



# COMMISSIONAIRES

## IDENTIFICATION SERVICES

Commissionaires BC can now scan your ink and roll fingerprints and create an electronic file which we can submit to the RCMP for processing. This reduces the processing time for a no record found search from 120 days to as little as 72 hours with results being mailed to anywhere in North America in as little as a week.

This service benefits clients needing an RCMP certified background check that live in an area which does not have digital fingerprinting services as well as clients currently living overseas.

<b>Step 1</b>	<b>Fingerprints</b>	Form provided on page 3.
	Have your fingerprints put onto an RCMP C216C fingerprint form by an approved fingerprinting agency	
	When completing the form, make sure that the name, address, and official stamp of the fingerprinting agency is completed in the "Fingerprinting Agency" field.	You can leave the "Contributing Agency" field blank.
	Ensure that the official taking your fingerprints prints his/her name on the form and also signs in the space indicated "Signature of Official taking fingerprints"	NOTE: we cannot process the transaction if there is no signature AND printed name.
	Please show the example C216C form to the fingerprinting agency, and ask that they follow the simple suggestions for placing the fingerprints on the form. This will greatly improve the chance of a successful scan to digital.	Example provided on page 4.
<b>Step 2</b>	<b>Identification</b>	
	A) Include notarized photocopies of both sides of TWO pieces of valid government-issued identification. At least ONE must bear a photograph.	Expired documents are not acceptable.
	Examples of identification which can be used:	
	<ul style="list-style-type: none"> <li>- Passport</li> <li>- Citizenship card or permanent resident card</li> <li>- Immigration document (i.e. landing papers)</li> <li>- Birth certificate</li> <li>- Driver's licence</li> </ul>	
	B) Include a passport style photo with your name & date of birth written on the back of the photo	This will be the photo on your certificate from RCMP.

Step 3	<b>3<sup>rd</sup> Party Waiver</b>  If you would like results to be via courier or to any address other than your home address, complete the 3 <sup>rd</sup> party waiver and place your left thumb print in the box provided. This authorizes the RCMP to send results to our office, enabling us to courier the results to you or any other requested address via FedEx at cost.	Form provided on page 5.				
Step 4	<b>Payment Authorization</b>  Our processing fee is \$200.00 CAN plus taxes and the applicable \$25 RCMP fee. The RCMP fee is only applicable to some transaction types. The table below identifies the transaction types which require the RCMP fee.	Form provided on page 6.				
<table border="1"> <thead> <tr> <th data-bbox="467 697 717 737">RCMP Fee Required</th> <th data-bbox="717 697 992 737">RCMP Fee Not Required</th> </tr> </thead> <tbody> <tr> <td data-bbox="467 737 717 1138">           Adoption            Visas, foreign travel, US waivers            Immigration to foreign countries            Name change applicants            Record suspension applicants            Employment (Private Industry)         </td> <td data-bbox="717 737 992 1138">           Immigration to Canada            Citizenship applicants            Employment (Federal Government)         </td> </tr> </tbody> </table>			RCMP Fee Required	RCMP Fee Not Required	Adoption Visas, foreign travel, US waivers Immigration to foreign countries Name change applicants Record suspension applicants Employment (Private Industry)	Immigration to Canada Citizenship applicants Employment (Federal Government)
RCMP Fee Required	RCMP Fee Not Required					
Adoption Visas, foreign travel, US waivers Immigration to foreign countries Name change applicants Record suspension applicants Employment (Private Industry)	Immigration to Canada Citizenship applicants Employment (Federal Government)					
Step 5	<b>Return Address</b>  The certificate issued from RCMP will be couriered along with all documents to the address provided. The credit card information provided will be used for the return courier fees.	Form provided on page 7.				
Step 6	<b>Courier all documents to:</b>  Commissionaires BC ID Services Section 801-595 Howe Street Vancouver, BC V6C 2T5 Canada  Telephone 604-646-3330 Ext 2354	<b>NOTE:</b> Please ensure that documents are couriered and not sent by Regular Mail, as the package will contain your highly sensitive and confidential information.				

**Additional Information:**

Commissionaires BC will not accept responsibility in any way if the scanned process fails because of poor quality fingerprints that are supplied by the client for scanning purposes. Please take care to follow instructions as incomplete documents will delay the process.

<b>TO - À</b> The Director General Canadian Criminal Real Time Identification Services RCMP, NPS Building 1200 Vanier Parkway Ottawa, Ontario K1A 0R2  Directeur General Services canadiens d'identification criminelle en temps reel Quartier General de la GRC, immeuble des SNP 1200, promenade Vanier Ottawa (ont) K1A 0R2	<b>FOR IDENTIFICATION PURPOSES ONLY - AUX FINS DE L'IDENTIFICATION SEULEMENT</b>		
	TCN - NCT	AFIS - SAID	BAR CODE - BARRE-CODE
	Year of Birth Date de naissance		

<b>R I G H T  F I N G E R P R I N T</b>	Thumb - Pouce	Index	Middle - Médius	Ring - Annulaire	Little - Auriculaire

<b>L E F T  F I N G E R P R I N T</b>					

IF ANY FINGERPRINT IS NOT RECORDED, GIVE REASON - IF AMPUTATED, DEFORMED OR INJURED, GIVE DATE  
 S'IL MANQUE UNE EMPREINTE, DIRE POURQUOI - EN CAS D'AMPUTATION, DE DÉFORMATION OU DE BLESSURE, DONNER LA DATE

FOUR FINGERS TAKEN TOGETHER - IMPRESSION SIMULTANÉE DES QUATRE DOIGTS

LEFT THUMB - POUCE GAUCHE      RIGHT THUMB - POUCE DROIT

Signature of person fingerprinted - Signature de la personne dactyloscopiée	Signature of Official taking fingerprints - Signature du préposé aux empreintes	Date Y-A    M    D-J
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Surname (include former names, maiden name, etc.) - Nom de famille (y compris noms utilisés précédemment, nom de jeune fille, etc.)

Given Names - Prénoms	DOB - DDN Y-A    M    D-J	Sex - Sexe <input type="checkbox"/> M <input type="checkbox"/> F	Telephone No. - N° de téléphone
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Address - Adresse	Postal code - Code postal
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Reason for application (MUST BE COMPLETED) - Raison de la demande (DOIT ÊTRE REMPLI)			<input type="checkbox"/> Vulnerable Sector (attach consent Form) Secteur sensible (joindre la formule de consentement)
<input type="checkbox"/> Visa/Waiver Visa/désistement	<input type="checkbox"/> Pardon Application Demande de réhabilitation	<input type="checkbox"/> Privacy Act Loi sur la protection des renseignements personnels	
<input type="checkbox"/> Canadian Citizenship Immigration to Canada (LIS)	<input type="checkbox"/> Adoption Adoption	<input type="checkbox"/> Employment (specify) Emploi (préciser) _____	Reference Number - Numéro de référence
<input type="checkbox"/> Immigration au Canada (SIR)	<input type="checkbox"/> Volunteer Bénévolat	<input type="checkbox"/> Other (specify) Autre (préciser) _____	

Fingerprinting Agency/Department Service ou organisme prenant les empreintes	Contributing Agency/Department Service ou organisme contributeur
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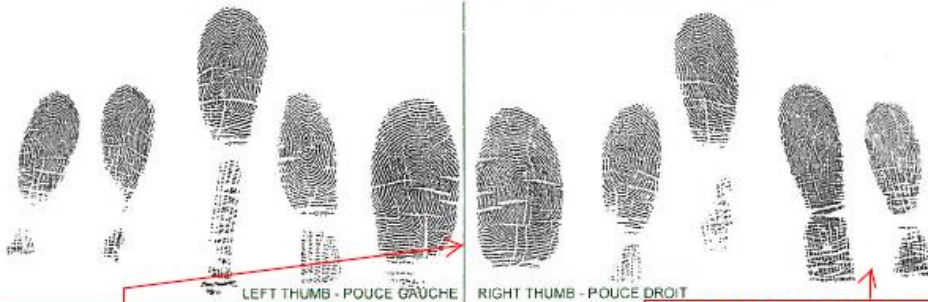
TO - A Commissioner, RCMP Attn: Identification Services Directorate, Civil Section PO Box 8885 Ottawa, Ontario K1G 3M8  Le commissaire de la GRC À l'att. de la Direction du service de l'identité judiciaire, Section des affaires civiles C P 8885 Ottawa (Ontario) K1G 3M8	FOR IDENTIFICATION PURPOSES ONLY - AUX FINS DE L'IDENTIFICATION SEULEMENT		
	TCN - NCT	AFIS - SAID	BAR CODE - BARRE-CODE
	Year of Birth Date de naissance		

R I G H T H I N G F I N G E R S	Thumb - Pouce	Index	Middle - Medius	Ring - Annulaire	Little - Auriculaire
L E F T H A N D					

**Rolled Impressions:**  
Place them square in all fields  
Impression must be down to the first  
finger joint

IF ANY FINGERPRINT IS NOT RECORDED, GIVE REASON - IF AMPUTATED, DEFORMED OR INJURED, GIVE DATE  
S'IL MANQUE UNE EMPREINTE, DIRE POURQUOI - EN CAS D'AMPUTATION, DE DEFORMATION OU DE BLESSURE, DONNER LA DATE

FOUR FINGERS TAKEN TOGETHER - IMPRESSION SIMULTANÉE DES QUATRE DOIGTS



**Thumb impressions:**  
Place thumb impressions on either side  
of the centre line

**Slapped Impressions:**  
Slap index, middle and ring finger  
together  
Slap little finger separately and place it  
next to the ring finger  
Make sure the slaps are not slanted at  
an angle

Signature of Official taking fingerprints - Signature de l'agent	
Previous names used - Prénoms nom(s) utilisés précédemment, nom de famille	
Given Names - Prénoms	DOB - DDN Y-A M D-J
Address - Adresse	
Postal code - Code postal	

Reason for application (MUST BE COMPLETED) - Raison de la demande (DOIT ÊTRE REMPLI)

<input type="checkbox"/> Visa/Waiver Visa/désistement	<input type="checkbox"/> Pardon Application Demande de réhabilitation	<input type="checkbox"/> Privacy Act Loi sur la protection des renseignements personnels	<input type="checkbox"/> Vulnerable Sector (attach consent Form) Secteur sensible (joindre la formule de consentement)
<input type="checkbox"/> Canadian Citizenship Citoyenneté canadienne	<input type="checkbox"/> Adoption	<input type="checkbox"/> Employment (specify) Emploi (préciser)	Reference Number - Numéro de référence
<input type="checkbox"/> (LIS) Immigration au Canada (SIR)	<input type="checkbox"/> Volunteer Bénévolet	<input type="checkbox"/> Other (specify) Autre (préciser)	

Fingerprinting Agency/Department Service ou organisme prenant les empreintes	Contributing Agency/Department Service ou organisme contributeur
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## IDENTIFICATION SERVICES

**Third Party Waiver:**

I, (Name) \_\_\_\_\_

Born: (Date of birth) \_\_\_\_\_

I hereby authorize the Royal Canadian Mounted Police central repository of criminal records to release my Criminal Record search results to the following third party:

Commissionaires BC  
ID Services  
801-595 Howe St.  
Vancouver BC V6C 2T5  
Canada  
604 646 3330 Ext 2354

I fully understand that I am entitled to receive this information personally, and my refusal to consent to disclosure of this information to the above person or company will not have any negative consequences on my request.

Place LEFT thumbprint in the box above (flat impression).

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



# COMMISSIONAIRES

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**Payment Authorization (Please print):**

**Credit Card Type (Please circle one):**      **Mastercard**      **Visa**

**Name of Cardholder:** \_\_\_\_\_

**Credit Card Number:** \_\_\_\_\_

**Expiration Date:** \_\_\_\_\_

**I authorize Commissionaires BC to charge the processing fee of \$200.00 CAN plus GST and RCMP fee of \$25.00, if applicable, for fingerprint scanning and I authorize submission of my fingerprints to the RCMP.**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_



# COMMISSIONAIRES

## IDENTIFICATION SERVICES

**Return Address (Please print):**

Upon Commissionaires BC receiving your RCMP certified document, please confirm the return address which will be sent by courier at your cost.

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Postal Code:** \_\_\_\_\_

**City:** \_\_\_\_\_

**Country:** \_\_\_\_\_



# COMMISSIONAIRES

## IDENTIFICATION SERVICES

**Checklist:**

**C216C Fingerprint Form**

**Passport style photograph**

**Third Party Consent Form**

**Notarized copies of 2 pieces of valid identification**

**Payment Authorization Form**

**Return Address form**