



VANCOUVER POLICE DEPARTMENT

REQUEST FOR FINGERPRINT SERVICE

THIS FORM MUST BE PRESENTED **IN PERSON** TO THE VANCOUVER POLICE
PLEASE PRINT CLEARLY

VPD500B(23)

	Last Name (s)	First Name	Middle Name (s)	
Current Name:				
Other Name(s) or Alias				
Surname at Birth				
Gender: M <input type="checkbox"/> F <input type="checkbox"/> X <input type="checkbox"/>	Date of Birth (YYYYMMDD)	Telephone No.:	Email:	
Address (apt., no., street)		City	Province	Postal Code

Fingerprint Service for: (List Country name if for foreign police certificate)	How many sets of fingerprints are needed?	Agency reference number (CRRP, ORI for FEDERAL EMPLOYMENT, CITIZENSHIP application #, etc).
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Signature: _____ day of _____, 20_____

Signed in the presence of: VPD Employee: _____

VPD USE ONLY BELOW

GO #:	Receipt #:	Iscreen Map#								
IDENTIFICATION	CASHIER INFORMATION									
	Service:	Fee:								
Primary (photo) Government issue ID type and #:	Ink Prints Ink Extra Print # of sets? _____	<input type="checkbox"/> \$63.60 <input type="checkbox"/> \$10.00 x sets = \$ _____								
Secondary ID type and #:	Electronic Prints Electronic Hardcopy # of sets? _____	<input type="checkbox"/> \$63.60 <input type="checkbox"/> \$10.00 x sets = \$ _____								
	CRRP-VS Employment CRRP-VS Volunteer Reclaiming Indigenous Name VPD	<input type="checkbox"/> \$63.60 <input type="checkbox"/> \$26.00 <input type="checkbox"/> N/C <input type="checkbox"/> N/C								
	RCMP submission fee RCMP submission N/C	<input type="checkbox"/> \$25.00 <input type="checkbox"/> N/C								
		Method of Payment:								
		<input type="checkbox"/> Cash <input type="checkbox"/> Debit <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Certified Cheque or Money Order								
		Payment Received:								
		Note denominations received:								
		Change Given:								
		<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px;">Coin</td> <td style="width: 20px;">5's</td> <td style="width: 20px;">10's</td> <td style="width: 20px;">20's</td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> <td></td> </tr> </table>	Coin	5's	10's	20's				
Coin	5's	10's	20's							
POLICE RECORDS FINGERPRINT RESULTS										
Query Type	Queried by	Negative								
CPIC (QPERS)		<input type="checkbox"/>								
		See Attached								
		<input type="checkbox"/>								