

NYS Request for Card Scan Services - Information Form

Instructions for applicant: Complete form and submit with two FBI (blue) fingerprint cards and the Board's Proof of Identification Form and Chart containing the list of acceptable forms of identification.

Please Print Clearly

ORI: NY921790Z

Contributor Agency: NYS Racing and Wagering Board

Job or License Type: Charitable Gaming License

Social Security Number: _____

Only list if you have a valid SSN

Agency ID Number: *Log number to be entered by RWB employee*

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Check one: New Submission Resubmission If resubmission, list TCN Number here: _____

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 Unknown

Height: _____ ft. _____ in. Weight: _____ lbs.

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

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

Payment Section:

- Payment for Card Scan submission must be included with your application fees and made payable directly to the **NYS Racing and Wagering Board**.
- Options include: personal or business check, certified check, bank check or money order.
- The Racing and Wagering Board will submit payment and fingerprint cards directly to L-1.

For Official Use Only:

L-1 Billing Account Number: _____