



Instructions for Insurance Company Officers and Directors

Insurer/Company Fingerprint Requirement: All company officers, directors, key managerial personnel, and individuals with a 10 percent or more beneficial ownership in the applicant and applicant's controlling parent will need to be fingerprinted. Fingerprints must be taken at either a local law enforcement agency or any vendor who is authorized to complete fingerprint impressions on a Federal Bureau of Investigations (FBI) fingerprint card (FD-258) to be sent to Accurate Biometrics.

Completion of Live Scan Form, BCIA 8016-CIU: The following information must be entered in the applicant information: last name, first name, AKA or alias, date of birth, sex, height, weight, eye color, hair color, place of birth, social security number (SSN), driver's license number, and residence address.

California Residents Submitting Live Scan Form, BCIA 8016-CIU:

The California Department of Justice (DOJ) maintains a listing of live scan fingerprinting services available to the public. The DOJ list is broken down by county. Fees vary from location to location. Applicants are encouraged to contact a live scan vendor in advance to verify their current operating hours, fees, etc. This list is available at the following website:

<http://ag.ca.gov/fingerprints/publications/contact.php>

Processing and Service Fee: The cost of Accurate Biometrics' live scan service is \$75. The \$75 processing fee covers the following services: FBI processing fee of \$17, California DOJ processing fee of \$32, and Accurate Biometrics' rolling fee of \$26 (effective May 1, 2024). The applicant may pay with all major credit cards: VISA, MasterCard, American Express, and Discover Card. In addition, a money order, cashier's check, company check, or personal check in the amount of \$75 made payable to "Accurate Biometrics" will also be accepted.

Submission of Fingerprint Form (BCIA 8016): Make three copies of the BCIA 8016 form. Please take the **original** completed BCIA form to the live scan provider for processing. The **second copy** is to be mailed to the California Department of Insurance, Curriculum and Officer Review Bureau, Officer Background Section, 300 Capitol Mall, 16th Floor, Sacramento, CA 95814-4309. The **third copy** is to be maintained for the applicant's records.

Non-Residents Submitting Manual Fingerprint Card(s) & Live Scan Form, BCIA 8016-CIU:

The applicant is to mail the original copy of the completed Live Scan Form, BCIA 8016-CIU, the applicant's fingerprint card, and Accurate Biometrics' credit card payment form or check in the amount of \$75 made payable to:

**Accurate Biometrics
6080 Center Drive, Suite 600
Los Angeles, CA 90045**



Credit Card Payment Form

* Denotes Required Fields

Applicant

* Full Name _____

Company Name _____
(if applicable)

* Billing Address _____

Billing Address 2 _____

* City _____ * State/Province _____

* Postal (ZIP) Code _____ * Country _____

PAYMENT INFORMATION

(click to select card type)

Type of Credit Card:	Visa	Mastercard	American Express	Discover
----------------------	------	------------	------------------	----------

Credit Card Number _____

Name on Credit Card _____

Expiration Date _____	CVV Code _____	Total Amount to be Billed to Credit Card	\$75
-----------------------	----------------	--	-------------

Applicant's Phone Number (including area code) _____

Applicant's Email Address _____

I understand and agree to the cardholder agreement and by doing so, give Accurate Biometrics the permission to charge the above credit card for the amount listed.

Card Holder Signature _____

Date