



# COMMISSIONAIRES

## FINGERPRINTING SERVICES

Commissionaires BC can now digitally 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 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.

- 2 sets of ink prints required

\*\* If available in your area you can send two printouts of Live Scan digital fingerprint files.

Have your fingerprints put onto an RCMP C216C fingerprint form by an approved fingerprinting agency

Form provided on page 3.

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.

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### Step 2

#### Identification

A) Include photocopies of the front of TWO pieces of valid government-issued identification. At least ONE must bear a photograph.

Expired documents are not acceptable.

\*\*Your fingerprinting agency must stamp your ID copies at the time of fingerprinting to confirm that the ID copies match the person being fingerprinted.

Examples of identification which can be used:

- Passport
- Citizenship card or permanent resident card
- Immigration document (i.e. landing papers)
- Birth Certificate
- Driver's license

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****3<sup>rd</sup> Party Waiver**

The RCMP will only mail clearance certificates to Canadian and USA addresses, so for out of country clients, a 3<sup>rd</sup> Party Waiver is required. This confirms you authorize Commissionaires BC to submit your request and receive results on your behalf. Please complete, and have your left thumbprint placed in the box provided. If you have prints completed digitally using LiveScan equipment, we will use the thumbprint from the second set of prints in place of an ink thumbprint. We will send your RCMP clearance letter to you via FEDEX.

Note: A 3<sup>rd</sup> Party Waiver is also required within Canada or the USA if results are being sent to a business/employer or friend's home, and not being sent to your home address.

**Step 4****Payment Authorization**

Our processing fee is \$150.00 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.

RCMP Fee Required	RCMP Fee Not Required
Adoption	Immigration to Canada
Visas, foreign travel, US waivers	Citizenship applicants
Immigration to foreign countries	Employment (Federal Government)
Name change applicants	
Record suspension applicants	
Employment (Private Industry)	

**Step 5****Return Address**

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****Courier all documents to:**

Commissionaires BC  
Fingerprinting Services  
#600-595 Howe Street  
Vancouver, BC  
Canada V6C 2T5

T: 604 646 3330

**NOTE:** Please ensure that documents are couriered and not sent by Regular Mail, as the package will contain your highly sensitive and confidential information. You are responsible for courier fees.

**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. We recommend before you send hard copies that you email us a scan of your fingerprint forms so that we can ensure they will meet requirements. (Send email to [cardscan@commbc.ca](mailto:cardscan@commbc.ca))

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 O I N D E X</b>	Thumb - Pouce	Index	Middle - Médus	Ring - Annulaire	Little - Auriculaire

<b>L E F T T H U B H E</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
Address - Adresse			Postal code - Code postal

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) Reference Number - Numéro de référence
<input type="checkbox"/> Visa/Waiver Visa/désistement  <input type="checkbox"/> Canadian Citizenship Citoyenneté canadienne Immigration to Canada (LIS) <input type="checkbox"/> Immigration au Canada (SIR)	<input type="checkbox"/> Pardon Application Demande de réhabilitation  <input type="checkbox"/> Adoption  <input type="checkbox"/> Volunteer Bénévolat	<input type="checkbox"/> Privacy Act Loi sur la protection des renseignements personnels  <input type="checkbox"/> Employment (specify) Emploi (préciser) _____  <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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# COMMISSIONAIRES

## FINGERPRINTING SERVICES

<b>TO - A</b> 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		<b>FOR IDENTIFICATION PURPOSES ONLY - AUX FINS DE L'IDENTIFICATION SEULEMENT</b>																	
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		Year of Birth Date de naissance																	
<b>R I G H T H A N D</b>	Thumb - Pouce	Index	Middle - Médus	Ring - Annulaire	Little - Auriculaire														
<b>L E F T H A N D</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																	
<b>Thumb impressions:</b> Place thumb impressions on either side of the centre line		<b>Slapped Impressions:</b> 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 - S		Imprimés noms utilisés précédemment, nom de																	
Given Names - Prénoms		DOB - DDN Y-A M D-J																	
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### 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:

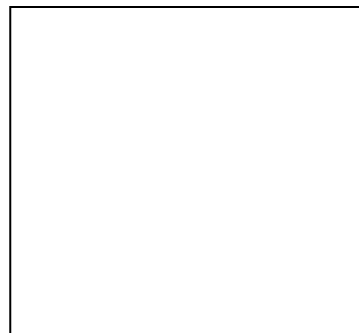
Commissionaires BC  
Fingerprinting Services  
#600-595 Howe Street  
Vancouver, BC  
Canada V6C 2T5

T: 604 646 3330

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.

Please indicate the specific reason for clearance so that we can accurately detail your request to the RCMP:

\_\_\_\_\_



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

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



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## CONTACT INFORMATION

Client Name: \_\_\_\_\_

Email: \_\_\_\_\_

Phone Number: (       ) \_\_\_\_\_

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

City, Country: \_\_\_\_\_

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

## RETURN ADDRESS (Please print)

☐ **As Above (send hard copy clearance form).**

☐ **Please send only a scanned email copy of clearance form.  
(Do not send hard copy form)**

Upon Commissionaires BC receiving your RCMP certified document, please confirm the return address to which will be sent by courier at your cost using your credit card information provided.

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

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

City, Country: \_\_\_\_\_

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

**PAYMENT AUTHORIZATION (Please print)**

Note: We only accept credit cards, not debit cards (including Visa Debit and Master Card Debit cards).

Credit Card Type: ☐ Mastercard ☐ VISA

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

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

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

CVC Security Code (Back of Card): \_\_\_\_\_

I authorize Commissionaires BC to charge the processing fee of \$150.00 CAN plus GST and RCMP fee of \$25.00 — if applicable, for fingerprinting scanning and I authorize submission of my fingerprints to the RCMP.

I further understand that I am responsible for the courier charges to and from Commissionaires.







\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date





## 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	
Credit Card information	