

# Michigan Department of Licensing and Regulatory Affairs Liquor Control Commission (MLCC)

Toll-Free: 866-813-0011 - www.michigan.gov/lcc

# **Livescan Fingerprint Background Request Instructions for Michigan & Out-of-State Applicants**

### APPLICANTS THAT LIVE IN MICHIGAN

Applicants for a Michigan liquor license must have their fingerprints a law enforcement agency in Michigan that offers digital fingerprinting or a private Livescan vendor approved by the Michigan State Police. You may access a list of approved vendors on the Michigan State Police website (contains vendors' websites and contact information): https://www.michigan.gov/msp/services/Live-Scan-Vendors.

On the attached Livescan Fingerprint Background Request form, you must use the correct Code (LL), Agency ID Number (1479J), and Agency Name (MI DEPT OF LICENSING AND REGULATORY AFFAIRS - LIQUOR CONTROL) in order for the fingerprint report to be sent to the Michigan Liquor Control Commission. Payment receipts should not be mailed to the office, but kept for your own records.

You must bring the Livescan Fingerprint Background Request form with a driver's license or other state or federal-issued picture identification to your fingerprint appointment. You will also be required to pay a separate fee to the fingerprint agency when registering and/or scheduling your appointment. A copy of the Livescan Fingerprint Background Request form, which is signed by the Livescan Operator and returned to you, must be submitted with your application in order for your request to be investigated.

When your fingerprints are taken, a technician will perform a scan of your fingerprints and submit the data electronically to the Michigan State Police.

## APPLICANTS THAT LIVE OUTSIDE OF MICHIGAN

Applicants for a Michigan liquor license that live outside of Michigan must submit fingerprints through one of the private Livescan vendors approved by Michigan State Police that offer fingerprinting for residents that live outside of Michigan. You may access a list of approved vendors that process finger print cards for non-Michigan residents on the Michigan State Police website (contains vendors' websites and contact information): https://www.michigan.gov/msp/services/Live-Scan-Vendors.

The applicant must contact a local law enforcement agency, governmental agency, or private fingerprint agency to perform ink fingerprinting on a FBI fingerprint card (FD-258) or fingerprint cards from any other state or local agency (fingerprint cards must be on card stock). These fingerprint cards must be submitted for processing to one of vendors on the Michigan State Police's list of approved vendors. Contact the vendor directly regarding its process and the fee for submitting the fingerprint cards for processing.

Make a copy of the completed and signed Livescan Fingerprint Background Request form and submit that copy with the license application.

### WHAT HAPPENS AFTER FINGERPRINTS ARE SUBMITTED

The law enforcement agency or private vendor will submit your fingerprints to the Michigan State Police for analysis.

If no criminal history is found, the Michigan Liquor Control Commission will be notified.

If criminal history is found, the Michigan State Police will send the record directly to the Michigan Liquor Control Commission for review.

### **QUESTIONS AND ADDITIONAL INFORMATION**

For questions about the Livescan fingerprinting process, call the Michigan State Police at 517-241-0606.

An applicant may request a copy of his or her Criminal History Record Information (CHRI) response and may challenge the accuracy or completeness of any entry on the CHRI. Please see page 2 for information on how to request a copy of a CHRI and for the appeal process for challenging or correcting a CHRI response entry.

Please note: Fingerprints taken for any other agency will not fulfill fingerprint requirements for a liquor license in Michigan.

RI-030 (10/2020) Michigan State Police

**AUTHORITY:** MCL 28.162, MCL 28.214, MCL 28.248, & MCL 28.273 **COMPLIANCE:** Voluntary. However, failure to complete this form will result in denial of request.

# LIVE SCAN FINGERPRINT BACKGROUND CHECK REQUEST

**Purpose:** To conduct a civil fingerprint-based background check for employment, to volunteer, or for licensing purposes as authorized by law. **Instructions:** See page two.

I. Authorizing Informa	ition											
Fingerprint Reason Code     LL	• .			3. Agency Name  MI Dept of Licensing & Regulatory Affairs - Liquor Control  4. Individual ID (MNU-OA								
II. Applicant Informati	on: Type	or clearly prin	t ans	swers in all fie	lds before g	going to be f	ingerpri	nted.				
1a. Last Name				1b. First Name					1c. Middle Initial		1d. Suffix	
2. Any Alternative Names, Last Names, or Aliases				3. Sc					ocial Security Number (Optional)			
4. Place of Birth (State or Country) 5. Date of Birth			th 6. Phone Number 7. Driver's License				icense /	/ State ID Number			8. Issuing State	
9. Home Address				10. City		ı		11. State		12. ZIP Code		
13. Sex 14. Race		15. l	Heigh	nt	16. Weight		17. Eye	Color		18. 1	Hair Color	
III. Live Scan Informat	tion									ı		
1. Date Printed 2. Picture ID Type Preser					3. Transaction Control Number (To							
*When an individual ID is pro Agency Identifier and then er	nter the uniq	se enter the ID ue identifier in	into the lo	the Miscellaneo dentification Cod	us Number ( le field.	MNU) field or	the Live	Scan d	evice.	Select	OA - Originating	
IV. Privacy Act Staten  Authority: Acquisition, pr												
Federal statutes, State state fingerprints and associate Principal Purpose: Certate fingerprint-based background investigating, or otherwise the FBI's Next Generation repositories) or other avais fingerprints and associate may continue to be comparable formation/biometrics are without your consent as perfederal Register, including not limited to, disclosures contracting, licensing, second agencies; criminal justice V. Procedure to Obtai	ed information determined checks a responsible of least a label record agains ared agains are treatmed information are processing a retained information are mitted by gothe Rout to: employ curity clears agencies;	ion is voluntal nations, such s. Your finge ble agency, al cion (NGI) systems of the emption/biometrics at other finge n NGI, your in the Privacy ine Uses for thing, governmances, and ot and agencies	ry; here; he	owever, failure employment, lists and associar the FBI for the or its success on grant of the control of the co	e to do so mode to do so mode to do so mode e purpose do or systems on gone to or retained disclosed plapplicable do the FBI's don-gover minations; ational securiated in the securial securial securial disclosed plapplicable do the securial securial securial securial disclosed plapplicable do securial securia	nay affect cond security of ation/biometrof comparing (including of wise respond this appliced by NGI. Ifter as your Routine Us Blanket Rournmental agulocal, state, irity or public	empletion ilearance rics may go your fivil, crim sible agation and fingerproper as as mutine Us encies retribal, consafety.	n or apes, may be prongerprininal, argency.  and, while ints and sent, and be pressent, and pressent, and pressent, and pressent feder	proval y be provided nts to nd late The Fle retain d asso and ma bublish utine Usible fo	of your redicated to the other find find BI may ned, you ciated by be died at a Jses in remple.	ar application. ed on employing, ingerprints in erprint retain your our fingerprints  disclosed any time in the clude, but are oyment,	
If, after reviewing his/her in changes, corrections, or use the questioned information entry on his/her record to Road, Clarksburg, WV 26 to verify or correct the characteristic information, the Fagency. (28 CFR § 16.34)	updating of n. The sub the FBI, Ci 306. The F allenged en BI CJIS Di	the alleged of pject of a recording recording the control of the c	lefici ord m e Inf orwa e rece	ency; he/she s nay also direct ormation Serv rd the challen eipt of an offic	should mak his/her cha ices (CJIS) ge to the ag ial commun	e application allenge as to Division, Algency which dication direction	n directly the acc TTN: SC submitt otly from	y to the curacy of CU, Mod ed the of the ag	agend or com d. D2, data re lency v	cy which in the second which is which in the second which is constant and second which is second with the second which is second with the seco	ch contributed less of any Custer Hollow ling that agency contributed the	
VI. Consent												
I understand that my pers identification records from release of my personal in above.	both the N	Michigan Stat	e Po	lice (MSP) and	d the FBI fo	r the purpos	se listed	above. orized	. I her reques	eby au	ıthorize the	
Signature:								Date		_		