



REQUEST FOR LIVE SCAN SERVICE

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Applicant Submission

AG114

ORI (Code assigned by DOJ)

Non-Profit Organization Volunteer/VCA

Authorized Applicant Type

Volunteer

Type of License/Certification/Permit OR Working Title (Maximum 30 characters - if assigned by DOJ, use exact title assigned)

Contributing Agency Information:

Beach Cities Sports, Inc.

Agency Authorized to Receive Criminal Record Information

17230

Mail Code (five-digit code assigned by DOJ)

1633 Ruhland Avenue

Street Address or P.O. Box

Bradley Woomer

Contact Name (mandatory for all school submissions)

Manhattan Beach

City

CA 90266

State ZIP Code

3106131748

Contact Telephone Number

Applicant Information:

Last Name

First Name

Middle Initial

Suffix

Other Name

(AKA or Alias) Last

First

Suffix

Date of Birth

Sex Male Female

Driver's License Number

Height

Weight

Eye Color

Hair Color

Billing Number

N/A

(Agency Billing Number)

Misc. Number

N/A

(Other Identification Number)

Place of Birth (State or Country)

Social Security Number

Home Address

Street Address or P.O. Box

City

State

ZIP Code

Your Number: N/A

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 P.O. 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