

**AUTHORITY FOR RELEASE OF INFORMATION  
State and Federal Record Check**

I, the undersigned, hereby authorize the North Carolina Department of Justice through the State Bureau of Investigation, Division of Support Services, to perform a fingerprint search of the State's criminal history record file and a fingerprint search of the Federal Bureau of Investigation's files for a national criminal history record check pursuant to the provisions of NCGS 53-244.050, in connection with my application for license under the provisions of Article 19B of Chapter 53 (North Carolina Secure and Fair Enforcement Mortgage Licensing Act ("NC SAFE Act")) from the Office of the Commissioner of Banks.

Further, I understand that the North Carolina State Bureau of Investigation, Division of Support Services, and its officials and employees, shall not be held legally accountable in any way for providing this information to the Office of the Commissioner of Banks, and I hereby release said agency and persons from any and all liability which may be incurred as a result of furnishing such information. I further understand that the Office of the Commissioner of Banks cannot provide a **hard copy** of the results of this criminal history record check to me.

**Print legibly or Type**

NMLS ID No.:

Name:

Last, First, Middle, and Maiden (if applicable)

Sex (Circle One):    M    F

Race:

Date:

\_\_\_\_\_  
Signature

The Office of Commissioner of Banks shall retain this form for a period of 12 months from the date of electronic submission of the application, and it shall be furnished to the State Bureau of Investigation upon request.

**ORI # BANKS0001- Office of the Commissioner of Banks**

<b>SBI Fingerprint Card Check</b>	<b>-- \$14.00</b>
<b>FBI Fingerprint Card Check</b>	<b>-- \$24.00</b>
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<b>Total</b>	<b>-- \$38.00 (Non-refundable)</b>