



REQUEST FOR LIVE SCAN SERVICE (Secondhand Dealer/Pawnbroker)

Applicant Submission

ORI (Code assigned by DOJ)

☐ Secondhand Dealer ☐ Pawnbroker

Type of Application (Check One Only)

Reason for Application

Contributing Agency Information:

Agency Authorized to Receive Criminal Record Information

Mail Code (five-digit code assigned by DOJ)

Street Address or P.O. Box

Contact Name (mandatory for all school submissions)

City State ZIP Code

Contact Telephone Number

Applicant Information:

Last Name

First Name Middle Initial Suffix

Other Name
(AKA or Alias) Last

First Suffix

Date of Birth Sex ☐ Male ☐ Female

Driver's License Number

Height Weight Eye Color Hair Color

Billing
Number

(Agency Billing Number)

Place of Birth (State or Country) Social Security Number

Misc.
Number

(Other Identification Number)

Street Address or P.O. Box

City State ZIP Code

Level of Service: ☐ DOJ

If re-submission, list original ATI number:
(Must provide proof of rejection)

Original ATI Number

Live Scan Transaction Completed By:

Name of Operator

Date

Transmitting Agency

LSID

ATI Number

Amount Collected/Billed