



NEW YORK STATE
DEPARTMENT *of*
FINANCIAL SERVICES

Andrew M. Cuomo
Governor

Benjamin M. Lawsky
Superintendent

ELECTRONIC FINGERPRINTING PROCEDURE FOR OFFICERS/DIRECTORS OF INSURANCE COMPANIES

The New York State Division of Criminal Justice Services has entered into a contractual agreement with L-1 Identity Solutions (**now known as MorphoTrust USA**) to provide electronic fingerprint processing services on a statewide basis for all individuals requiring a criminal background check.

The New York State Department of Financial Services (NYSDFS) requires fingerprinting for all officers/directors of insurance companies. **Officer/directors who are NY residents must now be electronically fingerprinted** by MorphoTrust USA (L-1). The NYSDFS will no longer accept paper cards sent to this office for NY residents. Appointments for LiveScan digital fingerprinting may be scheduled with MorphoTrust USA (L-1) through their link, www.L1enrollment.com or by calling 1-877-472-6915. A Request for NYS Fingerprinting Services Information Form (Form NYSIDFP, attached) must be completed and submitted to MorphoTrust USA (L-1) at the time of being electronically fingerprinted. A fee of **\$102.25** is also required at the time of fingerprinting, payable by cash, credit card or check made payable to MorphoTrust USA or L-1 Enrollment. This includes the fingerprinting fee (\$10.75), DCJS search fee (\$75.00) and FBI search fee (\$16.50). When biographical affidavits for officers/directors are submitted to the NYSDFS, proof of being electronically fingerprinted must be attached.

Officers/directors who do not have an address in New York State (non-resident) are required to send the following to the NYSDFS: A biographical affidavit, one New York fingerprint card (blue FBI Form FD-258), a fingerprint fee in the amount of **\$102.25** made payable to MorphoTrust USA or L-1 Enrollment and a NYS Request for Card Scan Services Information Form (Form NYSIDCSFP, attached). NOTE: Only the fingerprint cards furnished by the NYSDFS can be used; out of state fingerprint cards are not acceptable and will be returned. However, a non-resident can also come to a MorphoTrust USA (L-1) location in New York (for a list of locations, go to www.L1Enrollment.com) to be electronically fingerprinted using Form NYSIDFP and a fingerprint fee of **\$102.25**.

To set up an escrow account, please refer to the MorphoTrust USA (L-1) link, www.L1enrollment.com or call 1-877-472-6915.

For additional information, please contact the Officer/Director Processing Unit at (518) 473-9299 or (518) 408-2740.

Request for NYS Electronic Fingerprinting Services - Information Form

Instructions for applicant: Complete this form and visit www.L1enrollment.com or call 877-472-6915 to schedule an appointment for fingerprinting. Remember to bring this form and required forms of identification to your fingerprinting appointment.

ORI: NY921270Z

Contributor Agency: NEW YORK STATE DEPT. OF FINANCIAL SERVICES
One Commerce Plaza, Albany, NY 12257

Job or License Type: Choose one from below:

_____ Social Security Number

- Public/Independent Adjuster
- Professional Bondsman
- Life Settlement Broker
- Life Settlement Intermediary
- Life Settlement Provider
- Princ, Exec, Dir Ins Co (provide name of insurance company)

****IMPORTANT****

If you do not have a Social Security Number, you must contact the NYS Dept. of Financial Services at 518-474-6630 or licensing@dfs.ny.gov

Applicant Section: New Submission Resubmission

Name of Applicant: _____

Alias / Maiden Name: _____

Street Address: _____

City, State, & Zip: _____

Date of Birth: _____ Age: _____ Sex: Male Female Race: _____

Ethnicity: Hispanic Non Hispanic Unknown Height: _____ ft. _____ in. Weight: _____ lbs.

Skin Tone: _____ Eye Color: _____ Hair Color: _____

State/Country of Birth: _____ Country of Citizenship: _____

Request for NYS Electronic Fingerprinting Services - Information Form (CONTD)

Accepted Forms of Identification Section:

NOTE: Applicant *MUST* present two (2) forms of ID, at least one of which must have a photo (see Column A):

Column A – Valid Photo Identification:

U.S. Passport (unexpired or expired)
Permanent Resident Card
Alien Registration Receipt Card
Unexpired Foreign Passport
Driver’s License or Photo ID Card
(issued by U.S. State or Territory)
School or College ID Card (with photo)
Unexpired Employment Authorization
with photo (Form I-766, I-688, I688A or B)
Photo ID Card issued by federal, state, or local govt.
Department

Column B – Valid Supplementary Identification:

Voter registration card
U.S. Military card or draft card
Military dependent’s ID card
Coast Guard Merchant Mariner Card
Native American Tribal Document
Canadian Driver’s License
U.S. Social Security Card
Original or certified copy of a Birth Certificate issued
by authorized U.S. agency with official seal
Certification of Birth Abroad (issued by U.S.
of State)
U.S. Citizen Id Card (Form 1-7)

Enrollment website address: www.L1Enrollment.com

Call Center phone number: 877-472-6916

NYS Request for Card Scan Services - Information Form

This form is for an applicant who has no address in New York and unable to go to a MorphoTrust USA (L-1) Electronic Fingerprinting location in New York (list of locations @ www.L1Entrollment.com)

This form must be completed for submission with application AND fingerprint cards.

Please Print Clearly

Contributor Agency Section:

ORI: NY921270Z

Contributor Agency: NEW YORK STATE DEPT. OF FINANCIAL SERVICES

One Commerce Plaza, Albany, NY 12257

Job or License Type: Choose one from below:

_____ Social Security Number

- Public/Independent Adjuster
- Professional Bondsman
- Life Settlement Broker
- Life Settlement Intermediary
- Life Settlement Provider
- Princ, Exec, Dir Ins Co (provide name of insurance company)

Applicant Section:

New Submission Resubmission

Name of Applicant: Last _____ First _____ M.I. _____

Alias / Maiden Name: _____

Street Address: _____

City, State, & Zip: _____

Date of Birth: _____ Age: _____ Sex: Male Female Race: _____

Ethnicity: Hispanic Non Hispanic Height: _____ ft. _____ in. Weight: _____ lbs.

Skin Tone: _____ Eye Color: _____ Hair Color: _____

State / Country of Birth: _____ Country of Citizenship: _____

Payment Section:

- Payment for Cardscan submission must be made separate from your payment for license fee application.
 - Licensing Fee - check is made payable to Superintendent of Financial Services
 - Fingerprint Fee is made payable to MorphoTrust USA or L-1 Enrollment
 - Fingerprint Fees – DCJS fee + MorphoTrust USA (L-1) Fee = \$85.75
 - DCJS fee + FBI fee + MorphoTrust USA (L-1) Fee = \$102.25
- Payment for Cardscan submission for Princ, Exec, Dir Ins Co (officer/director) should be made payable to MorphoTrust USA or L1-Enrollment.
 - Fingerprint Fees – DCJS fee + FBI fee + MorphoTrust USA (L-1) Fee = \$102.25
- Options include: Personal or business check, certified check, bank check or money order.
 - Escrow Account with MorphoTrust USA (L-1); Escrow Account number will be required.

The NYS Dept. of Financial Services will submit payment and fingerprint cards directly to MorphoTrust USA (L-1)