(1) Originating Agency Number (ORI #)

Applicant ID

Scheduled

Day & Date:

Agency Information:

LONG HILL TWP PD

Number:

New Jersey Universal Fingerprint Form

www.bioapplicant.com/nj

NJ0143000			(2) Category FIR			(3) Statute Number 2C:58-1 THRU 4.1				
(4) Reason for Fingerprinting FIREARMS LICENSING						(5) Document Type B1		(6) Payment Information \$53.91		
(7) Contributor's Case # (Unique Identifier)			(8) Miscella			8) Miscellaneous	neous			
(9) First Name		(10) MI (11) Last Nam			lame	TELEVISION OF THE PERSON OF TH				
(12) Daytime Phone Number		(13) Social Security Number (Optional) (14			(14) [4) Date of Birth (15) Hei			ight (16) Weight	
(17) Maiden or Alias Last Name		(18) Place of Birth (US State if US Citizen; Country			intry fo	y for all others) (19)		Country of Citizenship		
(20) Home Address										
Address			City			C1-1-	-			
(21) Gender (Select one)	(22) Hair		(23) Eye Co	lor	10	State 24) Race (Select	Zip One)			
[] Female [] Male [] Both						A] Asian/ Par B] Black I] American	cific Islander Indian / Alas	Islander (includes Asian Indian) ian / Alaska Native les Hispanic/ Spanish Origin)		
25) Occupation / Position (with respect to (26) E		Employer / Organization Name (with respect to Requirement)							- Origini,	
Requirement)	Employer Address									
	City State Zip									
Identification Requirement - Acceptable that is current (not expired). A combination Address (home/employer), Date of Birth. Examples of acceptable ID are: 1) Valid U (issued after 5/10/2010), and 4) USCIS En Please READ This Form Carefully: Follow all of the instructions provided by your fingerprint appointment of the scheduling your fingerprint appointment.	Acceptable I.S. State F	e ID must be issued Photo Driver's Licens Authorization Card	by a Federa se/ Non Driv (issued afte	single docum I, State, Cou er's License, 10/31/2010	nent r inty or , 2) U,	nust include the Municipal entit S. Passport, 3)	following cr y for identific USCIS Perr	riteria: cation manen	Photo, Name, purposes. t Resident ID Card	
prior to scheduling your fingerprint appointn Universal Fingerprint Form, IDG_NJAPP_0.					GIBLY	. It is <u>required</u>	that you pre	esent	this completed	
Appointment Scheduling: Scheduling is available anytime at www.bi speaking agents are available at 1-877-50	oapplica	int.com/ni. Appoir	ntments may	also he sch	edule ST an	d through our C d Saturday, 8:0	all Center.	Englisi	h and Spanish	
Payment: When an applicant is responsible for payme American Express, Discover and prepaid de	ent navme	ent is required at the	time of sche	duling The f	falloui	na forme of				
Cancel/ Reschedule: Appointments may be canceled or rescheduppointment (Saturday Noon for Monday appointment prior to display and payment method.	uled via the	e website or the call	center befor	e the deadlin	ne of 5	PM EST the bu	siness day	prior to	o the scheduled	
Unable to be Fingerprinted: In applicant is considered "Unable to be Findentification, inability to present this complete formation provided during the scheduling processing will refund the remainder of the fee	orocess. A	rsai Fingerprint Forn opplicants unable to I	n IDG_NJAF be fingerorin	P_020115_\ ted will incur	V2, or	the information	on this form	anna	not avantly went It -	
CN and Receipts: Ipon the completion of fingerprinting you wi ill not provide duplicate receipts, PCN Num	II be assio	ned a PCN number.	The PCN w	ill be recorde	no be	this form and o	n your receip	ot. Ider	mia Identity & Security	

You MUST retain a copy of this form and the receipt of printing for your personal records.

PCN:

Site:

Scheduled

Payment

Scheduled

Time:

Authorization: