

**DEPARTMENT OF CONSUMER AFFAIRS**

CALIFORNIA BOARD OF ACCOUNTANCY
2000 EVERGREEN STREET, SUITE 250
SACRAMENTO, CA 95815-3832
TELEPHONE: (916) 263-3680
FACSIMILE: (916) 263-3675
WEB ADDRESS: <http://www.cba.ca.gov>



Live Scan Services (For California Residents Only) Form BCII 8016

Purpose: To conduct a criminal history record check with the Department of Justice (DOJ) and the Federal Bureau of Investigation (FBI).

Applicability: Type A, B, C, D and E applicants **residing in California** (see reverse.)

Who Completes: Applicant completes only the Applicant Information Section of the form.

Required Action: Contact a Live Scan service for hours of operation, fees, appointment times, and acceptable methods of payment. Most law enforcement agencies will provide the Live Scan service. For the most current listing of Applicant Live Scan service locations visit the DOJ Web site at <http://ag.ca.gov>.

Submit To: Upon completion of the Live Scan process, a copy of the Request for Live Scan Service form must be mailed to the:

California Board of Accountancy
2000 Evergreen Street, Suite 250
Sacramento, California 95815-3832

Authority: Business and Professions Code Section 144.

Comments An application for licensure will not be considered complete until your criminal history record has cleared both the DOJ and the FBI.

TYPES OF LICENSURE APPLICANTS

- Type A An applicant who **passed the Uniform CPA Exam in California** and is applying for licensure as a CPA in California for the first time.
- Type B An applicant who **passed the Uniform CPA Exam in a state other than California** and has not been issued a valid license to practice public accounting in any state and is applying for licensure as a CPA in California for the first time.
- Type C An applicant who **passed the Uniform CPA Exam in a state other than California** and was issued a valid license to practice public accounting in a state other than California.
- Type D An applicant who **previously was licensed as a CPA in California** and the certificate was cancelled after five years for nonpayment of license renewal fees.
- Type E An applicant who **passed the** Canadian Chartered Accountant Uniform Certified Public Accountant Qualification Examination (**CAQEX**) of the American Institute of Certified Public Accountants (AICPA) **or** the International Uniform Certified Public Accountant Qualification Examination (**IQEX**) of the AICPA and the National Association of State Boards of Accountancy (NASBA).
- Type F A California licensee originally issued a license to perform general accounting services who has now completed attest experience.



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APPLICANT LIVE SCAN INSTRUCTIONS

Pursuant to Section 144 of the California Business and Professions Code, applicants applying for a California Certified Public Accountant license are required to furnish their fingerprints for purposes of conducting criminal history record checks with the Department of Justice (DOJ) and the Federal Bureau of Investigation (FBI).

The California Department of Justice has implemented Applicant Live Scan, a system for the electronic submission of fingerprints and the subsequent automated background check. Applicant Live Scan replaces the process of recording an individual's fingerprints using ink and a standard 8" x 8" fingerprint card.

Applicants unable to utilize California's Applicant Live Scan system must submit two fingerprint cards. You may request the fingerprint cards by contacting the California Board of Accountancy's Initial Licensing Unit by e-mail at licensinginfo@cba.ca.gov or by telephone at (916) 561-1701.

INSTRUCTIONS FOR COMPLETING "REQUEST FOR LIVE SCAN SERVICE" FORM (BCII 8016)

You must **complete only the Applicant Information Section** of the enclosed Request for Live Scan Service Applicant Submission form. The form must be taken to an Applicant Live Scan service. Most law enforcement agencies (i.e., Sheriff or Police Department) will provide the Live Scan service. You may view a current list of Applicant Live Scan service locations on the DOJ Web site at <http://ag.ca.gov>. Not all locations listed on the DOJ Web site provide this service for applicants.

You should call the Live Scan service for their hours of operation, fees, appointment times and acceptable method of payment. All fees including the DOJ and the FBI fingerprint clearance fees must be paid directly to the Live Scan service. **Once you have completed the Live Scan process, a copy of the Request for Live Scan Service form must be mailed to the California Board of Accountancy at the address on the form.** If you need an additional Request for Live Scan Service Applicant Submission form, call or write the California Board of Accountancy office at the telephone number or address above.

Your application for licensure will not be considered complete until your criminal history record check is completed and all other required documentation is received.



REQUEST FOR LIVE SCAN SERVICE

Applicant Submission

A0001

ORI (Code Assigned by DOJ)

ACCOUNT LICENSE 5033 BPC

Authorized Applicant Type

Type of License/Certification/Permit OR Working Title (Maximum 30 characters – if assigned by DOJ, use exact title assigned) **CERTIFIED PUBLIC ACCOUNTANT**

Contributing Agency Information:

CALIFORNIA BOARD OF ACCOUNTANCY (CBA)

Agency Authorized to Receive Criminal Record Information

01482

Mail Code (five digit code assigned by DOJ)

2000 EVERGREEN STREET, SUITE 250

Street Address or PO Box

SOLE' CUNNINGHAM

Contact Name (mandatory for all school submissions)

SACRAMENTO

City

CA

State

95815

ZIP Code

(916) 561-1768

Contact Telephone Number

Applicant Information:

Last Name

First Name

Middle Initial

Suffix

Other Name
(AKA) or Alias

First

Suffix

Date of Birth

Sex

Male

Female

Driver's License Number

Height

Weight

Eye Color

Hair Color

Billing
Number

APPLICANT MUST PAY

(Agency Billing Number)

Misc.
Number

(Other Identification Number)

Place of Birth (State or Country)

Social Security Number

Home

Address Street Address or PO Box

City

State

ZIP Code

Your Number:

OCA Number (Agency Identifying Number)

Level of Service: DOJ

FBI

If re-submission, list original ATI number:
(Must provide proof of rejection)

Original ATI Number

Employer (Additional response for agencies specified by statute):

Employer Name

Mail Code (five digit code assigned by DOJ)

Street Address or PO Box

City

State

ZIP Code

Telephone Number (optional)

Live Scan Transaction Completed By:

Name of Operator

Date

Transmitting Agency

LSID

ATI Number

Amount Collected/Billed

ORIGINAL – Live Scan Operator

SECOND COPY - Applicant

THIRD COPY (if needed) – Requesting Agency