



DATE RECEIVED _____	DFI USE ONLY
LIC ID # _____	DFI ID # _____
INVOICE # _____	CHECK # _____
AMT. PD _____	BAL. DUE _____

APPLICATION FOR PAWNBROKING LICENSE

ATTACH LICENSE APPLICATION FEE CHECK HERE

TO BE COMPLETED BY ALL APPLICANTS		
Name of Pawnbroking Business		
Address (Number and Street)		
City, State, Zip Code	Telephone	Fax
Address of Where License is to be Sent		Contact Person
		E-Mail
City, State, Zip Code	Telephone	Fax
INDIVIDUALS (To be completed by those operating as Individuals)		
Name		
Address (Number and Street)		
City, State, Zip Code	Telephone	
PARTNERSHIPS (To be completed by those operating as Partnerships)		
NAME AND RESIDENCE ADDRESS OF EACH PARTNER:		
Name		
Address (Number and Street)		
City, State, Zip Code	Telephone	
Name		
Address (Number and Street)		
City, State, Zip Code	Telephone	
ATTACH AN ADDITIONAL SHEET IF NECESSARY		

CORPORATIONS / LIMITED LIABILITY COMPANIES (To be completed by those operating as Corporations / LLC)

Name of Corporation / LLC

Address (Number and Street)

City, State, Zip Code

Telephone

Corporation Organized Under the Laws of What State?

Date of Incorporation / Organization

LIST OFFICERS, DIRECTORS, OR MEMBERS OF THE CORPORATION OR LLC WITH TITLE AND RESIDENCE ADDRESS:

Name

Title

Address (Number and Street)

City, State, Zip Code

Telephone

Name

Title

Address (Number and Street)

City, State, Zip Code

Telephone

Name

Title

Address (Number and Street)

City, State, Zip Code

Telephone

ATTACH AN ADDITIONAL SHEET IF NECESSARY

IF A CORPORATION OR LLC, LIST ALL PERSONS OR ENTITIES OWNING 10% OR MORE OF THE COMPANY. FOR ENTITIES MEETING THIS TEST, LIST THE PERSONS OWNING THAT ENTITY.

Name

Title

Address (Number and Street)

City, State, Zip Code

Telephone

Name

Title

Address (Number and Street)

City, State, Zip Code

Telephone

Name

Title

Address (Number and Street)

City, State, Zip Code

Telephone

ATTACH AN ADDITIONAL SHEET IF NECESSARY

REFERENCES

Give three (3) names and addresses of references as to your "financial responsibility, character, and fitness." One shall be a representative of a financial institution. **Reference letters on business stationery should be submitted with your license application.**

Individual's Name	Title
Address	Telephone
Individual's Name	Title
Address	Telephone
Individual's Name	Title
Address	Telephone

INDIANA BRANCH INFORMATION

ADDRESS OF EACH INDIANA BRANCH LOCATION	Number of Branches _____
Address (Number and Street)	
City State, Zip Code	Telephone
Address (Number and Street)	
City, State, Zip Code	Telephone
Address (Number and Street)	
City, State, Zip Code	Telephone
Address (Number and Street)	
City, State, Zip Code	Telephone
Address (Number and Street)	
City, State, Zip Code	Telephone

ATTACH AN ADDITIONAL SHEET IF NECESSARY

ASSUMED NAME

If applicant operates under an assumed name, a certificate from the appropriate official showing compliance with the provisions of the laws of the State of Indiana pertaining to conducting business under an assumed name is to be included with the application.

GENERAL INFORMATION

1. **If a corporation or LLC**, attach a copy of your certificate of authority from the Indiana Secretary of State.
2. Attach a description of your business history, business plan, and any other business transactions that will be conducted at your pawnbroking location/s.
3. List other states where the applicant or any affiliated company operates as, or did operate as, or is licensed or regulated as, or was licensed or registered as, a lender, loan broker, or other financial services provider under state or federal regulatory authority. Provide the same information for owners and officers of the applicant. Provide the name of all state and federal regulatory agencies, contact person, contact information, and the date licensed.
4. Has the applicant, any affiliated company, or any company associated with the owners or officers of the applicant had a license or registration cancelled, suspended, or revoked in any state or been subject to a state or federal enforcement or administrative order, including but not limited to informal resolutions, memorandums of understanding, cease and desist orders? Yes No

If Yes, give full details. _____

5. Have you read the attached copy of the Pawnbroking Act in its entirety? Yes No
6. Give history and full details of any material litigation and/or criminal convictions for five years preceding date of application for any owner, partner, corporate officer, limited liability member, or branch manager.
7. Has any officer, owner, or employee been connected directly or indirectly as a principal or employee with any business licensed under the Pawnbroking Act whose license was suspended or revoked,? Yes No
If Yes, describe:

8. Do you agree to keep ample and adequate records to disclose the true status of your business under the Pawnbroking Act, and will such records be made available for examination? Yes No

Give details on the software used for disclosures and record keeping _____

9. Do you have an ATF license? Yes No If Yes, attach a copy of your license.

10. Give the name of the person who will be managing the pawnbroking business _____
Applicant must show minimum two (2) years finance related experience for anyone who will be managing an Indiana location.

ATTACH A BUSINESS RESUME FOR THE MANAGER AND ALL OFFICERS.

ATTACH AN ORIGINAL SURETY BOND PAYABLE TO THE DEPARTMENT IN THE AMOUNT OF \$50,000 PER LOCATION, UP TO A MAXIMUM OF \$200,000

ATTACH EVIDENCE OF PROPERTY AND CASUALTY INSURANCE; Evidence of property and casualty insurance coverage for pawned items in an amount of at least \$25,000, or two times the amount of the total loans outstanding, whichever is greater. The coverage must be updated at least annually

ATTACH CPA prepared reviewed or audited Financial Statements indicating at least \$75,000 net worth for each location specified and liquid assets of at least \$50,000

ACKNOWLEDGMENT

The applicant executed this application on _____ and acknowledges that all statements made herein and supporting schedules, to the best of my/our knowledge and belief, are true and is a true and complete statement in accordance with the law.

IF A CORPORATION, PRESIDENT AND ONE OFFICER MUST SIGN; IF LLC, MEMBERS MUST SIGN; IF A PARTNERSHIP, ALL PARTNERS MUST SIGN; IF SOLE PROPRIETORSHIP, OWNER MUST SIGN. ATTACH AN ADDITIONAL SHEET IF NECESSARY.

By:

Title

By:

Title

By:

Title



30 South Meridian Street, Suite 300
Indianapolis, Indiana 46204-2759
Telephone: (317) 232-3955
FAX: (317) 232-7655
WEB SITE <http://www.in.gov/dfi>

TO APPLICANTS FOR A PAWNBROKING LICENSE:

Enclosed is an application for a license under the Indiana Pawnbroking Act (IC 28-7-5). Submit the application to the Department of Financial Institutions with an initial pawnbroking license fee of \$1,000 plus \$500 for each additional location. The check or money order is to be made payable to the Department of Financial Institutions. A license renewal fee of \$1,000 plus \$500 per branch location is due by June 1 of each year.

EXPERIENCE: Applicant must show minimum two (2) years finance related experience for anyone who will be managing an Indiana location.

OFFICE INTERVIEW: Upon completion of the Pawnbroking license application, the applicant shall make an appointment with the Consumer Credit Division for an interview to be conducted at the Department of Financial Institutions.

CRIMINAL BACKGROUND CHECK: A nationwide criminal background check based on fingerprints will be completed for each owner (sole proprietorship), partner (partnership), or officer (corporation) as well as the manager for an Indiana location. The State of Indiana now uses L-1 Identity Solutions to take and/or process fingerprint cards for the State and FBI background checks required for all license applications for the Indiana Department of Financial Institutions (DFI). The procedures will differ depending on whether you are located in Indiana or in other parts of the country. Detailed instructions for the fingerprinting process are on-line at: http://www.in.gov/dfi/DFI_Fingerprint_Instruct.pdf Please read through this information and if you have any questions, please contact DFI at 800-382-4880 or 317-232-3955. DO NOT send fingerprint cards to the DFI as this will only delay the processing of your license application. Each applicant should include with their jurisdiction specific documents a list of all personnel to be fingerprinted for background checks.

FINANCIAL STATEMENT AND CREDIT REPORT: Review or audit level Financial Statements prepared by an external CPA, or most recent 10K filing with the Securities and Exchange Commission (SEC), must be attached to the application. The financial statement must show a net worth of at least \$75,000 for each location of pawnbroking business, and total liquid assets of \$50,000. This CPA statement must be dated within 12 months of the date of application. Liquid assets include cash or its equivalent (any assets that are readily convertible to cash without significant loss such as treasury bills, short term marketable securities, demand deposits, and time deposits nearing maturity.) Other assets that you believe to be liquid assets must be identified and footnoted in the CPA report. If the named applicant for the license is a limited liability company or subchapter S corporation, then in addition to a CPA review or audit level financial statement on the corporate entity, any individuals who are members of the LLC or owners of the subchapter S corporation and own 10% or more of the LLC or subchapter S Corporation should submit a personal financial statement. These personal financial statements do not have to be prepared by a CPA, but must meet acceptable minimum accounting standards for personal financial information.

Provide a **credit report** of the business and/or principals

SURETY BOND: All applicants must provide a surety bond payable to the Department in the amount of \$50,000.

REFERENCES: Give three names and addresses of references willing to acknowledge your financial responsibility, character, and fitness. One reference shall be a representative of a financial institution. Reference letters on business stationary should be submitted with your license application.

FORMS TO BE SUBMITTED: When returning the application, you are to enclose copies of the forms listed below which will be used in conjunction with your pawnbroking transactions.

1. Sample copy of completed pawn ticket.
2. Sample copy of completed bill of sale.

OTHER INFORMATION:

The City Police and the County Sheriff in the community of the proposed location/s are to be notified of the applicant's intention to establish a pawnbroking business in that community. The applicant shall also inform the Department in writing of the date contacted, name, address, and telephone number of each official that was contacted. The licensee should show the assigned license number in all correspondence or communications with the Department subsequent to licensing. Licenses under the Indiana Pawnbroking Act are issued on the basis of representations made in the application. Change in ownership of the holder of the license terminates the license.

New locations of pawn licensees must be approved by the department by a new Branch Location

Application. A licensee must notify the department at least 30 prior to adding or moving a location. A licensee must notify the department within 15 after other business begins within a licensed location.

If you desire further information concerning specific licensing questions, please contact this office.

CONSUMER CREDIT DIVISION - mtarpey@dfi.in.gov

PAWNBROKER LICENSE APPLICATION CHECKLIST
ATTACH TO APPLICATION

CHECK HERE	THE FOLLOWING MUST BE ATTACHED TO THE APPLICATION
	Pawnbroker License Application Fee \$1,000 plus \$500 per additional location made payable to the Department of Financial Institutions.
	Business resume for the manager, owner, partners, and all officers / members, as applicable.
	Criminal background check, based on fingerprints, from FBI or State Police from state of residence for each principal. (officer/ member/ partners/ owner/ Indiana manager). Detailed instructions for the fingerprinting process are on-line at: http://www.in.gov/dfi/DFI_Fingerprint_Instruct.pdf
	CPA prepared, Reviewed or Audited, Financial Statements or most recent 10K filing with the Securities and Exchange Commission (SEC) with \$75,000 net worth per location and \$50,000 in liquid assets.
	Credit Report for business and/or principals
	\$50,000 surety bond payable to the Department per location up to a maximum of \$200,000
	Three reference letters, one must be a financial institution.
	Sample copy of a completed pawn ticket.
	Sample copy of a completed bill of sale.
	Copy of ATF license, if applicable.
	If a corporation / LLC, a copy of Certificate of Authority to do business in Indiana from the Secretary of State.
	If D/B/A, copy of assumed name certificate from County Recorder for each Indiana location if a sole proprietorship or partnership; or Indiana Secretary of State for a corporation or LLC
	.Copy of Indiana business plan.
	List of other states where operating as a pawnbroker.
	If out-of-state home office, letter of good standing from home office state pawn regulator.
	ATTACH EVIDENCE OF PROPERTY AND CASUALTY INSURANCE; Evidence of property and casualty insurance coverage for pawned items in an amount of at least \$25,000, or two times the amount of the total loans outstanding, whichever is greater. The coverage must be updated at least annually

Check each item required to accompany the application to make sure your application is complete and send this checklist with application.



PAWNBROKER SURETY BOND

Part of State Form 50292 (5-07) / Form PB B

Bond Number _____,

Amount \$ _____

KNOW ALL PERSONS BY THESE PRESENTS, that we,

(applicant/licensee name)

of the City of _____, County of _____, State of _____

_____ as principal and obligor, and _____, as Surety, are held and firmly bound unto the State of Indiana, Department of Financial Institutions (hereinafter "the DFI") in the penal sum of \$ _____ for the use of the DFI for the recovery of expenses, fines, and fees levied by the DFI, and for any and all expenses, fines, and fees that become lawfully due pursuant to a final judgment or order and that are not promptly paid by the Principal, and for losses or damages which are determined by the DFI to have been incurred by any borrower or consumer as a result of the Principal's failure to faithfully comply with the provisions of Indiana law, including the requirements of the Pawnbroking Law, IC 28-7-5 et seq. and amendments thereto, or any rule or regulation lawfully adopted under said statute, for payment of which, well and truly to be made, we hereby bind ourselves and each of our heirs, executors, administrators, successors and assigns, jointly and severally, firmly by these presents.

WHEREAS, Principal is applying to become a licensed Pawnbroker pursuant to IC 28-7-5, and seeks to establish, meet, and maintain the financial responsibility requirements of the DFI during the term of the subject license by tender of the within bond,

NOW, THEREFORE, the conditions of this bond are such that if the above bonded Principal will faithfully conform to and abide by the provisions of all applicable law, including applicable provisions of the Indiana Pawnbroking Law, as well as any rules and regulations lawfully adopted thereunder, and shall pay any and all amounts which become due or owed thereunder, then this obligation is null and void, but otherwise to remain in full force and effect,

PROVIDED that the Surety's aggregate liability for any and all claims which may arise under this bond shall in no event exceed the amount of this bond, regardless of the number of claims or claimants, and

FURTHER PROVIDED that this bond shall remain effective continuously until released by the DFI. The surety shall have the right to terminate or reduce its liability hereunder only by giving the Principal and the DFI written notice of such termination via certified mail to the State of Indiana, Department of Financial Institutions, at least thirty (30) days prior to the effective date of such termination; provided, however, that no liability incurred while said bond is in force and prior to said effective date of termination or reduction of liability shall be released or reduced by giving such notice, and

FURTHER PROVIDED, that after giving notice of termination or reduction of liability, the surety may reinstate or increase its liability by the execution and filing of a new bond or by mailing written notice to the DFI indicating that the surety desires to continue as surety for the licensee and that its prior notice of termination or reduction of liability is withdrawn and rescinded.

FURTHER PROVIDED that, if this bond is not previously terminated as set forth above, the liability of the surety shall expire two (2) years after the date of the surrender, revocation, or expiration of the subject license, whichever shall first occur.

THIS BOND shall be effective on and after _____ or, if left blank, the day of execution by surety shall be the effective date of the bond. The bond shall be effective, if accepted by the DFI, without further notice.

IN WITNESS WHEREOF, we have duly executed the foregoing obligation this _____ day of _____, 200_.

LICENSEE:

(Licensee's Name)

[Corporate Seal]
(If Any)

(Signature)

(Print Signature Name)

(Title) (Date)

Surety Must Attach Power of Attorney

(Surety)

[SURETY SEAL]

(Signature)

(Print Signature Name)

(Telephone Number) (Date)

Name, address, and telephone number of the Surety representative to contact in the event a claim must be filed:



STATE OF INDIANA

DEPARTMENT OF FINANCIAL INSTITUTIONS



30 South Meridian Street, Suite 300
Indianapolis, Indiana 46204-2759
Telephone: (317) 232-3955
FAX: (317) 232-7655
WEB SITE <http://www.in.gov/dfi>

Date: February 20, 2009
To: Indiana Licensed Pawnbroker Addressed
From: Indiana Department of Financial Institutions
Subject: **Questions and Answers Regarding Changes for Indiana Licensed Pawnbrokers**

PAWNBROKING REQUIREMENTS AS OF JUNE 1, 2009

1. *What are the financial responsibility requirements for a pawnbroker under IC 28-7-5-5 as of the renewal due June 1, 2009?*

Answer: The required financial responsibility amounts are \$75,000 in net worth per location and \$50,000 in liquid assets. A minimum of a CPA review level financial statement is required to verify this information. For licensees who are not exempted from providing the financial statement (see question 2) the financial statement is required at time of renewal. The financial statement will also be required with each application for a new pawnbroking license.

2. *Which pawnbrokers will be required to provide a minimum CPA review level financial statement to the Department?*

Answer: Pawnbrokers receiving their license for the first time and all other pawnbrokers who have been licensed for less than 5 years will be required to provide proof of financial responsibility via a CPA review level financial statement meeting the minimum net worth and liquid asset requirements. Those pawnbrokers who have been licensed for more than 5 years will not be required to furnish this information with the license renewal, but may be required to provide the financial statement if deemed necessary by the Department.

3. *Are there new requirements for pawnbrokers to be bonded?*

Answer: All pawnbrokers will be required to furnish a surety bond with the Department as obligee starting with the June 1, 2009 license renewal, but no later than June 1, 2010 (see question 4). Bond will be required in the amount of \$50,000 per location with a maximum bond of \$200,000. The required bond form is available on the Department Web site under Applications/Licensing. All new pawnbrokers have been required to provide this information since January of 2007. The DFI is expanding this requirement to all pawnbrokers regardless of date licensed as detailed in the DFI letter to all pawnbrokers dated November 14, 2008.

EQUAL OPPORTUNITY EMPLOYER

- 4. Will a pawnbroker who has been licensed with Department for more than 5 years and who has already obtained the services of a CPA to perform a review level financial for the renewal due June 1, 2009 have to provide a bond in the amount of \$50,000?**

Answer: No - a pawnbroker who has been licensed for more than 5 years can provide **either** a surety bond or a CPA review level financial statement meeting the minimum net worth and liquid asset requirements for the renewal due June 1, 2009. The pawnbroker must meet the bond requirement as of the renewal due June 1, 2010.

- 5. What are the requirements for pawnbrokers relating to the amount of property and casualty insurance to be carried?**

Answer: The Department recognizes that prudent business practice dictates property and casualty insurance coverage sufficient to cover items both in and out of pawn. In order to ensure adequate coverage, beginning June 1, 2009, all pawnbrokers will be required to have property and casualty insurance coverage in an amount of at least two times the amount of their total loan outstanding. This coverage must be updated at least once per year to ensure the required amount of coverage is in force. Policies already in force must also be reviewed prior to the renewal date of June 1, 2009 to ensure the required amount of coverage is already in force, and if not, the policy must be updated.

For a multi-branch licensee, the amount of coverage must be at least two times the amount of outstanding in the branch location with the highest amount of outstanding.

Any licensee with coverage different from the requirements listed above that they believe is at least equal to the parameters listed may request approval from the Department to continue that coverage. The policy must be submitted to the Department for review and approval. A denial by the Department will require the licensee to purchase coverage to meet the stated requirements.

***For questions about this notice contact:
Mark Tarpey, Division Supervisor
Consumer Credit Division
mtarpey@dfii.in.gov***



Fingerprinting in Indiana

Department of Financial Institutions

PLEASE READ ALL 4 PAGES OF INSTRUCTIONS



Follow the simple steps outlined below to complete the fingerprinting process:

1. Using your computer web browser, go to www.L1enrollment.com and choose Indiana.
2. If you do not have access to the internet, you may call us toll-free at (877) 472-6917 to schedule an appointment. If you call, you will be asked the following questions instead of completing these steps yourself.
3. Click Online Scheduling and choose the language you wish to use for scheduling (English or Spanish)
4. Enter your first and last name and click "go"
5. Choose your Agency Name **Department of Financial Institutions** and click "go".
6. Choose the correct Applicant Category for your license type and click "go".
7. Select the location where you want to be fingerprinted. You may choose a region of the state, click on the map, or enter a zip code to get a list of locations in a specific area. Press "go"
8. Click on the words "Click to Schedule" across from the location you want, under the day you wish to be fingerprinted. If you want a date further in the future, click the "Next Week>>" link to display more dates. Once you select the location/date combination, select the time for your appointment and click "go".
9. Complete the demographic information page. Required fields are indicated by a red asterisk (*). When complete, click "Send Information"
10. Confirm the information. Follow the on screen directions to make any changes necessary. Once you see the data is correct, click "Send Information".
11. Complete your payment process and click "Send Payment Information".
12. Print your confirmation page. If you provided an email address, you will receive an email confirmation as well.
13. Bring **one** the following with you to your fingerprinting appointment: Valid Driver License, Valid State Issued Identification Card, Valid Passport, Student ID with Picture and DOB, Work ID with Picture and DOB, Valid Alien ID card with Picture and DOB. If you do not have the above identification, you will need **both** a valid Birth Certificate and a Social Security Card.
14. Arrive at the facility at your appointed date and time.
15. The Enrollment Officer at the site will check you ID, verify your information, verify or collect payment, capture your fingerprints, and submit your data. This normally takes less than five minutes.
16. You will receive a signed receipt at the end of your fingerprinting session which can be provided to your agency for proof of fingerprinting, if needed.
17. All results will be processed and delivered to the Department of Financial Institutions. L-1 is never in possession of criminal record data results.

Indiana Card Scan Processing Procedures

Applicants who reside out of state, or are physically unable to go to a location to be fingerprinted may use L-1's Card Scan Processing Program. This program utilizes advanced scanning technology to convert a traditional fingerprint card (hard card) into an electronic fingerprint record. Converting a "hard card" into an electronic record enables an applicant to have their fingerprint record processed as quickly as if they had traveled to an electronic fingerprint processing location. The section below details the procedures for submitting fingerprints to the Card Scan Processing Unit.

Indiana Licensing and Certification

- Applicants must go online to the L-1 Enrollment website (www.l1enrollment.com) or call the toll free registration center at 1-877-472-6917 and complete the registration process. During the registration process, applicants should select "**Pay for Ink Card Submission**" on the Appointment Details page. This will identify to L-1 that a hard card will be mailed to them for conversion to an electronic fingerprint record which will then be submitted to the Indiana State Police.

Appointment Details

If you are using assistive technology (such as a screen reader) or have problems using the scheduler below, please follow this link to our alternative appointment scheduler.

Pay for Ink Card Submission

Enter a zip code to determine the closest fingerprinting location.

go

or

Please choose the region you will be in for your enrollment appointment.

CENTRAL go



If you have any questions with the website, please contact L-1 Enrollment Services at 877-472-6917.

PRIVACY POLICY | PRIVACY STATEMENT
COPYRIGHT © 2004-2005 L-1 IDENTITY SOLUTIONS

- Applicants should complete the entire registration process; a confirmation number will be supplied at the end of the registration process. This number should be retained by the applicant for tracking purposes. This confirmation number must be recorded on the fingerprint card when it is submitted to L-1 for proper processing.

- Fingerprints may be submitted on standard FBI applicant cards (FD-258); use of other types of fingerprint cards may delay your processing. FBI applicant cards are available from your employing or licensing agency. *Due to agency specific information, L-1 does not provide fingerprint cards to applicants.*
- Applicants should obtain a set of fingerprints from a local law enforcement agency or other entity that provides fingerprinting services. These fingerprint cards may be either traditional ink rolled fingerprints or electronically captured and printed fingerprint cards.
- Applicants need to make sure the following information is completed on the fingerprint card. **Required information includes: Full name, Date of Birth, and the confirmation number provided at the end of the registration process.**
- Applicants for Department of Children's Services (DCS) must have approval from DCS COBCU to submit a hard card for processing via this method. Applicants must include a copy of their email from COBCU authorizing the submission of a hard card. Failure to include a copy of the email from COBCU will result in the card being returned to the applicant and will delay the process.
- If paying by Business Check or Money Order, include the full name of the applicant on each check or money order. If one Business Check or Money Order is being used as payment for more than one applicant, please include a list of all applicant names. Personal checks are not accepted.
- The fingerprint card along with the appropriate fee, if required and not paid by Escrow Account or Credit Card at the end of registration, should then be sent to the following address (for tracking & security reasons, it is recommended that a shipping service with tracking service be utilized):

*L-1 Enrollment Services
Indiana Processing
1650 Wabash Ave Suite D
Springfield, IL 62704*

- Please include at least two (2) means of contact for each applicant for which a fingerprint card is submitted where the applicant can be reached if there are any questions related to the processing of the fingerprint card (for example, a daytime and evening telephone number or a cell phone number and email address, etc).
- Applicants wishing to verify that a fingerprint card has been processed may call 877-472-6917 and speak with a customer service representative. Please allow 3 days from date of mailing before contacting L-1 regarding processing status.

Failure to complete the process as stated on these instructions will result in the card being returned to the applicant, which will delay the process.



Indiana Department of Financial Institutions Applicant Fingerprinting Form



Name: _____
Last First Middle

Address: _____

City: _____ State: _____ Zip: _____

Daytime Contact # _____ Social Security #: _____ - _____ - _____

Date of Birth: ____/____/____ Birthplace: _____
Month Day Year State

Citizenship: _____ Height: _____ Weight: _____

Original TCN (if this is a reprint) _____

CIRCLE CODES THAT APPLY

<u>SEX</u>	<u>HAIR COLOR</u>	<u>EYE COLOR</u>
MaleM	Bald BAL	Black BLK
Female F	Black BLK	Blue BLU
	Brown BRO	Brown BRO
<u>RACE</u>	Gray/Part Gray . . . GRY	Gray GRY
Asian or Pacific Islander . . . A	Red/Auburn RED	Green GRN
Black B	Sandy SDY	Hazel HAZ
American Indian or	White WHI	Maroon MAR
Alaskan I		Multicolored MUL
Unknown U		Pink PNK
White W		

Go to www.L1Enrollment.com or call 1-877-472-6917 to schedule fingerprinting appointments. Use requesting agency information below to ensure correct processing and fees.

Please bring your **Drivers License (or other State or Federal issued Photo ID)** to your fingerprint appointment

Requesting Agency Information
ORI Number - IN920130Z

Agency Name: **Department of Financial Institutions**