

State of New Hampshire

Banking Department

53 Regional Drive, Suite 200 Concord, NH 03301

Telephone: (603) 271-3561 Fax: (603) 271-0750 Licensing: (603) 271-8675 www.nh.gov/banking

CRIMINAL HISTORY RECORD INFORMATION AUTHORIZATION FORM, NON-DEPOSITORY LENDER/BROKER, SERVICER, RETAIL SELLER OR DEBT **ADJUSTER**

INSTRUCTIONS:

- 1. As part of the Banking Department's license and registration application review process, criminal background checks are required for each of the applicant's individual direct owners/investors/beneficiaries of 10% or more, for each of the applicant's individual indirect owners/investors/beneficiaries of 25% or more, and for each principal, officer, manager, LLC member, partner in a partnership, director, trustee, and NH branch manager of the applicant.
- 2. Criminal record checks are conducted by the State of New Hampshire Department of Safety, State Police Division and will include an FBI record check. The fee for processing the Criminal Record check is as follows:
 - State Police fee: \$25.00 •
 - FBI fee: \$22.00 for an ink card; \$12.00 for live scan (please note that at this time live scan can only be processed in the State of New Hampshire).

The \$47.00 (or \$37.00 for live scan) may be aggregated into one check if record checks are to be performed for more than one individual. (e.g., 2 cards \$94.00) They will not accept 2 checks such as one for \$25.00 and an additional check for \$22.00). All checks and money orders for the record checks should be made payable to the "State of NH - Criminal Records."

3. To obtain a fingerprint card, which must be on a New Hampshire State Police fingerprint form, you may submit a request form from our website, http://www.nh.gov/banking/consumer-credit/, or call (603) 271-8675, or e-mail licensing@banking.nh.gov and indicate the number of cards needed and the address where they should be sent (only one address; the applicant or registrant is responsible for distribution to applicable persons within their organization) and we will send fingerprint cards out to you right away.

4. The New Hampshire cards must be taken to a local police department where a professional will take the fingerprints.

- 5. Every person *must* complete the following sections of the card:
 - a. Print the name of person whose record will be checked, "LAST NAME", "FIRST NAME", "MIDDLE NAME"; it must be legible;
 - b. Written "SIGNATURE OF THE PERSON FINGERPRINTED";
 - c. "RESIDENCE" address "OF THE PERSON FINGERPRINTED";

 - d. "DATE OF BIRTH <u>DOB</u>", "Month", "Day", "Year";
 e. Country of "CITIZENSHIP" "<u>CTZ</u>" (most will be USA);
 - All vital information (ie. "SEX", "RACE" "HGT.", "WGT.", "EYES" (color), "HAIR" f. (color), "PLACE OF BIRTH POB");
 - "DATE" the form was signed and the "SIGNATURE OF THE OFFICIAL TAKING g. FINGERPRINTS":
 - "EMPLOYER NAME AND ADDRESS"; h.
 - i. "SOCIAL SECURITY NO. SOC".

- 6. Unless the card has preprinted information in the following boxes, the Banking Department will complete the following sections of the fingerprint card for you:
 - a. "ORI";
 - b. "YOUR NO. OCA";
 - c. "FBI NO. <u>FBI</u>";
 - d. "ARMED FORCES NO. MNU";
 - e. "REASON FINGERPRINTED";
 - f. "MISCELLANEOUS NO. <u>MNU</u>.
- 7. A copy of the Department of Safety Division of State Police *Criminal History Record Information Authorization Form* follows these instructions. You may make copies of this form, and then complete a form for each person described in the first paragraph of these instructions. **Complete all items in Section I, and make sure to sign the release information in Section II of the form and have the form notarized**.
- 8. Submit a *Criminal History Record Information Authorization Form*, a fingerprint card and a fee in the amount of \$47.00, for each principal of the company listed in the application, to the Banking Department. We will forward the document(s) and check(s) to the Department of Safety. Fees covering multiple individuals may be combined into one check.

Applicant Notification and Record Challenge

Please note that your fingerprints will be used to check the criminal history records of the FBI. You can request a copy of your criminal history records directly from the FBI by going to <u>www.fbi.gov</u> or calling (304) 625-5590. You have the opportunity to complete, or challenge the accuracy of, the information contained in the FBI identification record. To change, correct, or update any information contained in the FBI identification record, you should direct your challenge to the FBI, Criminal Justice Information Services (CJIS) Division, ATTN: SCU, Mod. D-2, 1000 Custer Hollow Road Clarksburg, VW 26306. Please see Title 28, C.F.R. § 16.34 for additional information.

If you have any questions about the procedure or requirements, please call the New Hampshire Banking Department's Licensing Section at 603-271-8675.

S	tate of New H	Iampshire	Criminal Records U	Init
D D	epartment of Safety	*	33 Hazen Drive, Concor	d, NH 03305
NEW HAMPSHIRE BANKING DEPARTMENT CRIMINAL HISTORY RECORD INFORMATION AUTHORIZATION FORM				
NH RSA 361-A:2 Sales Finance & Retail Seller NH RSA 399-D:2 – D5 Debt Adjuster NH RSA 397-A:1 – A5 Mortgage Banker/Broker/Servicer				
NH RSA 399-A:1 – A:3 Small Loan Lender NH RSA 399-G:5 Money Transmitters				
INSTRUCTIONS				
NH RSA 106-B:14 and Administrative Rule Saf-C 5700 authorizes the dissemination of NH Criminal History Record Information (CHRI) for non- criminal justice purposes. In NH, all CHRI is confidential and released only upon the knowledge and permission of the individual of whom the request is made. Individuals requesting their own record in person need only to complete Section I. If the CHRI is to be released to a third party, both Section I and Section II must be completed. All requests by mail must have both sections completed and Section II notarized.				
Name of Company:				
SECTION I (PLEASE PRINT CLEARLY)				
Last Name	First Nam	ne	Maiden	MI
Address	City		State Zi	p
Date of Birth	Hair Colo	or Eye Co	lor Ma	ale 🗌 Female
Driver's License Num	ber	State		
My signature below signifies I am the individual listed above and the information provided is true.				
Signature Date				
Signature Date Date				
SECTION II I hereby authorize the release of my criminal record conviction(s), if any, to the following: NH Banking Department/Consumer Credit				
Address <u>53 Regional</u>	Drive City C	oncord Stat	te <u>NH</u> Zip <u>03301</u>	
Your Signature			Date	
Notary's Signature				
Signature of person/entity to receive record GERALD H. LITTLE COMMISSIONER Date				
RECORD CHALLENGE				
shall be provided to a person if after believes to be inaccurate or incorrect, following actions within 30 days of re- the challenge is valid; (2) If the chall- shall be corrected and the person and record has been corrected, the division	cting a CHRI (a) Persons or their attorneys desiring review he/she indicates he/she needs the copy to p , and shall also give a correct version of his/her record ceipt of challenge: (1) Review the records and contac enge is valid, which means there is a discrepancy bet d appropriate CJAs shall be notified; and (3) If the cha on shall notify all non-criminal justice agencies, to who tes, and results of each formal stage of the criminal just	ursue the challenge. (c) Any person may with an explanation of the reason that he at the law enforcement agency or court will ween the information submitted and the i allenge is invalid, the person shall be info om the data has been disseminated in the	aking a challenge shall identify that portion of s/she believes his/her version to be correct. (d hich submitted the record to compare the inforr information maintained by the law enforcement rmed and advised of the right to appeal pursue e last year, of the correction.(f) The person sh	his/her CHRI which he/she) The director shall take the nation to determine whether agency or court, the record ant to RSA 541. (e) When a hall be entitled to review the
WARNING: The Division of State Police is the Criminal Record Repository for the State of New Hampshire. The record you have received is based only on what has been reported to the Repository and may not be a complete Criminal History Record of the named individual.				
LIVESCAN -	\$37.00 (\$47.00 if printed at a state po	FEES lice livescan site)	□ INKED - \$47.00	
NOTE: Make checks payable to: State of NH – Criminal Records				
Applicant fingerprint card must be submitted at the same time as payment and this form.				
DSSP424 REVISED 9/15/2016				