i Tivacy i tigrite.		
Applicant Signature	Dat	te		
Your Number:	Level of Service:	DOJ FBI		
OCA Number (Agency Identifying Number)	(If the Level of Service indicat	es FBI, the fingerprints will be used to check		
contains (rightly rectallying realises)	the criminal history record info			
If re-submission, list original ATI number:				
(Must provide proof of rejection) Original ATI Number				
Employer (Additional response for agencies specified by statute):				
Employer (Additional response for agentices specified by statute).				
DO NOT COMPLETE THIS SECTION				
Employer Name				
Street Address or P.O. Box	Telephone	Number (optional)		
City State	ZIP Code Mail Code	(five digit code assigned by DOJ)		
Live Scan Transaction Completed By:				
Name of Operator	Date			

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DEPT. OF FINANCIAL PRO Agency Authorized to Receive Criminal I		<u>D INNOVATI</u> ON	Mail Code (five-digit code assigned by DOJ)			
•			Mail Code (live	edigit code assigned by	DO3)	
320 WEST 4TH STREET, Street Address or P.O. Box	3011E /30		Contact Name	(mandatory for all school	l submissions)	
LOS ANGELES	CA	90013-2344	(866) 275-2677			
City	State	ZIP Code	Contact Telephone Number			
Applicant Information:						
Last Name			First Name		Middle Initial	Suffix
Other Name: (AKA or Alias)						
Last Name			First Name			Suffix
Sex	Male F	emale				
Date of Birth			Driver's Licens	se Number		
Heimha Meimha	Fire Color	I lair Calar	Billing Number			
Height Weight	Eye Color	Hair Color		cy Billing Number)		
Place of Birth (State or Country)			Misc.			
Place of Birtir (State of Country)	Social Security Nu	ımber	Number (Other	Identification Number)		
Home						
Address Street Address or P.O. Box			City State ZIP Code		Code	
I have received and read	the included F	Privacy Notice, Pri	vacy Act Sta	tement, and Applic	ant's Privacy Rights	
		•	•			
Annlicant	Signature		Date			
·	Olgitature					
Your Number:			Level of Ser		FBI	
OCA Number (Agency Iden	tifying Number)		(If the Level of Service indicates FBI, the fingerprints will be used to check the criminal history record information of the FBI.)			to check
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Employer (Additional response	for agencies spe	ecified by statute):				
	is algerial of a					
DO NOT COMPLETE THIS SE	CTION					
Employer Name						
Street Address or P.O. Box				Telephone Number	(optional)	
0.000, 1.000 0.1.00 0.00					(00.00.00.)	
City		State	ZIP Code	Mail Code (five digit	code assigned by DOJ)	
Live Scan Transaction Complete	ed By:					
Name of Operator			Date			
Transmitting Agency	LSID		ATI Number		Amount Collected/Billed	
Transmitting Agency	2310		ATTNUMBER		, anount Johnsteu/Dilleu	

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320 WEST 4TH STREET, SUITE 750 Street Address or P.O. Box	Contact Name (mandatory for all school submissions)			
LOS ANGELES CA 90013-2344				
City State State 2IP Code	(866) 275-2677 Contact Telephone Number			
Applicant Information:				
Applicant information.				
Last Name	First Name	Middle Initial Suffix		
Other News (AI/A or Alice)				
Other Name: (AKA or Alias)				
Last Name	First Name	Suffix		
Sex Male Female				
Date of Birth	Driver's License Number			
	Billing			
Height Weight Eye Color Hair Color	Number			
	(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			
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Applicant Signature	 Date			
·				
Your Number:	Level of Service: DOJ	FBI		
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Employer (Additional response for agencies specified by statute):				
DO NOT COMPLETE THIS SECTION				
Employer Name				
Street Address or P.O. Box	Telephone Number (optional)		
•	ZIP Code Mail Code (five digit of	code assigned by DOJ)		
Live Scan Transaction Completed By:				
Name of Orange	Dete			
Name of Operator	Date			
Transmitting Agency LSID	ATI Number	Amount Collected/Billed		

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DFPI's Privacy Notice on Collection

DFPI Collects and Uses Personal Information: The DFPI collects the information requested on this form as authorized by the California Financial Code section 17200, et seq. The DFPI uses this information to investigate the individual's background and qualifications associated with an applicant or a licensee. Use of the personal Information DFPI collects is subject to limitations contained in the Information Practices Act of 1977 and other applicable state and federal laws.

Providing Personal Information Is Voluntary: You do no have to provide the personal information requested. If you do not want to provide personal information, such as your name, home address, or home telephone number, you may remain anonymous. However, we may not be able to contact you or help resolve your issue.

When providing information or documents, please do not include unrequested personal information such as a Social Security number, driver's license number, or financial information.

DFPI May Disclose Your Personal Information: We may share your personal information with the Department of Justice's Identification and Information Branch, other federal, state or local law enforcement agencies, or a self-regulatory organization as authorized by law. Your personal information may also be disclosed:

- In response to a Public Records Act request, as allowed by the Information Practices Act.
- To another governmental agency as required by state or federal law.
- In response to a court order or administrative order, a subpoena or a search warrant.

Your Access to Your Personal Information: You may review the records maintained by DFPI that contain your personal information. To request access, contact: DFPI Privacy Officer, 2101 Arena Blvd, Sacramento, CA 95834, (866) 275-2677.

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Privacy Notice

As Required by Civil Code § 1798.17

Collection and Use of Personal Information. The California Justice Information Services (CJIS) Division in the Department of Justice (DOJ) collects the information requested on this form as authorized by Business and Professions Code sections 4600-4621, 7574-7574.16, 26050-26059, 11340-11346, and 22440-22449; Penal Code sections 11100-11112, and 11077.1; Health and Safety Code sections 1522, 1416.20-1416.50, 1569.10-1569.24, 1596.80-1596.879, 1725-1742, and 18050-18055; Family Code sections 8700-87200, 8800-8823, and 8900-8925; Financial Code sections 1300-1301, 22100-22112, 17200-17215, and 28122-28124; Education Code sections 44330-44355; Welfare and Institutions Code sections 9710-9719.5, 14043-14045, 4684-4689.8, and 16500-16523.1; and other various state statutes and regulations. The CJIS Division uses this information to process requests of authorized entities that want to obtain information as to the existence and content of a record of state or federal convictions to help determine suitability for employment, or volunteer work with children, elderly, or disabled; or for adoption or purposes of a license, certification, or permit. In addition, any personal information collected by state agencies is subject to the limitations in the Information Practices Act and state policy. The DOJ's general privacy policy is available at http://oag.ca.gov/privacy-policy.

Providing Personal Information. All the personal information requested in the form must be provided. Failure to provide all the necessary information will result in delays and/or the rejection of your request.

Access to Your Information. You may review the records maintained by the CJIS Division in the DOJ that contain your personal information, as permitted by the Information Practices Act. See below for contact information.

Possible Disclosure of Personal Information. In order to process applications pertaining to Live Scan service to help determine the suitability of a person applying for a license, employment, or a volunteer position working with children, the elderly, or the disabled, we may need to share the information you give us with authorized applicant agencies.

The information you provide may also be disclosed in the following circumstances:

- With other persons or agencies where necessary to perform their legal duties, and their use of your information is compatible and complies with state law, such as for investigations or for licensing, certification, or regulatory purposes.
- To another government agency as required by state or federal law.

Contact Information. For questions about this notice or access to your records, you may contact the Associate Governmental Program Analyst at the DOJ's Keeper of Records at (916) 210-3310, by email at keeperofrecords@doj.ca.gov, or by mail at:

Department of Justice
Bureau of Criminal Information & Analysis
Keeper of Records
P.O. Box 903417
Sacramento, CA 94203-4170

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Request for Live Scan Service - Privacy Act Statement

Authority. The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

Principal Purpose. Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.

Routine Uses. During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental, or authorized nongovernmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

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Request for Live Scan Service - Noncriminal Justice Applicant's Privacy Rights

As an applicant who is the subject of a national fingerprint-based criminal history record check for a noncriminal justice purpose (such as an application for employment or a license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below.

- You must be provided written notification₁ that your fingerprints will be used to check the criminal history records of the FBI.
- You must be provided, and acknowledge receipt of, an adequate Privacy Act Statement when you submit your fingerprints and associated personal information. This Privacy Act Statement should explain the authority for collecting your information and how your information will be used, retained, and shared.
- If you have a criminal history record, the officials making a determination of your suitability for the employment, license, or other benefit must provide you the opportunity to complete or challenge the accuracy of the information in the record.
- The officials must advise you that the procedures for obtaining a change, correction, or update of your criminal history record are set forth at Title 28, Code of Federal Regulations (CFR), Section 16.34.
- If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the officials deny you the employment, license, or other benefit based on information in the criminal history record. 3

You have the right to expect that officials receiving the results of the criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council. 4

If agency policy permits, the officials may provide you with a copy of your FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, you may obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained at https://www.fbi.gov/services/cjis/identity-history-summary-checks.

If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that contributed the questioned information to the FBI. Alternatively, you may send your challenge directly to the FBI. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34.) You can find additional information on the FBI website at https://www.fbi.gov/about-us/cjis/background-checks.

¹ Written notification includes electronic notification, but excludes oral notification

² https://www.fbi.gov/services/cjis/compact-council/privacy-act-statement

³ See 28 CFR 50.12(b)

⁴ See U.S.C. 552a(b); 28 U.S.C. 534(b); 34 U.S.C. § 40316 (formerly cited as 42 U.S.C. § 14616), Article IV(c)