

DR 8177 (06/10/19)
COLORADO DEPARTMENT OF REVENUE
 Liquor Enforcement Division
 (303) 205-2300

Report of Changes Corporation, Limited Liability Company and Partnership Liquor and Fermented Malt Beverage Licenses

LLC/Partnership
 Corporation **See Instructions and Fee Schedule on Page 2**

1. Corporate/LLC Partnership Name		2. State Tax Account Number		3. State Liquor License Number	
4. Trade Name				5. Telephone Number	
6. Address of Licensed Premises			City	State	ZIP
7. Mailing Address if different than above			City	State	ZIP

8. LIST ALL officers, directors (corporation) or Managing Members (LLC) or General Partner(s). Each officer, Director, Managing Member or Partner MUST FILL OUT a DR 8404-I (Individual History Record).

Position Held	Names	Home Address	DOB	Replaces

9. LIST ALL 10% (or more) Stockholders or 10% (or more) Members or 10% (or more) Limited Partners. Each person listed Must Fill out a DR 8404-I (Individual History Record)

Stockholders/Members/Partners owning 10% (or more) of business	% Owned	Home Address	DOB	Replaces

10. Registered Agent	Address For Service
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Oath of Application
 I declare under penalty of perjury in the second degree that this application and all attachments are true, correct, and complete to the best of my knowledge.

11. Authorized Signature	Title	Date
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Report of Local Licensing Authority
 The foregoing changes have been received and examined by the Local Licensing Authority.

12. Local Licensing Authority For		<input type="checkbox"/> County <input type="checkbox"/> Town/City
Signature	Title	Date
Attest		Date

Do Not Write In This Space – For Department of Revenue Use Only

Liability Information

License Account Number	Period	Cash Fund	Total

Instructions

Corporation, Limited Liability Company or Partnership Report of Changes

NOTE: ENCLOSE A CHECK PAYABLE TO THE AUTHORITY WHERE THIS APPLICATION WILL BE FILED FOR \$100.00 FOR EACH PERSON LISTED IN SECTIONS 8 AND 9 ON THE APPLICATION. MASTERFILE APPLICANTS MUST INCLUDE A FEE OF \$250.00 FOR EACH PERSON LISTED PAYABLE TO THE COLORADO DEPARTMENT OF REVENUE. (Application filed directly to the state)

NOTE: Check the appropriate box at the top to indicate whether you are Limited Liability Company (LLC), Partnership or Corporation.

Attach the following supporting documents to the Report of Changes Application:

- Certificate of Incorporation (or) Date stamped Articles or, Partnership Agreement (Limited and General Partnerships)
- Certificate of Good Standing dated within the last two years
- Certificate of Authority (only if a foreign corporation)
- Copies of minutes of meetings by the Corporation, Limited Liability Company or Partnership supporting the changes reflected on the front of this application. This includes letters of resignation, or appointment of any officers, or directors of a Corporation, or any managing member or members of a Limited Liability Company, or any general or limited partner in a Partnership (including husband and wife partnerships).
- NOTE: If the Licensee as listed on Line 1 has a sole stockholder that is a Corporation, or LLC, or Partnership, attach a letter designating one officer, or managing member or the general partner to be the "principal person" for the applicant. This person MUST ALSO fill out a DR8404-I (Individual History Record) and submit fingerprints by making an appointment with an approved State Vendor through the Vendor's website:

The vendors are as follows:

IdentoGO - <https://uenroll.identogo.com/>

Phone: 844-539-5539 (toll-free)

IdentoGO FAQs: <https://www.colorado.gov/pacific/cbi/identification-faqs>

Colorado Fingerprinting – <http://www.coloradofingerprinting.com>

Appointment Scheduling Website:

<http://www.coloradofingerprinting.com/cabs/>

Phone: 720-292-2722

Toll Free: 833-224-2227

This application and all supporting documents must FIRST BE FILED WITH, AND APPROVED BY, THE LOCAL LICENSING AUTHORITY (CITY, TOWN, COUNTY). Applications will not be accepted unless all applicable questions are fully answered, all supporting documents correspond exactly with the name of the applicant.

1. List the name of the Corporation or Limited Liability Company or Partnership
2. List the State Sales Tax Number.
3. List the Applicant's State Liquor License Number.
4. List the Trade name of the business.
5. List the area code and telephone number of the business.
6. List the complete address, City, State and Zip Code, of the licensed premises.
7. List your mailing address if different than number 6 above.
8. List all officers, directors of a corporation, or all managing members of the LLC, or General Partners of Limited or General Partnerships. List the person's Position, Home Address, Date of Birth and the name of the person being replaced (if applicable).
9. List all 10% (or more) stockholders or members or Partners, and indicate ownership percentage, Home Address, Date of Birth, and the name of the person they purchased ownership interest from (if applicable).
10. List the name and address for service of the Registered Agent.
11. A person authorized to sign on behalf of the Applicant must sign the application, list their title, and the date the application was signed.
12. **To be filled out by the local licensing authority only. List the name of the authority and indicate if the authority is a county, town/city. Then sign the application, list your title and attest the city/county officials signature and date the application.**

Individual History Record

To be completed by the following persons, as applicable: sole proprietors; general partners regardless of percentage ownership, and limited partners owning 10% or more of the partnership; all principal officers of a corporation, all directors of a corporation, and any stockholder of a corporation owning 10% or more of the outstanding stock; managing members or officers of a limited liability company, and members owning 10% or more of the company; and any intended registered manager of Hotel and Restaurant, Tavern and Lodging and Entertainment class of retail license

Notice: This individual history record requires information that is necessary for the licensing investigation or inquiry. All questions must be answered in their entirety or the license application may be delayed or denied. If a question is not applicable, please indicate so by "N/A". Any deliberate misrepresentation or material omission may jeopardize the license application. (Please attach a separate sheet if necessary to enable you to answer questions completely)				
1. Name of Business	Home Phone Number	Cellular Number		
2. Your Full Name (last, first, middle)	3. List any other names you have used			
4. Mailing address (if different from residence)	Email Address			
5. List current residence address. Include any previous addresses within the last five years. (Attach separate sheet if necessary)				
Street and Number	City, State, Zip	From	To	
Current				
Previous				
6. List all employment within the last five years. Include any self-employment. (Attach separate sheet if necessary)				
Name of Employer or Business	Address (Street, Number, City, State, Zip)	Position Held	From	To
7. List the name(s) of relatives working in or holding a financial interest in the Colorado alcohol beverage industry.				
Name of Relative	Relationship to You	Position Held	Name of Licensee	
8. Have you ever applied for, held, or had an interest in a Colorado Liquor or Beer License, or loaned money, furniture, fixtures, equipment or inventory to any licensee? (If yes, answer in detail.)				<input type="checkbox"/> Yes <input type="checkbox"/> No
9. Have you ever received a violation notice, suspension, or revocation for a liquor law violation, or have you applied for or been denied a liquor or beer license anywhere in the United States? (If yes, explain in detail.)				<input type="checkbox"/> Yes <input type="checkbox"/> No

10. Have you ever been convicted of a crime or received a suspended sentence, deferred sentence, or forfeited bail for any offense in criminal or military court or do you have any charges pending? (If yes, explain in detail.) Yes No

11. Are you currently under probation (supervised or unsupervised), parole, or completing the requirements of a deferred sentence? (If yes, explain in detail.) Yes No

12. Have you ever had any professional license suspended, revoked, or denied? (If yes, explain in detail.) Yes No

Personal and Financial Information

Unless otherwise provided by law, the personal information required in question #13 will be treated as confidential. The personal information required in question #13 is solely for identification purposes.

13a. Date of Birth		b. Social Security Number		c. Place of Birth		d. U.S. Citizen <input type="checkbox"/> Yes <input type="checkbox"/> No	
e. If Naturalized, state where				f. When		g. Name of District Court	
h. Naturalization Certificate Number		i. Date of Certification		j. If an Alien, Give Alien's Registration Card Number		k. Permanent Residence Card Number	
l. Height	m. Weight	n. Hair Color	o. Eye Color	p. Gender	q. Do you have a current Driver's License/ID? If so, give number and state. <input type="checkbox"/> Yes <input type="checkbox"/> No # _____ State _____		

14. Financial Information.

a. Total purchase price or investment being made by the applying entity, corporation, partnership, limited liability company, other.
\$ _____

b. List the total amount of the **personal** investment, made by the person listed on question #2, in this business including any notes, loans, cash, services or equipment, operating capital, stock purchases or fees paid. \$ _____

*** If corporate investment only please skip to and complete section (d)**
**** Section b should reflect the total of sections c and e**

c. Provide details of the personal investment described in 14b. You must account for all of the sources of this investment. (Attach a separate sheet if needed)

Type: Cash, Services or Equipment	Account Type	Bank Name	Amount

d. Provide details of the corporate investment described in 14 (a). You must account for all of the sources of this investment. (Attach a separate sheet if needed)

Type: Cash, Services or Equipment	Loans	Account Type	Bank Name	Amount

e. Loan Information (Attach copies of all notes or loans)

Name of Lender	Address	Term	Security	Amount

Oath of Applicant

I declare under penalty of perjury that this application and all attachments are true, correct, and complete to the best of my knowledge.

Authorized Signature	Print Signature	Title	Date
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Expediente de la historia personal

Deben completarlo las siguientes personas, según corresponda: propietarios únicos; socios copropietarios, independientemente del porcentaje de participación, y socios comanditarios que sean propietarios del 10% o más de la corporación; todos los ejecutivos principales de una corporación, todos los directores de una corporación y cualquier accionista de una corporación que sea propietario del 10% o más de las acciones en circulación; miembros directivos o ejecutivos de una sociedad de responsabilidad limitada y miembros que sean propietarios del 10% o más de la sociedad; y cualquier gerente que prevea registrarse para obtener una licencia de venta al por menor para las categorías de hotel y restaurante, taberna, y hospedaje y entretenimiento.

Aviso: Este expediente de la historia personal pide información necesaria para hacer las averiguaciones o investigaciones para la licencia. Si no se responden todas las preguntas en su totalidad, se puede retrasar o rechazar la solicitud de licencia. Si una pregunta no corresponde, indíquelo escribiendo "N/C". **Cualquier declaración deliberadamente falsa u omisión importante puede perjudicar la solicitud de la licencia.** (Si es necesario, adjunte otra hoja para responder las preguntas por completo).

1. Nombre del negocio		Número de teléfono de casa	Número de teléfono celular	
2. Su nombre completo (apellido, nombre, segundo nombre)		3. Liste otros nombres que haya usado		
4. Dirección postal (si es diferente a la de residencia)		Dirección de correo electrónico		
5. Escriba su dirección de residencia actual. Incluya cualquier dirección anterior de los últimos cinco años. (Adjunte otra hoja si es necesario).				
Calle y número		Ciudad, estado, código postal		Desde
Actual				Hasta
Anterior				
6. Liste todos los empleos de los últimos cinco años. Incluya los trabajos autónomos. (Adjunte otra hoja si es necesario).				
Nombre del empleador o negocio	Dirección (calle, número, ciudad, estado, código postal)	Puesto	Desde	Hasta
7. Liste los nombres de los familiares que trabajen en la industria del alcohol en Colorado o que tengan una participación financiera en esta.				
Nombre del familiar	Relación con usted	Puesto	Nombre del licenciatario	
8. ¿Alguna vez ha solicitado, poseído o tenido interés en una licencia para vender alcohol o cerveza en Colorado, o ha prestado dinero, muebles, instalaciones, equipamiento o inventario a algún licenciatario? (Si la respuesta es "Sí", responda en detalle).			Sí	No
9. ¿Alguna vez recibió un aviso de infracción, una suspensión o una cancelación por violar una ley de alcohol, o ha solicitado o le han denegado una licencia para vender alcohol o cerveza en algún lugar de los Estados Unidos? (Si la respuesta es "Sí", explique en detalle).			Sí	No

10. ¿Alguna vez lo condenaron por un delito, tuvo una sentencia en suspenso o diferida, o perdió el derecho a fianza por algún delito en un tribunal penal o militar, o tiene alguna acusación pendiente? (Si la respuesta es "Sí", explique en detalle).	Sí	No
11. ¿Está actualmente en libertad condicional (con o sin supervisión), libertad bajo palabra o cumpliendo los requisitos de una sentencia diferida? (Si la respuesta es "Sí", explique en detalle).	Sí	No
12. ¿Alguna vez le han suspendido, cancelado o rechazado una licencia profesional? (Si la respuesta es "Sí", explique en detalle).	Sí	No

Información personal y financiera

A menos que la ley disponga lo contrario, la información personal que se pide en la pregunta 13 será confidencial. La información que se pide en la pregunta 13 es solo para identificarlo.

13 a. Fecha de nacimiento		b. Número del Seguro Social		c. Lugar de nacimiento		d. Ciudadano de EE. UU.		Sí	No
e. Si está nacionalizado, indique dónde				f. Cuando		g. Nombre del tribunal de distrito			
h. Número del certificado de nacionalización			i. Fecha de certificación		j. Si es extranjero, escriba el número de su tarjeta de registro como extranjero		k. Número de tarjeta de residencia permanente		
l. Estatura	m. Peso	n. Color de pelo	o. Color de ojos	p. Sexo	q. ¿Tiene actualmente una identificación/licencia de conducir? Si es así, escriba el número y el estado.				
					Sí	No	N.º	Estado	

1. Información financiera.

a. Precio total de la compra o inversión que hará la empresa, corporación, sociedad, sociedad de responsabilidad limitada, u otra entidad que presente la solicitud. \$ _____

b. Liste la cantidad total de la inversión **personal** que hizo la persona mencionada en la pregunta 2 en este negocio, incluyendo pagarés, préstamos, dinero en efectivo, servicios o equipos, capital circulante, compras de acciones o tarifas pagadas. \$ _____

*** Si solo se hizo una inversión empresarial, pase a la sección (d) y complétela.**

**** La sección b debe reflejar el total de las secciones c y e.**

c. Amplíe la información sobre la inversión personal indicada en la sección 14b. Debe incluir todas las fuentes de esta inversión. (Adjunte otra hoja si es necesario).

Tipo: dinero en efectivo, servicios o equipos	Tipo de cuenta	Nombre del banco	Cantidad

d. Amplíe la información sobre la inversión empresarial indicada en la sección 14 (a). Debe incluir todas las fuentes de esta inversión. (Adjunte otra hoja si es necesario).

Tipo: dinero en efectivo, servicios o equipos	Préstamos	Tipo de cuenta	Nombre del banco	Cantidad

e. Información sobre el préstamo (adjunte copias de todos los pagarés o préstamos)

Nombre del prestamista	Dirección	Plazo	Garantía	Cantidad

Juramento del solicitante

Declaro bajo pena de perjurio que esta solicitud y todos los documentos adjuntos son auténticos y correctos y están completos a mi leal saber y entender.

Firma autorizada	Firma en letra de molde	Cargo	Fecha
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Affidavit - Restrictions On Public Benefits

I, _____, swear or affirm under penalty of perjury under the laws of the State of Colorado that **(check one)**:

- I am a United States citizen.
- I am not a United States citizen but I am a Permanent Resident of the United States.
- I am not a United States citizen but I am lawfully present in the United States pursuant to Federal law.
- I am a foreign national not physically present in the United States.

I understand that this sworn statement is required by law because I have applied for a public benefit. I understand that state law requires me to provide proof that I am lawfully present in the United States prior to receipt of this public benefit. I further acknowledge that making a false, fictitious, or fraudulent statement or representation in this sworn affidavit is punishable under the criminal laws of Colorado as perjury in the second degree under Colorado Revised Statute 18-8-503 and it shall constitute a separate criminal offense each time a public benefit is fraudulently received.

Signature

Date (MM/DD/YY)



Fingerprinting for License Applications Colorado Applicant Background Services (CABS)

Privacy Statement – Notice to Applicants

The City of Northglenn is authorized to collect criminal history record information (“CHRI”) to investigate the qualifications of license applicants under the following Colorado Revised Statute (C.R.S.) Sections:

- Liquor Licensing: C.R.S. 44-3-307(3)(a)
- Marijuana Licensing: C.R.S. 44-10-307(4)(a)
- Other Licenses, as applicable (public check, CBI only): C.R.S. 24-72-304

You are hereby notified that, where applicable, in addition to the criminal history records of the Colorado Bureau of Investigation (CBI), your fingerprints may be used to check the criminal history records of the Federal Bureau of Investigation (FBI). When you submit your fingerprints and associated personal information, you must be provided with, and acknowledge receipt of, the documents attached to this notice:

1. Privacy Act Statement
2. Privacy Act Applicant Rights
3. Colorado Bureau of Investigation (CBI) Notice to Applicants

If you have a CHRI record, your license application may not be denied based on your record until you have been afforded a reasonable time to correct or complete your record, or until you have declined to do so. If your fingerprint background check reveals a CHRI record, you may seek a change, correction, or update of your record in accordance with the Colorado Bureau of Investigation Notice to Applicants and the procedures set forth in at Title 28, Code of Federal Regulations (CFR), Section 16.34.

Acknowledgement of Applicant

By signing below, the applicant acknowledges its receipt of this document and the Privacy Act Statement, the Privacy Act Applicant Rights Statement, and the CBI Notice to Applicants.

Signature

Printed Name

Date

Privacy Act Statement

This privacy act statement is located on the back of the [FD-258 fingerprint card](#).

Authority: The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

Principal Purpose: Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.

Routine Uses: During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental or authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

As of 03/30/2018

See Page 2 for Spanish translation.

Declaración de la Ley de Privacidad

Esta declaración de la ley de privacidad se encuentra al dorso del [FD-258 tarjeta de huellas digitales](#).

Autoridad: La adquisición, preservación, e intercambio de huellas digitales e información relevante por el FBI es autorizada en general bajo la 28 U.S.C. 534. Dependiendo de la naturaleza de su solicitud, la autoridad incluye estatutos federales, estatutos estatales de acuerdo con la Pub. L. 92-544, Órdenes Ejecutivas Presidenciales, y reglamentos federales. El proveer sus huellas digitales e información relevante es voluntario; sin embargo, la falta de hacerlo podría afectar la terminación o aprobación de su solicitud.

Propósito Principal: Ciertas determinaciones, tal como empleo, licencias, y autorizaciones de seguridad, podrían depender de las investigaciones de antecedentes basados en huellas digitales. Se les podría proveer sus huellas digitales e información relevante/ biométrica a la agencia empleadora, investigadora, o responsable de alguna manera, y/o al FBI con el propósito de comparar sus huellas digitales con otras huellas digitales encontradas en el sistema Next Generation Identification (NGI) del FBI, o su sistema sucesor (incluyendo los depósitos de huellas digitales latentes, criminales, y civiles) u otros registros disponibles de la agencia empleadora, investigadora, o responsable de alguna manera. El FBI podría retener sus huellas digitales e información relevante/biométrica en el NGI después de terminar esta solicitud y, mientras las mantengan, sus huellas digitales podrían continuar siendo comparadas con otras huellas digitales presentadas a o mantenidas por el NGI.

Usos Rutinarios: Durante el procesamiento de esta solicitud y mientras que sus huellas digitales e información relevante/biométrica permanezcan en el NGI, se podría divulgar su información de acuerdo a su consentimiento, y se podría divulgar sin su consentimiento de acuerdo a lo permitido por la Ley de Privacidad de 1974 y todos los Usos Rutinarios aplicables según puedan ser publicados en el Registro Federal, incluyendo los Usos Rutinarios para el sistema NGI y los Usos Rutinarios Generales del FBI. Los usos rutinarios incluyen, pero no se limitan a divulgación a: agencias empleadoras gubernamentales y no gubernamentales autorizadas responsables por emplear, contratar, licenciar, autorizaciones de seguridad, y otras determinaciones de aptitud; agencias de la ley locales, estatales, tribales, o federales; agencias de justicia penal; y agencias responsables por la seguridad nacional o seguridad pública.

A partir de 30/03/2018

NONCRIMINAL JUSTICE APPLICANT'S PRIVACY RIGHTS

As an applicant who is the subject of a national fingerprint-based criminal history record check for a noncriminal justice purpose (such as an application for employment or a license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below. All notices must be provided to you in writing.¹ These obligations are pursuant to the Privacy Act of 1974, Title 5, United States Code (U.S.C.) Section 552a, and Title 28 Code of Federal Regulations (CFR), 50.12, among other authorities.

- You must be provided an adequate written FBI Privacy Act Statement (dated 2013 or later) when you submit your fingerprints and associated personal information. This Privacy Act Statement must explain the authority for collecting your fingerprints and associated information and whether your fingerprints and associated information will be searched, shared, or retained.²
- You must be advised in writing of the procedures for obtaining a change, correction, or update of your FBI criminal history record as set forth at 28 CFR 16.34.
- You must be provided the opportunity to complete or challenge the accuracy of the information in your FBI criminal history record (if you have such a record).
- If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the officials deny you the employment, license, or other benefit based on information in the FBI criminal history record.
- If agency policy permits, the officials may provide you with a copy of your FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, you may obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained at <https://www.fbi.gov/services/cjis/identity-history-summary-checks> and <https://www.edo.cjis.gov>.
- If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that contributed the questioned information to the FBI. Alternatively, you may send your challenge directly to the FBI by submitting a request via <https://www.edo.cjis.gov>. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34.)
- You have the right to expect that officials receiving the results of the criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.³

¹ Written notification includes electronic notification, but excludes oral notification.

² <https://www.fbi.gov/services/cjis/compact-council/privacy-act-statement>

³ See 5 U.S.C. 552a(b); 28 U.S.C. 534(b); 34 U.S.C. § 40316 (formerly cited as 42 U.S.C. § 14616), Article IV(c); 28 CFR 20.21(c), 20.33(d) and 906.2(d).

DERECHOS DE PRIVACIDAD DE SOLICITANTES - JUSTICIA, NO CRIMINAL

Como solicitante sujeto a una indagación nacional de antecedentes criminales basado en huellas dactilares, para un propósito no criminal (tal como una solicitud para empleo o una licencia, un propósito de inmigración o naturalización, autorización de seguridad, o adopción), usted tiene ciertos derechos que se entablan a continuación. Toda notificación se le debe proveer por escrito.¹ Estas obligaciones son de acuerdo al Privacy Act of 1974, Title 5, United States Code (U.S.C.) Section 552a, y Title 28 Code of Federal Regulations (CFR), 50.12, entre otras autorizaciones.

- Se le debe proveer una Declaración de la Ley de Privacidad del FBI (con fecha de 2013 o más reciente) por escrito cuando presente sus huellas digitales e información personal relacionada. La Declaración de la Ley de Privacidad debe explicar la autorización para tomar sus huellas digitales e información relacionada y si se investigarán, compartirán, o retendrán sus huellas digitales e información relacionada.²
- Se le debe notificar por escrito el proceso para obtener un cambio, corrección, o actualización de su historial criminal del FBI según delineado en el 28 CFR 16.34.
- Se le tiene que proveer una oportunidad de completar o disputar la exactitud de la información contenida en su historial criminal del FBI (si tiene dicho historial).
- Si tiene un historial criminal, se le debe dar un tiempo razonable para corregir o completar el historial (o para rechazar hacerlo) antes de que los funcionarios le nieguen el empleo, licencia, u otro beneficio basado en la información contenida en su historial criminal del FBI.
- Si lo permite la política de la agencia, el funcionario le podría otorgar una copia de su historial criminal del FBI para repasarlo y posiblemente cuestionarlo. Si la política de la agencia no permite que se le provea una copia del historial, usted puede obtener una copia del historial presentando sus huellas digitales y una tarifa al FBI. Puede obtener información referente a este proceso en <https://www.fbi.gov/services/cjis/identity-history-summary-checks> y <https://www.edo.cjis.gov>.
- Si decide cuestionar la veracidad o totalidad de su historial criminal del FBI, deberá presentar sus preguntas a la agencia que contribuyó la información cuestionada al FBI. Alternativamente, puede enviar sus preguntas directamente al FBI presentando un petición por medio de <https://www.edo.cjis.gov>. El FBI luego enviará su petición a la agencia que contribuyó la información cuestionada, y solicitará que la agencia verifique o corrija la información cuestionada. Al recibir un comunicado oficial de esa agencia, el FBI hará cualquier cambio/corrección necesaria a su historial de acuerdo con la información proveída por la agencia. (Vea 28 CFR 16.30 al 16.34.)
- Usted tiene el derecho de esperar que los funcionarios que reciban los resultados de la investigación de su historial criminal lo usarán para los propósitos autorizados y que no los retendrán o diseminarán en violación a los estatutos, normas u órdenes ejecutivos federales, o reglas, procedimientos o normas establecidas por el National Crime Prevention and Privacy Compact Council.³

¹ La notificación por escrito incluye la notificación electrónica, pero excluye la notificación verbal.

² <https://www.fbi.gov/services/cjis/compact-council/privacy-act-statement>

³ Vea 5 U.S.C. 552a(b); 28 U.S.C. 534(b); 34 U.S.C. § 40316 (anteriormente citada como 42 U.S.C. § 14616), Article IV(c); 28 CFR 20.21(c), 20.33(d) y 906.2(d).



COLORADO
Bureau of Investigation
Department of Public Safety

Biometric Identification and Records Unit
690 Kipling Street, Suite 4000
Denver, CO 80215
303-239-4208

NOTICE TO APPLICANTS

As an applicant for a position requiring fingerprints to be submitted to the Colorado Bureau of Investigation and the Federal Bureau of Investigation, YOUR FINGERPRINTS WILL BE SUBMITTED TO AND RETAINED BY THESE AGENCIES TO CHECK STATE AND FBI RECORDS.

Discrepancies on your Colorado record can be challenged and corrected by contacting the Colorado Bureau of Investigation at 690 Kipling St., Suite 4000, Denver, CO 80215, or by calling the Identification Unit at (303) 239-4208. Additional information is available from the CBI'S Website at <https://www.colorado.gov/pacific/cbi/identity-theft-and-mis-identification>

Disposition information is available from the website <https://www.courts.state.co.us>
For Denver cases, <https://www.denvercountycourt.org/>

Sealing information is available from the website
<https://www.courts.state.co.us/Forms//SubCategory.cfm?Category=Seal>
or <https://www.colorado.gov/pacific/cbi/disposition-update-and-sealing-arrest-record>, CBI's website.

Discrepancies on records from the FBI or relating to another state can be challenged through the FBI Information, and can be found at their website at:
www.fbi.gov/services/cjis/identity-history-summary-checks

The [U.S. Department of Justice Order 556-73](#) establishes rules and regulations for the subject of an FBI Identification Record to obtain a copy of his or her own record for review. The FBI's Criminal Justice Information Services (CJIS) Division processes these requests.

Who may request a copy of a record (or proof that a record does not exist)?
Only you can request a copy of your own Identification Record.

How to request a copy of your record.

The FBI offers two methods for requesting your FBI Identification Record or proof that a record does not exist.

Option 1: [Submit your request directly to the FBI.](#) See above FBI website for information)

Option 2: Submit to an [FBI-approved Channeler](#), which is a private business that has contracted with the FBI to receive the fingerprint submission and relevant data, collect the associated fee(s), electronically forward the fingerprint submission with the necessary information to the FBICJIS Division for a national criminal history record check, and receive the electronic record check result for dissemination to the individual. Contact each Channeler for processing times.

AGENCY INSTRUCTIONS: To comply with federal law, provide a copy of this document to each applicant fingerprinted.





Fingerprinting for License Applications Colorado Applicant Background Services (CABS)

Colorado Bureau of Investigation (CBI) utilizes the following third-party vendors to facilitate the fingerprinting process for the criminal history check portions of applicant background investigations.

Make an appointment at the vendor of your choice:

<p><u>Colorado Fingerprinting</u> 1 (833) 224-2227 https://www.coloradofingerprinting.com/cabs/</p>	<p><u>Identogo</u> 1 (844) 539-5539 https://uenroll.idetogo.com</p>
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Provide the following agency information to the vendor:

CBI Account Number: CONCJ6226
Unique ID: 6226LLQH
Employer and Address: Northglenn City Clerk's Office
 11701 Community Center Dr.
 Northglenn, CO 80233

Service Codes	Colorado Fingerprinting	IdentoGo
Liquor	6226LLQH	25YQ6K
Marijuana	6226POTI	25YQ8H
Massage Parlor	6226PUBA	25YQBF
Pawn Broker	6226 PUBA	25YQBF
Tobacco Retailer	6226 PUBA	25YQBF

Reason Fingerprinted, as applicable:

- Liquor Licensing, C.R.S. 44-3-307(3)(a)
- Marijuana Licensing, C.R.S. 44-10-307(4)(a)
- Massage Parlor Licensing, C.R.S. 24-72-304 (Public Check – CBI Only)
- Pawn Broker Licensing, C.R.S. 24-72-304 (Public Check – CBI Only)
- Tobacco Retailer Licensing, C.R.S. 24-72-304 (Public Check – CBI Only)

Fees: Payable directly to the vendor at the time of the appointment

- Service Fee:
 \$ 10.00, per person

- CBI Fingerprint Processing Fee:
 \$ 38.50, per person, for liquor licensing
 \$ 39.50, per person, for marijuana licensing
 \$ 16.50, per person, for all other licenses