Fingerprinting Service Request – Live Scan

PRINT all information clearly

Name: _____
LAST   FIRST   MIDDLE

Aliases: _____
List all names ever used

Sex: M   F   Eyes: _____
Height: _____   Weight: _____   Race: _____
Hair: _____

Date of Birth: _____   Social Security Number: _____
MM/DD/YYYY   XXX-XX-XXXX

Place of Birth: _____   Country of Citizenship: _____
State if US/Country if not US

Address: _____
CITY   STATE   ZIP

Phone: _____
_____
Only complete this section if you are *EMPLOYED* in Cottonwood Heights, but *NOT* a Resident

Employer Name: _____
Address: _____
Employer Phone: _____

_____

Signature: _____   Date: _____

I declare under criminal penalty of the State of Utah that the foregoing is true and correct.

OFFICE USE ONLY

ID: Type _____Number_____Tech_____Date_____

OAC (Originating Agency Case) #_____ Billing Code: _____

Reason Fingerprinted: _____

WIN/FBI_____ Applicant TCN/OTN _____