

INSTRUCTIONS FOR OUT-OF-STATE FINGERPRINT APPLICANTS

- 1. Obtain 2 fingerprint cards, FD-258, these can typically be found with local law enforcement agencies
- 2. Prior to having your prints taken fill out the fingerprint cards according to the attached numbered instruction sheet.
- 3. DO NOT SIGN THE FINGERPRINT CARDS UNTIL INSTRUCTED TO DO SO AT YOUR FINGERPRINT LOCATION
- 4. Have ink fingerprints taken by a certified fingerprint roller, be advised there may be a fee associated with the ink fingerprinting and this fee is separate from the fee assessed by the City of Sacramento for processing your out-of-state fingerprint cards
 - a. City of Sacramento fingerprint fee: \$88.00 per applicant
 - b. Check or money order made payable to: City of Sacramento

5. Submit:

- a. Both fingerprint cards
- b. The 2-page fingerprint application
- c. A copy of your valid driver license or state issued identification card
- d. The processing fees to the following address:

City of Sacramento, Revenue Division ATTN: Permits Fingerprinting 915 I Street, Room 1201 Sacramento, CA 95814

INSTRUCTIONS FOR COMPLETING FINGERPRINT CARD (FD-258)

NUMBERED INSTRUCTIONS BELOW CORRESPOND TO NUMBERS IN THE FP CARD BELOW LEAVE BLANK TYPE OR PRINT ALL INFORMATION IN BLACK LAST NAME NAM APPLICANT SIGNATURE OF PERSON FINGERPRINTED ALIASES AKA DATE OF BIRTH DOB MONTH DAY YEAR #1 #8 #16 RESIDENCE OF PERSON FINGERPRINTED #2 SIGNATURE OF OFFICIAL TAKING EYES P:ACE OF BIRTH POB DATE CITIZENSHIP CYZ RACE HGT WGT HAIR FINGERPRINTS #4 #11 #12 #13 #14 #15 EMPLOYER AND ADDRESS YOUR NO. OCA CITY OF SACRAMENTO #9 #5 **BUSINESS PERMITS SERVICES** FBI NO. FBI 915 I STREET, ROOM 1201 BIL -CLASS **SACRAMENTO, CA 95814** ARMED FORCES NO. MNU ORI AD510 REASON FINGERPRINTED SOCIAL SECURITY NO. SOC #6 APP TYPE: LICENSE CERT OR PERMIT #10 #17 REF **APP TITLE: CANNABIS** MISCELLANEOUS NO. MNU 3.R. MIDDLE 4.R. RING I.R. THUMB 2 R INDEX S.R. LITTLE 6.L. THUMB 9 L. RING 7.L. INDEX 8 R MIDDLE IO.L. LITTLE

R. THUMB

L. THUMB

- 1 Applicant's signature
- 2 Enter applicant's home address
- 3 Date: Enter the date the fingerprints were taken

LEFT FOUR FINGERS TAKEN SIMULTANEOUSLY

- 4 Signature and certification number of Official Taking Fingerprints.
- Agency and Address: Enter the complete name, address and ORI number of the authorized agency. For transactions with a secondary / extra agency, the complete name and address of both agencies must be entered. Agencies currently not assigned a "UNIQUE" ORI number must contact the DOJ at "ORIquestions@doj.ca.gov immediately to request a unique ORI assignment.
- Reason Fingerprinted: Enter the "APPLICANT TYPE" and "APPLICANT TITLE". The applicant type must be one for which the submitting agency is authorized. If unsure of what applicant types may be submitted for your agency, please email ORIquestions@doj.ca.gov for assistance.

- 7 Enter applicant's FULL NAME.
- 8 Enter any aliases (including maiden name) that the applicant is known by.
- 9 OCA: This box is for the submitting agency to show any numbers / characters assigned to this applicant / transaction. For some agencies, an OCA is mandatory. If you are unsure if the OCA is mandatory, contact your licensing agency.

RIGHT FOUR FINGERS TAKEN SIMULTANEOUSLY

- 10 SOC: Enter the applicant's social security number.
- 11 Enter applicant's gender.
- 12 Enter applicant's height (feet/inches).
- 13 Enter applicant's weight.
- 14 Enter applicant's eye color
- 15 Enter applicant's hair color
- 16 Enter date, month and year of birth
- 17 Use this space to show the OATI number if the fingerprints are reprints from a previously rejected transaction. Use this space to show the submitting agency's billing number.

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