



Producer License Fingerprint Procedure

Please carefully review the instructions below and provide your name and phone number in case Department staff must contact you regarding your fingerprints or criminal history check request.

Applicant Name: _____

Applicant Phone Number: _____

Applicant Email Address: _____

An applicant for a resident insurance producer license may have their fingerprints done by a private business or law enforcement (if available). The following requirements must be met:

- 1) If the fingerprinting service conducting the fingerprints does **ink prints**, two fingerprint cards must be done. If the fingerprints are obtained by **scanning**, only one set of fingerprints is required, so only one card is needed. **The fingerprint cards must be sealed in an envelope and initialed by the individual conducting the fingerprints.**
- 2) Attached is a Criminal History Record Check Request which must be completed by the applicant. The completed form must be returned to the North Dakota Insurance Department with the fingerprint card(s).
- 3) The applicant must include a check (NO starter or counter checks), cashier's check, or money order in the amount of **\$41.25**, made payable to the **North Dakota Attorney General**.

The Applicant must MAIL the following to the address below:

- 1) A separate, sealed envelope containing the fingerprint card(s)- **PLEASE DO NOT BEND THE CARDS**,
- 2) This page with applicant's name, phone number and email address provided,
- 3) The completed Criminal History Record Check Request form, and
- 4) The **\$41.25** fee made payable to the **North Dakota Attorney General**.

NORTH DAKOTA INSURANCE DEPT

600 E BOULEVARD AVE DEPT 401

BISMARCK ND 58505-0320



CRIMINAL HISTORY RECORD CHECK REQUEST PURSUANT TO NDCC 12-60-24

OFFICE OF ATTORNEY GENERAL
BUREAU OF CRIMINAL INVESTIGATION
SFN 60688 (09-2019)

FOR BCI USE ONLY

Check Number

Amount

Receipt Number

Receipt Date

SID

INSTRUCTIONS

1. Please type or print legibly and ensure that all information is complete. **Incomplete or illegible requests will be returned.**
2. If requesting Federal Bureau of Investigation (FBI) check, attach two (2) completed fingerprint cards containing the fingerprints of the subject of the record check and remit appropriate fees.

TO BE COMPLETED BY AGENCY

Mail to Attention of JANELLE MIDDLESTEAD	Telephone Number 701-328-4460	
Agency Name ND DOI- PRODUCER LICENSING DIVISION	Originating Agency Identifier (ORI) ND920382Z	
Address 600 E BOULEVARD AVE., DEPT 401	Email Address JLMIDDLESTEAD@ND.GOV	
City BISMARCK	State ND	ZIP Code 58505-0302
Comments/Miscellaneous		

AGENCY USE ONLY

Please Check One and Remit Appropriate Fees

Record Checks for Employees/Others

- ☐ ND only, remit \$15.00
☐ FBI only, remit \$26.25
☒ ND and FBI, remit \$41.25

Record Checks for Volunteers

- ☐ ND only, remit \$15.00
☐ FBI only, remit \$24.25
☐ ND and FBI, remit \$39.25

Process Control Number (PCN)

TO BE COMPLETED BY SUBJECT OF RECORD CHECK

Last Name	First Name (no initials)	Middle Name
Last Name(s) (AKA/Maiden/Former)	First Name	Middle Name
Date of Birth	Social Security Number	
Current Address		
City	State	ZIP Code

Your fingerprints will be used to check the criminal history records of the FBI in accordance with Title 28 CFR 50.12. You have the opportunity to review or challenge the accuracy of the information contained in the FBI identification record. The procedure for obtaining a change, correction, or updating an FBI identification record are set forth in Title 28 CFR 16.34.

I understand the Applicant Rights provided on the following page and hereby authorize the North Dakota Bureau of Criminal Investigation to release my state and FBI criminal history records to the requester listed above.

A photocopy of this signed release shall have the same force and effect as the original release.

Signature	Date
-----------	------

Your social security number is requested to permit the North Dakota Bureau of Criminal Investigation to conduct a criminal history record check under N.D.C.C. § 12-60-16.6. Disclosure of your social security number is voluntary, however, if you choose not to disclose it, you will be required to provide alternative information or documentation, which may delay the criminal history record check.