



## Fingerprinting for Liquor and Marijuana Licenses

Fingerprinting for liquor and marijuana licensing may be completed through one of the two companies that provide Colorado Applicant Background Services (CABS). Colorado currently authorizes two companies to process fingerprints for background checks utilizing CABS, Colorado Fingerprinting (aka Compilo) and IdentoGo (aka Idemia). Below is the process to use their services.

**A signed and dated Notice To Applicants and Release form must be included in your liquor license application packet.**

### Additional fees and questions

Additional fees may be due to the Town of Buena Vista and/or the State related to your Liquor License or Marijuana License application. If you have questions, please contact the Town Clerk at 719-581-1017.

### Colorado Fingerprinting (aka Compilo) *Screenshots of the steps are on pages 3 thru 8*

1. **Online Registration** - you will register through the online Enrollment Center at [www.coloradofingerprinting.com](http://www.coloradofingerprinting.com)
2. **Convenient Location and Time** - During the enrollment process you will choose a convenient location, day and time for your appointment.  
(Buena Vista location - Mailboxes Parcel & Copy Center, 29805 US Highway 24 North)
3. **Reason Fingerprinted and CBI Unique Code** - Provide the following reason for fingerprinting and CBI Unique Code for your organization:

#### Liquor Licensing:

*Enter CBI Unique Code: 6347LLQH*

*TOWN OF BUENA VISTA: LIQUOR LIC - LOCAL PD SO 44-3-307*

#### Marijuana Licensing:

*Enter CBI Unique Code: 6347POTI*

*TOWN OF BUENA VISTA: Local Medical Marijuana Licensing*

4. **Payment** - Select your method of payment.
5. **Confirmation** - You receive your appointment confirmation with your number which is delivered by both text and email.
6. **Fingerprinting** - Go to the fingerprint location at your scheduled time. Provide the Order Number to the enrollment agent along with your **government issued photo ID (drivers license, state issued ID, US**

**passport or foreign-issued passport).** Your livescan fingerprints, digital photo and digital signature are then captured and submitted to CBI.

7. **Results** - The results are returned to CBI authorized agencies.
8. **Status** - You can login to the Enrollment Center at any time to see the status of your fingerprint submission to CBI.

Contact Colorado Fingerprinting at 720-292-2722, toll free 833-224-2227 or email [info@coloradofingerprinting.com](mailto:info@coloradofingerprinting.com) if you have any questions or need assistance.

## IdentoGO (aka Idemia)

Here are the steps you will take:

- Online Registration
- <https://uenroll.identogo.com/workflows/25YQ6K>
  - Town of Buena Vista CBI account number = CONCJ6347
  - Service Name: Liquor Licensure – Local = 25YQ6K
  - Service Name: Marijuana Licensing = 25YQ8H
- Schedule location and time.
- Payment at the location – payable by business check, money order, or credit card in the name of the person being fingerprinted.
- Fingerprinting at the location – Fingerprints are electronically sent to the State. You should not receive paper fingerprint cards.
- Background check results will be sent to CHV (the “requesting agency”).



## NOTICE TO APPLICANTS AND RELEASE

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

### Notice

Discrepancies on your Colorado record can be challenged and corrected by contacting the Colorado Bureau of Investigation at 690 Kipling St., Suite 3000, Denver, CO 80215, or by calling the Identification Unit at (303) 239-4208. Additional information is available from CBI's website at [www.colorado.gov/cbi](http://www.colorado.gov/cbi). Discrepancies on records from the FBI or relating to another state can be challenged through the FBI. Information, including that listed below, can be found at their website at [www.fbi.gov](http://www.fbi.gov)

The [U.S. Department of Justice Order 556-73](#) [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.

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.

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.

### Release

As an applicant for a liquor or marijuana license before the Town of Buena Vista Local Licensing Authority, I am required to furnish information concerning my financial, moral, physical, educational, and mental qualifications. In this regard, I hereby authorize the Town of Buena Vista to make any and all appropriate inquiries regarding the above enumerated qualifications. Moreover, I authorize those people or organizations selected by the Town of Buena Vista to release any and all information of a confidential or privileged nature.

I hereby release the Town of Buena Vista, its elected officials, agents and employees from any liability or damage which may result from furnishing the information requested. I further authorize the Local Licensing Authority to discuss, in a public forum, any and all findings in regard to my financial, moral, educational and character qualifications, should I wish to proceed to that stage of the process with my application. I will have the opportunity to address the results of any investigation before the Local Licensing Authority.

I, the undersigned, have read and acknowledge the notice and release above, and Privacy Act Statement and Privacy Rights, attached to this document.

Legal signature of fingerprinting applicant: (Please make sure you enter the name as it will appear on your background check report.)

---

Printed legal name of fingerprinting applicant: (as it will appear on your background check report)

---

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

## 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. <sup>1</sup> 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. <sup>2</sup>
- 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.<sup>3</sup>

<sup>1</sup> Written notification includes electronic notification, but excludes oral notification.

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

<sup>3</sup> See 5 U.S.C. 552a(b); 28 U.S.C. 534(b); 34

# 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.

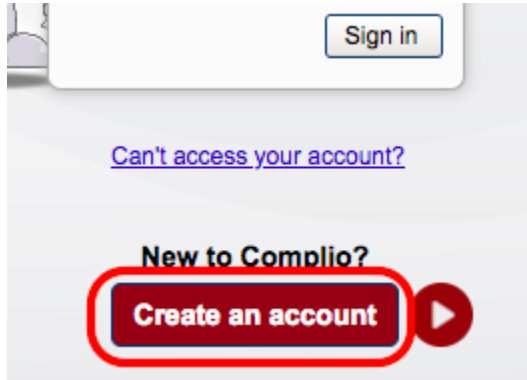
Routine Uses: During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 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.

## Colorado Fingerprinting Applicant Registration Instructions

The following are step by step instructions to successfully register for fingerprinting. Please read and follow the registration instructions carefully.

**IMPORTANT - Make sure all of your information is correct, as once your fingerprints are submitted you cannot change any information.**

1. **Website** - Please visit <https://abi.complio.com/> to begin (smartphone and tablet friendly)
2. **Create Account** - Click the "Create an Account" button to begin the registration process.



3. **Enter Information** - Carefully enter all of your information. Fields with asterisks (\*) are required. Please note for your username you can choose anything that is available including your email address.

**Create an account** Spanish

Please fill the form below to create an account. The items with \* are required.

**Personal Information**

First Name:\*  Middle Name:\*  If you don't have a midd  Last Name:\*   Enter Suffix if Applicable

I don't have a Middle Name.

Do you have an SSN?:\*  Yes  No Social Security Number:\*

I have an Alias or Maiden name

Gender:\*  --Select-- Date of Birth:\*  mm/dd/yyyy Preferred Communication Language:  English (Inglés)

**Contact Information**

Primary Email:\*  Confirm Primary Email:\*

Secondary Email:  Confirm Secondary Email:

Address:\*

Country:\*  --Select-- State:\*  --Select-- City:\*

Zip Code:\*

Primary Phone:\*  ( ) - - - - Secondary Phone:  ( ) - - - -

**Account Information**

Username:\*

Password:\*  Confirm Password:\*

4. **Start Ordering Process** - After successfully creating an account click the "Get Started" button to start the ordering process.

## Welcome!

Before you place your fingerprinting order you need to know the purpose for the fingerprinting and if applicable your department/organization's unique ID. Please note an incorrect unique ID may impact the results being received correctly by the authorized entity. If you are not sure of the unique ID please contact the employer/agency requiring the check.

[Get Started](#)

5. **Location** - Search for and choose the location that is most convenient for you.

### Find Location

Enter Zip Code:

Page Size  20 Item(s) in 1 page(s)

| Name   | Address   | Description  |                        |
|--|---|--|------------------------|
| <input type="radio"/> Colorado Fingerprinting Downtown | 110 16th St Mall, 110 16th St Mall, Denver, CO 80202, USA | Petroleum Building Southern End of 16th St Mall on the 8th Floor | <a href="#">Images</a> |

6. **Appointment** - Select one of the available appointment slots and click "Next" to proceed.

April 2019

| S  | M  | T  | W  | T  | F  | S  |
|----|----|----|----|----|----|----|
| 31 | 1  | 2  | 3  | 4  | 5  | 6  |
| 7  | 8  | 9  | 10 | 11 | 12 | 13 |
| 14 | 15 | 16 | 17 | 18 | 19 | 20 |
| 21 | 22 | 23 | 24 | 25 | 26 | 27 |
| 28 | 29 | 30 | 1  | 2  | 3  | 4  |

Available Slots for: Thursday, April 4, 2019

|                     |                     |
|---------------------|---------------------|
| 08:00 AM - 08:10 AM | 08:10 AM - 08:20 AM |
| 08:40 AM - 08:50 AM | 08:50 AM - 09:00 AM |
| 09:20 AM - 09:30 AM | 09:30 AM - 09:40 AM |
| 10:00 AM - 10:10 AM | 10:10 AM - 10:20 AM |
| 10:40 AM - 10:50 AM | 10:50 AM - 11:00 AM |
| 11:20 AM - 11:30 AM | 11:30 AM - 11:40 AM |
| 12:00 PM - 12:10 PM | 12:10 PM - 12:20 PM |
| 12:50 PM - 1:00 PM  | 1:00 PM - 1:10 PM   |

7. **CBI Unique ID** - Enter the CBI Unique ID for your institution and click “Next”.

**Liquor Licensing:**

*Enter CBI Unique Code: 6347LLQH*

*TOWN OF BUENA VISTA: LIQUOR LIC - LOCAL PD SO 44-3-307*

**Marijuana Licensing:**

*Enter CBI Unique Code: 6347POTI*

*TOWN OF BUENA VISTA: Local Medical Marijuana Licensing*

**Order Selections**

Colorado Fingerprinting Package (CBI Fingerprint Process)

CBI Unique ID :\*

If you do not have a Unique ID, please contact your Licensing Agency or Employer. Incorrect ID may be declined by your

Previous Next

8. **Verify Personal Information** - Verify the personal information entered from the account creation to ensure it is correct. Make any changes as needed and click “Next”.

Personal Information

First Name:\* David Middle Name:\* K Last Name:\* Tester Enter Suffix if App

I don't have a Middle Name.

Do you have an SSN?\*:  Yes  No Social Security Number:\* 111-55-7777

I have an Alias or Maiden name

Gender:\* Female Date of Birth:\* 07/04/1976 Preferred Communication Language: English (Inglés)

Phone:\* (720)-292-2722 Secondary Phone: ( ) - - - -

Email: hmdaverf99@gmail.com Secondary Email: Confirm Secondary Email:

You can edit your email address by clicking Edit Profile on your dashboard.

Address:\* 110 16th St

Country:\* UNITED STATES of AMERICA State:\* COLORADO City:\* Denver

Zip Code:\* 80202

Text Message Notifications

Receive Text Notification:  Yes  No Cellular Phone Number:\* (720)-292-2722

Previous Next Cancel

9. **Fingerprinting Information** - Add the information needed for fingerprinting. Fields with asterisks (\*) are required. Double check your information and click “Next” to proceed. **If the daycare license # is required please contact your employer for the correct number.**



### Information for Finger Printing

- Please provide all requested information.
- **Bold \*** lettering indicates required information.
- Omitting or providing false information may be cause for disqualification.

|                           |            |                         |            |              |            |
|---------------------------|------------|-------------------------|------------|--------------|------------|
| Place Of Birth (Country)* | --Select-- | Place Of Birth (State)* | --Select-- | Citizenship* | --Select-- |
| Race*                     | --Select-- | Eye Color*              | --Select-- | Hair Color*  | --Select-- |
| Height Feet*              | --Select-- | Height Inches*          | --Select-- | Weight*      |            |

### Service Details

- Please make sure to confirm your institution or department about your Unique ID.

|                      |                         |               |                       |  |                         |
|----------------------|-------------------------|---------------|-----------------------|--|-------------------------|
| Reason Fingerprinted | VENDOR CERTIFICATION PF | CBI Unique ID | 0151VCPI              | Daycare License #                                      |                         |
| AcctNam (Literal)    | AMERICAN BIOIDENTITY DB | AcctAdr       | 110 16TH ST 8TH FLOOR | AcctCity   | DENVER                  |
| ACCTSTA              | CO                      | AcctZip       | 80202                 | Reason Fingerprinted Colorado Revised Statute (C.R.S.) | VENDOR CERTIFICATION PF |
| Total Fee(\$)        | 49.5                    |               |                       |  |                         |

[Previous](#) [Next](#) [Cancel](#)

**10. Double Check and Agreement** - Double check all of your information to ensure it is correct. Click the checkbox to agree with the privacy statement and click "Next".

|              |                 |                   |                                  |
|--------------|-----------------|-------------------|----------------------------------|
| Name:        | CSHA            | Appointment Time: | 03/20/2019 (01:15 PM - 01:30 PM) |
| Description: | Massage Therapy |                   |                                  |

### Privacy Act Statement

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.

A valid State ID Card (or outlying possession of the US with seal or logo from State Agency, Federal ID Card with seal or logo from Federal Agency, Commercial Driver's license permit issued by State or outlying possession of the U.S., Commercial Driver's license issued by a State or outlying possession of the U.S., paper/temporary Driver's License issued by State or outlying possession of the U.S., valid U.S. passport, foreign passport, passport book/card, valid U.S. military identification card, permanent resident card/green card (I-551), enhanced tribal card (ETC).

I have read the Privacy Act Statement and accept it.

[Previous](#) [Next](#) [Cancel](#)

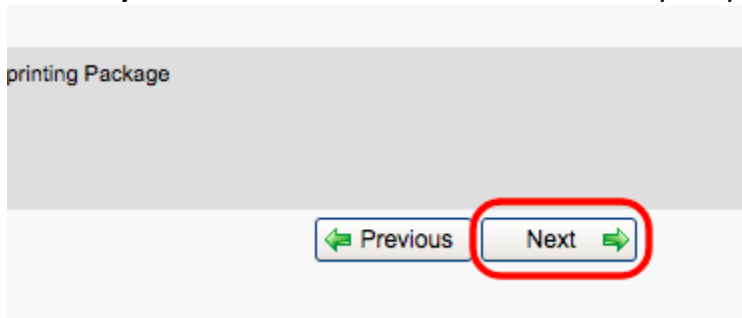
**11. Last Chance to Change Information** - You will receive a warning that this is your last chance to double check your information. After double checking your information click "OK" to proceed.

abi.complio.com says

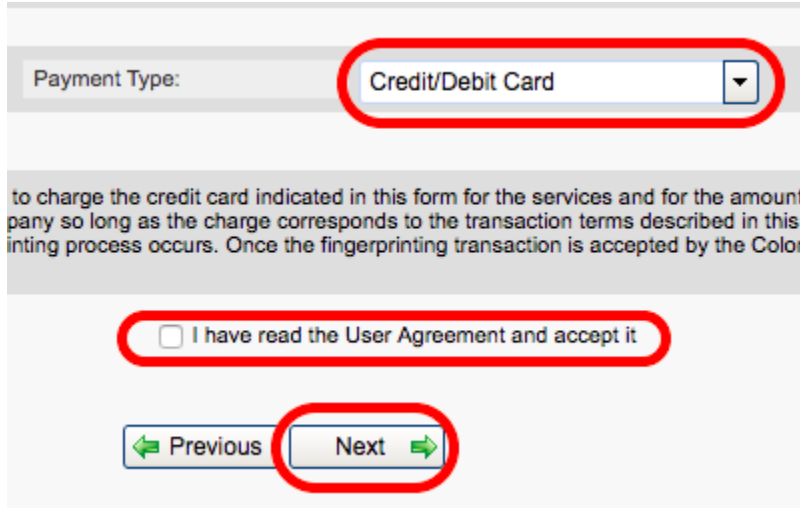
You will not be able to edit any information for this order after proceeding – MAKE SURE YOUR INFORMATION IS CORRECT. Have you reviewed all your information?

[Cancel](#) [OK](#)

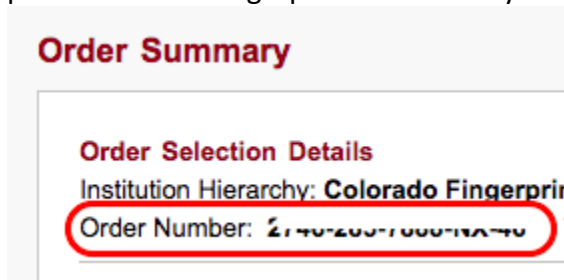
**12. Summary and Submit** - You will receive a summary for your order. Click “Next” to submit your order.



**13. Payment** - Select the method of payment. Check the box to consent to the user agreement if applicable and then click “Next”.



**14. Order ID** - You will receive your order ID on the screen plus it will be emailed to you and texted to you, if you opted to receive text notifications. Provide the order ID along with a valid government issued photo ID to the fingerprint tech when you have your fingerprints taken.



**Fingerprinting** - Please bring the following when you go to the location to have your fingerprints taken.

- **Order ID** - Please make sure to bring in the order ID from the fingerprint registration.
- **Govt. Issued Photo ID** - Please make sure to bring a valid photo ID, which can be any one of the following:
  - Valid Driver’s License - Issued by Colorado or another State.
  - Valid Identification Card - Issued by Colorado or another State.
  - Federal ID Card - With seal or logo from Federal Agency.
  - Valid Commercial Driver’s License - Issued by Colorado or another State.

- Valid U.S. Passport
- Valid Foreign Passport
- Valid Passport Book/Card
- Valid U.S. Military Identification Card
- Permanent Resident Card/Green Card
- Enhanced Tribal Card