



By MorphoTrust USA

New Jersey Universal Fingerprint Form

www.bioapplicant.com/nj

(1) Originating Agency Number (ORI #) NJ0050100		(2) Category LOX	(3) Statute Number 13:59-1		
(4) Reason for Fingerprinting LOCAL ORDINANCE			(5) Document Type S1	(6) Payment Information \$40.70	
(7) Contributor's Case # (Unique Identifier)			(8) Miscellaneous		
(9) First Name		(10) MI	(11) Last Name		
(12) Daytime Phone Number () -	(13) Social Security Number (Optional)		(14) Date of Birth	(15) Height	(16) Weight
(17) Maiden or Alias Last Name		(18) Place of Birth (US State if US Citizen; Country for all others)		(19) Country of Citizenship	
(20) Home Address					
Address		City	State	Zip	
(21) Gender (Select one) <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Both	(22) Hair Color	(23) Eye Color	(24) Race (Select One) <input type="checkbox"/> A] Asian/ Pacific Islander (includes Asian Indian) <input type="checkbox"/> B] Black <input type="checkbox"/> I] American Indian / Alaska Native <input type="checkbox"/> W] White (Includes Hispanic/ Spanish Origin) <input type="checkbox"/> U] Unknown		
(25) Occupation / Position (with respect to Requirement)		(26) Employer / Organization Name (with respect to Requirement)			
		Employer Address			
		City	State	Zip	
Identification Requirement - Identification must be presented at the <u>time of printing</u> . Identification presented MUST be one (1) document that is current (not expired). A combination of documents will not be accepted. The single document must include the following criteria; Photo, Name, Address (home/employer), Date of Birth and is issued by a Federal, State, County or Municipal entity for Identification purposes. Examples of acceptable ID are: 1) Valid U.S. State Photo Driver's License/ Non Driver's License, 2) U.S. Passport, 3) USCIS Permanent Resident ID Card (issued after 5/10/2010), and 4) USCIS Employment Authorization Card (issued after 10/31/2010).					

Please READ this form carefully

and follow all of the instructions provided by your agency/employer to complete the fingerprint process. You must have this form (Blocks 1 through 26) completed prior to scheduling your fingerprint appointment via the website or call center. **PLEASE PRINT LEGIBLY.** It is **required** you **present** this completed Universal Fingerprint Form, IDG_NJAPP_110113, at your scheduled appointment.

Appointment Scheduling:

Scheduling is available anytime at www.bioapplicant.com/nj. Appointments may also be scheduled through our Call Center. English and Spanish speaking agents are available at **1-877-503-5981**, Monday through Friday, 8:00AM to 5:00PM EST and Saturday, 8:00AM to 12 Noon EST.

Payment:

When an Applicant is responsible for payment, Payment Is Required at the time of scheduling. The following forms of payment are accepted: Visa, MasterCard, or electronic debit (ACH) from a checking account; accounts will be debited immediately. Money Order is the only form of payment accepted at the enrollment center.

Cancel/ Reschedule:

Appointments may be canceled or rescheduled via the website or the call center **before the deadline of 5PM EST** the business day prior to the scheduled appointment (Saturday Noon for Monday appointments). An appointment fee of \$10.00 will be incurred by applicants who do not cancel/reschedule their appointment prior to the deadline; MorphoTrust will refund the remainder of the fee paid (state/federal search fees) to the original payment method.

Unable to be Fingerprinted:

An applicant is considered "Unable to be Fingerprinted" for any of the following reasons: Failure to appear for scheduled appointment; Inability to present proper Identification; Inability to present this completed Universal Fingerprint Form IDG_NJAPP_110113; Information on this form does not exactly match the information provided during the scheduling process. Applicants unable to be fingerprinted will incur a \$10.00 appointment fee; MorphoTrust will refund the remainder of the fee paid (state/federal search fees) to the original payment method.

PCN and Receipts:

Upon the completion of fingerprinting you will be assigned a PCN number. The PCN will be recorded on this form and on your receipt. MorphoTrust will not provide *duplicate receipts, PCN Numbers or any appointment/printing information after the time of printing.*

Applicant ID Number:	Payment Authorization:	PCN:
Scheduled Day & Date:	Scheduled Time:	Scheduled Site:
Agency Information: AVALON PD		

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

APPLICANTS MUST NOT ALTER, SHARE, OR REUSE THIS FORM

IDG_NJAPP_110113

BACKGROUND CHECK INFORMATION for Vendors, Jitney & Taxi Drivers

The NJ State Police have added a new feature to complete background checks for local ordinance requirements. For applicants who **HAVE PREVIOUSLY been fingerprinted** for our jurisdiction, they may now apply on line for a records check without having to make an appointment at IdentiGo (formerly MorphoTrack). The cost of this feature is **\$20.00** compared to the in person submission charge of \$41 and up. This feature may also be used for applications of Firearms, Local Ordinance, State Agencies and HUD Compliance.

TAXI/JITNEY Drivers/Ice Cream Vendors- Initial applicants must be physically fingerprinted in the manner described above, and then every fourth year thereafter. In the interim three years, applicants may apply to have an on line name search conducted via NJ State Police. The applicant is required to visit <https://www.njportal.com/njsp/criminalrecords/>. They will be asked to enter an **ORI number** for the Borough of Avalon which is **NJ0050100**. This would apply to any taxi driver, ice cream vendor etc... who has previously been fingerprinted for us. There may be an instance where in person fingerprinting would be required should an issue arise with the applicant and the State. This is more convenient and slightly cheaper for the applicant.

Contact the Avalon Police Department, Detective Division for questions regarding background checks (609) 967-3411.