

Instructions for Application for Criminal History Record

Enclosed is an application for Criminal History Record from the State of Utah, Department of Public Safety, Bureau of Criminal Identification. Please complete all of the steps described below. Failure to properly complete one of the steps may cause a delay in processing your application.

- 1. Fill out the top portion of the application. List all of your previous names including married and maiden names. Be sure to read and sign the application.
- 2. Take the application to a law enforcement agency such as your city police department or county sheriff's office. Request that they print the four fingers of your right hand on the space provided. Make sure the law enforcement official who takes your fingerprints fills out the portion of the application labeled "OFFICIAL TAKING PRINTS." If you have a 10-Print Card you may submit that in lieu of having prints taken on form. Valid government-issued photo ID must be provided to the official taking your prints (for example, passport, state ID card, consulate ID card, and driver license.) "Utah Driving Privilege Cards" WILL NOT be accepted by BCI as valid ID. Driving Privilege Cards state on them that they are not to be used as ID. NOTE: The fingerprints may be taken at our office, (fingerprint appointment not necessary for criminal history report) Bureau of Criminal Identification, 4315 South 2700 West, Taylorsville, Utah. You must include a photo copy of your ID with your application.
- 3. The application fee is \$20.00. Select a method of payment by making a check mark in the appropriate box. Checks and money orders must be US Currency and be made payable to "Utah Bureau of Criminal Identification." To pay by credit card (Visa, MasterCard, Discover Card or AMEX), please fill out the requested information on the application. Credit card numbers must include: the signature of the cardholder, the three-digit control number located on the back of the card, and the expiration date. Cash is accepted only when applying in person. **DO NOT SEND CASH IN THE MAIL.**
- 4. Your report will be mailed to the mailing address indicated on the application form. If the information needs to be sent to a third party, the third party release form must be filled out and submitted along with your application.
- 5. Mail the application, fee and release form (if applicable) to:

UTAH BUREAU OF CRIMINAL IDENTIFICATION 4315 South 2700 West, Suite 1300 Taylorsville, Utah 84129

The report cannot be faxed or sent by e-mail.

If you have questions you may call (801) 965-4445 from 8:00 AM - 5:00 PM Monday-Friday. Our office is closed weekends and holidays.

You may also visit our website at http://publicsafety.utah.gov/bci/

The Bureau of Criminal Identification does not maintain juvenile offender records. Requests for such records must be made directly to the Juvenile Court.

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APPLICATION FOR CRIMINAL HISTORY RECORD

Utah Department of Public Safety • Bureau of Criminal Identification 4315 South 2700 West Suite 1300, Taylorsville, Utah 84129 Telephone: (801)965-4445

Rev 7-01-2025

WHEN FILLING OUT THIS APPLICATION TYPE OR PRINT IN BLACK INK. Your application will not be processed unless all sections of this form are filled out completely. You need to send a photocopy of your valid government issued picture ID and \$20.00 fee.

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NAME:				DATE OF B	IRTH
(Last Name) PREVIOUSLY USED NAME(S	(First Name) S) (Maiden, etc.):		(Middle Name)		
MAILING ADDRESS:					
PHYSICAL ADDRESS:	(Street/Box number)	(Apt #)	(City)	(State)	· * /
PHYSICAL ADDRESS: HOME PHONE NUMBER:	(Street) DA	(Apt#) YTIME PHONE N	(City) IUMBER:	(State)	(Zip)
SOCIAL SECURITY: DRIVER LICENSE # AND STATE:					
PHYSICAL DESCRIPTION: H	IGT/WGT/	EYE COLO	R/SE	X/RAC	E/
I hereby declare that I am the perturbed information contained in this I make that I do not believe to be to	written statement is true rue may subject me to crin	and correct to the b ninal punishment as	est of my knowled a class B misdemea	ge and I understa mor pursuant to U	and that any false statements Utah Code Ann. §76-8-504.
Signature of applicant:Date:					
FINGERPRINT INSTRUCTIONS: (OFFICIAL TAKING PRINTS) Confirm identity of applicant with identification that shows photo, signature and date of birth. Confirm ID with the information above, then list the type of government issued ID used and the ID number in the space provided below. Fingerprint the four fingers of the applicant's right hand simultaneously in the box located in the lower right portion of this form.					
This Area must be completed by	OFFICIAL TAKING PR	INTS	F	NGERPRINT	S
Type of identification used:					
Identification number:					
Name on ID:					
Fingerprints taken by:(PRINT)	NAME)	_			
Agency Name:					
Badge #(If applicable)	Date Printed:				
BUREAU USE ONLY AFIS Con	firmation				
SID#	R&F				
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METHOD OF PAYMENT (Only to be filled out if application is mailed in. Check appropriate box for payment)					
Check, Money Order or Cashier's Check (Payable to "BCI") There will be a \$20.00 service charge for any returned check.					
☐ Credit Card must be ☐ Visa ☐ Master Card ☐ Discover ☐ AMEX Fill out the information below to pay by credit card. *3 or 4 digit control # Exp Date MM/YY					
Cardholder signature: Name on Credit Card:					