# CALIFORNIA LIVESCAN

California Live Scan is a Certified California Department of Justice fingerprint provider since 2006

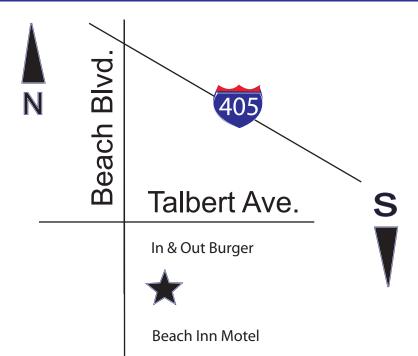


### **CALIFORNIA LIVESCAN**

18090 Beach Blvd. # 9 upstairs Huntington Beach, CA 92648 O (714) 787-8765 www.california-livescan.com

Office Hours: 9am to 5pm Mon.- Fri.

We accept WALK-INS! No Appointment needed!



## What To Bring:

- \* Request For Live Scan Service Form
- \* Valid photo ID
- \* Please bring this flyer

## **Directions:**

\* We are located on Beach Blvd. between Ellis and Talbert Ave. We are in the driveway right after the Beach Inn Motel



### **HWLL**

#### **REQUEST FOR LIVE SCAN SERVICE**

Applicant Submission	
AR874 ORI (Code assigned by DOJ)	Volunteer/VCA Authorized Applicant Type
Volunteer Type of License/Certification/Permit OR Working Title (Maximum 30 characters -	if assigned by DOJ, use exact title assigned)
Contributing Agency Information:	
Huntington West Little League Agency Authorized to Receive Criminal Record Information	26518 Mail Code (five-digit code assigned by DOJ)
P.O. Box 1384	Lessly Tune
Street Address or P.O. Box	Contact Name (mandatory for all school submissions)
Huntington Beach CA State 92647 ZIP Code	Contact Telephone Number
Applicant Information: Fill out this section	·
Applicant information.	
Last Name	First Name Middle Initial Suffi
Other Name: (AKA or Alias)	
Last Name	First Name Suffi
Sex Male Female	
Date of Birth	Driver's License Number
Height Weight Eye Color Hair Color	Phone
Place of Birth (State or Country) Social Security Number	Number
Place of Birth (State of Country)	
Home	
Address Street Address or P.O. Box	City State ZIP Code
Address Street Address or P.O. Box	,
	,
Address Street Address or P.O. Box	,
Address Street Address or P.O. Box	,
Address  Street Address or P.O. Box  I have received and read the included Privacy Notice,  Applicant Signature	Privacy Act Statement, and Applicant's Privacy Rights.  Date
Address Street Address or P.O. Box  I have received and read the included Privacy Notice,	Privacy Act Statement, and Applicant's Privacy Rights.  Date  Level of Service:  DOJ FBI  (If the Level of Service indicates FBI, the fingerprints will be used to check the
Address Street Address or P.O. Box  I have received and read the included Privacy Notice,  Applicant Signature  Your Number:  OCA Number (Agency Identifying Number)	Privacy Act Statement, and Applicant's Privacy Rights.  Date  Level of Service:  DOJ  FBI
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Address Street Address or P.O. Box  I have received and read the included Privacy Notice,  Applicant Signature  Your Number:  OCA Number (Agency Identifying Number)  If re-submission, list original ATI number: (Must provide proof of rejection)  Employer (Additional response for agencies specified by statute):  N/A  Employer Name  N/A  Street Address or P.O. Box  N/A  City  N/A  City  Name of Operator	Privacy Act Statement, and Applicant's Privacy Rights.  Date  Level of Service: DOJ FBI  (If the Level of Service indicates FBI, the fingerprints will be used to check the criminal history record information of the FBI.)  N/A  Telephone Number (optional)  N/A  ZIP Code Mail Code (five digit code assigned by DOJ)  Date
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