



### For Texas Applicants (not for Out of State Applicants):

This document is your **FAST Pass** to be fingerprinted for a TX criminal history record check. You must schedule a fingerprint appointment by visiting [www.ibtfingerprint.com](http://www.ibtfingerprint.com) or by calling 1-888-467-2080. You may pay for **FAST** services online with a credit card or onsite with a check or money order only. Your fingerprints will be submitted to the TxDPS/FBI with results delivered to this agency within one week.

1. Logon to [www.ibtfingerprint.com](http://www.ibtfingerprint.com) and select **Texas**
2. After Language option, select: **All Others** for Reason Fingerprinted
3. Select: **Option A-Electronic Submission**
4. Select: **Yes I have a FAST Pass**
5. Enter: **TX923439Z** when prompted for Agency Number/ORI
6. Follow the prompts to enter your personal information and select service location, date and time.
7. Bring this completed form with you to your appointment.

### Section One: Agency Information

Agency/ORI: **TX923439Z** Agency Name: Texas Funeral Service Commission

Reason for Fingerprinting: Applicant for licensure

Agency Assigned Applicant number N/A Original TCN \_\_\_\_\_  
(If required by Agency) (If resubmission for rejected fingerprints)

### Section Two: Applicant Information (To be completed by Applicant)

Applicant Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name \_\_\_\_\_  
(please print)

Sex  Male  Female Race \_\_\_\_\_ Ethnicity \_\_\_\_\_ Skin Tone \_\_\_\_\_  
(W, B, A, I, O) (Hispanic or Non-Hispanic)

Date of Birth \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_ Hair Color \_\_\_\_\_ Eye Color \_\_\_\_\_  
(feet and inches)

Place of Birth \_\_\_\_\_ Citizenship \_\_\_\_\_ Social Security No. \_\_\_\_\_  
(state or country) (country)

DL / ID No. \_\_\_\_\_ State Issuing DL / ID No. \_\_\_\_\_

Home Address \_\_\_\_\_  
Street Address City State Zip

### Section 3: Service Center Information (To be completed by FAST Live Scan Operator)

Date Prints Taken \_\_\_\_\_ Amount Charged For Service **\$44.20**

Paid by:  Check  Money Order  Visa  MasterCard  Billing Acct \_\_\_\_\_

TCN \_\_\_\_\_

I HAVE COMPARED THE GOVERNMENT-ISSUED IDENTIFICATION PRESENTED BY THE APPLICANT AND ATTEST THAT TO MY BEST DETERMINATION, I HAVE FINGERPRINTED THE SAME PERSON.

Printed Name of LSO: \_\_\_\_\_

Signature of LSO: \_\_\_\_\_