

NYS DEPARTMENT OF FINANCIAL SERVICES - APPLICANT INFORMATION FORM

1. REASON FOR FINGERPRINTING

An Originating Agency Identification (ORI) Number is a nine-character identifier assigned to an agency. The ORI below relates only to applications for The Department's Licensed Financial Services Division which oversees Check Cashier, Sales Finance, Premium Finance, Money Transmitter, Budget Planner and Licensed Lender. Make sure you have the correct ORI number for your application.

ORI: **NY921822Z** Contributing Division: **LICENSED FINANCIAL SERVICES DIVISION**

Below please Indicate the specific industry type (Check Cashier, Sales Finance, Premium Finance, Money Transmitter, Budget Planner or Licensed Lender) under which your application is being filed:

Specific Industry Application:

2. APPLICANT INFORMATION

Complete the information below and visit [HTTP://WWW.L1ENROLLMENT.COM/](http://www.l1enrollment.com/) or call 877-472-6915 to schedule an appointment for fingerprinting. Print this form and bring it, and your identification (see below), to your appointment.

| | | |
|-----------------------------|---|--|
| Check One: | <input type="checkbox"/> New Submission | <input type="checkbox"/> Re-Submission |
| Name of Applicant: | | |
| Alias/Maiden Name: | | |
| Street Address: | | |
| City, State and Zip: | | |
| Date of Birth (mm/dd/yyyy): | | Country of Birth (If U.S., enter State): |
| Country of Citizenship: | | Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female |

Below please provide information about your physical appearance. This information will be verified at your appointment.

| | | | | | | | |
|---------|--|-----|--|--|-------------|------------|--|
| Height: | Ft. | In. | Weight: | Lbs. | Hair Color: | Eye Color: | |
| Race: | FOR RACE (LEFT) ENTER ONE OF THE FOLLOWING LETTERS: | | A-ASIAN/PACIFIC ISLANDER B-BLACK I-NATIVE AMERICAN INDIAN | U-UNKNOWN/ INDETERMINABLE W-WHITE | Ethnicity: | | <input type="checkbox"/> Hispanic <input type="checkbox"/> Non-Hispanic |

3. VERIFICATION OF IDENTIFICATION

Applicant must present two (2) forms of ID, at least one of which must be a Valid Photo Identification (Section A). Please check the type of identification presented to you by the applicant and mark the appropriate boxes below:

| | | |
|--|--|--|
| SECTION A: VALID PHOTO IDENTIFICATION | <input type="checkbox"/> U.S. Passport (unexpired or expired) | <input type="checkbox"/> Unexpired foreign passport |
| | <input type="checkbox"/> Permanent Resident card | <input type="checkbox"/> Alien registration receipt card |
| | <input type="checkbox"/> Driver's license or photo ID card issued by U.S. state or territory | <input type="checkbox"/> Unexpired Employment Authorization (Form I-766, I-688, I688A or B with photo) |
| | <input type="checkbox"/> Photo ID Card issued by federal, state, or local government | <input type="checkbox"/> School or college ID card with photo |

Details from Valid photo ID in Section A:

| | | |
|--|---|---|
| Description: | ID Number: | |
| SECTION B: VALID SUPPLEMENTARY IDENTIFICATION | <input type="checkbox"/> Voter registration card | <input type="checkbox"/> U.S. Military card or draft record |
| | <input type="checkbox"/> Military dependent ID card | <input type="checkbox"/> Coast Guard Merchant Mariner card |
| | <input type="checkbox"/> Native American tribal document | <input type="checkbox"/> Canadian driver's license |
| | <input type="checkbox"/> U.S. Social Security card | <input type="checkbox"/> Original or certified copy of a birth certificate issued by an authorized U.S. agency with official seal |
| | <input type="checkbox"/> Certification of Birth Abroad issued by U.S. Department of State | <input type="checkbox"/> U.S. Citizen ID card (Form I-7) |