



New Mexico Regulation and Licensing Department

ALCOHOL AND GAMING DIVISION

PO Box 25101 ▪ Santa Fe, New Mexico 87504-5101

(505) 476-4875 ▪ Fax (505) 476-4595 ▪ www.rld.state.nm.us/alcoholandgaming

PROCEDURES FOR SUBMITTING FINGERPRINTS

THROUGH COGENT:

EVERYONE MUST REGISTER ONLINE go to: www.cogentid.com

- Click on New Mexico, then under Applicant Use, select “Register Online for a Background Check”
- On Registration Page: Select/click on: “ORI Lookup”, then under Agency Name Type, select “Regulation & Licensing”, or scroll down to AGD ORI #, you will find RLD Alcohol & Gaming Division ORI Number: **NM920020Z**, click on the “ORI Number” to Select
- Reason, will automatically be filled out with: 60-3A-9 Alcohol Licensing
- Continue filling out the required information and print receipt
- To locate the nearest fingerprint facility, go to “Useful Information” on Cogent website, then to Fingerprint Location Map.
- For Registration help or questions, phone Cogent Call Center at (877) 996-6277.

THROUGH AGD:

After registering with Cogent, you must:

- o **Only those Applicants unable to do Livescan with Cogent, or those located out-of-state**, must submit Two (2) Fingerprint Cards for **each person** and cards must be correctly and completely filled out to avoid them being returned. *Do not highlight anywhere on the fingerprint cards*, as that increases the possibility of rejection from the FBI.
- o **Obtain Fingerprints** with a Law Enforcement Agency or an AGD Approved Entity. You may call the Division for a list of the authorized fingerprinting agencies or check our website for the list: www.rld.state.nm.us/alcoholandgaming
- o “**Fingerprint Certification of Law Enforcement Agency**” Form must accompany each set of fingerprint cards, and submit with each application. This form is to be completed by the person conducting the fingerprinting.
- o **Fee of \$44.00 per person**, by Money Order or Cashier’s Check only, Made Payable To: **3M Cogent**, only if fee was not paid online when you registered with Cogent. *Separate payment for each person required, do not combine fees.*
- o **Complete Packet must include:** Two Fingerprint Cards, payment or receipt if applicable, signed/stamped Fingerprint Certification of Law Enforcement Agency, notarized Fingerprint Affidavit, and notarized Personal Data Information Affidavit.

FINAL STEP: Submit Fingerprint Packet to: AGD | PO Box 25101 Santa Fe, NM 87504-5101

For assistance, Contact AGD: Charmaine Martinez at (505) 476-4804

Email: Charmaine.Martinez2@state.nm.us

Because the Liquor Control Act does not allow for a Convicted Felon to own or be an officer on a Liquor License, this agency requires such persons to be fingerprinted to receive the background reports from the State and Federal level. Therefore, the Federal Bureau of Investigation requires the following Notice:

Applicant Notification and Record Challenge

Officials at the governmental institutions and other entities authorized to submit fingerprints and receive FBI identification records under this authority must notify the individuals fingerprinted that the fingerprints will be used to check the criminal history records of the FBI. The officials making the determination of suitability for licensing or employment shall provide the applicants the opportunity to complete, or challenge the accuracy of, the information contained in the FBI identification record. These officials also must advise the applicants that procedures for obtaining a change, correction, or updating of an FBI identification record are set forth in Title 28, C.F.R., § 16.34. Officials making such determinations should not deny the license or employment based on information in the record until the applicant has been afforded a reasonable time to correct or complete the record, or has declined to do so. (*Title 42, U.S.C., §14616, Article IV (c); Title 28 C.F.R., § 50.12 (b)*)



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FINGERPRINT CERTIFICATE FOR LAW ENFORCEMENT OR AGD APPROVED AGENCY

An Officer of the New Mexico State Police, County Sheriff, or a Municipal Chief of Police may conduct Fingerprints, or call Alcohol and Gaming Division for a list of Authorized agencies. If an applicant is not a resident of New Mexico, comparable officers in their state of residence may conduct fingerprints.

The Undersigned Hereby Certifies that, I am:

(check one)

_____ Chief of Police, City of _____ State of _____, or

_____ Sheriff of _____ County, State of _____, or

_____ Officer of the New Mexico State Police, or

_____ Other **AGD** Approved Agency: _____
(Name of Agency)

Applicant Name: _____
First Name Last Name

Person Fingerprinting: _____
First Name Last Name

By signing below, I Further Certify that the Applicant presented appropriate documentation providing proof of identity and have verified this before fingerprinting. I have also included contact information **and agency stamp** as follows:

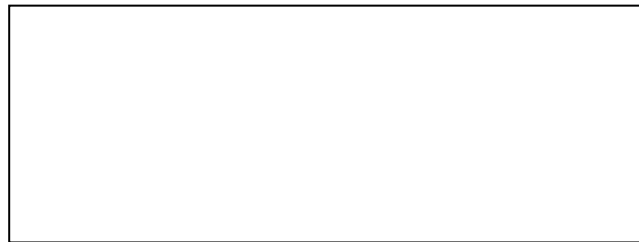
Name of Agency: _____

Agency Address: _____

Agency Contact Number: _____

Official's Signature: _____ Title or Rank / Badge # _____

AGENCY STAMP



Note: If you have questions or need assistance, please contact AGD at (505) 476-4875. This form must be returned with Fingerprint Cards, Money Order for \$44.00, made payable to: **3M Cogent** (only if not paid on Cogent website), with notarized Personal Data Information Affidavit and notarized Fingerprint Affidavit to the Alcohol and Gaming Division PO Box 25101, Santa Fe, NM 87504-5101.



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AFFIDAVIT FOR FINGERPRINTS

Print Name: Title:

Social Security Number:

Type of License applied for:

License Number / Application Number:

I, (print name), swear that the information provided in this Affidavit is true and correct. I understand that if any information contained herein is false, or found to be false, the Alcohol & Gaming Division reserves the right to revoke the Liquor License or Resident Agent License that was issued in reliance on the exactness and truth of the information contained in this Affidavit.

Are you at least 21 years of age? Yes No

Have you ever been convicted of a felony? Yes No

Have you ever been convicted of two separate misdemeanor or petty misdemeanor violations of the New Mexico Liquor Control Act in any calendar year? Yes No

If convicted, have you obtained a pardon? Yes No N/A and,

Have your civil rights been restored? Yes No (Attach copy of pardon, if applicable.)

Are you a Citizen of the United States? Yes No

If not, what Country?

Resident Alien Number:

This form must be signed in the presence of a Notary Public.

I, the undersigned, swear that the information contained in this application is true and correct to the best of my knowledge.

Authorized Signature: Date:

NOTARY PUBLIC: State of, County of,

Signed and sworn to before me on this day of, 20,

by.

Signature of Notary Public:

SEAL

My Commission Expires on:

For Alcohol & Gaming Division Use Only:

TEMPORARY LIQUOR LICENSE APPROVAL

FINGERPRINT APPROVAL

Approved by Director: Date:

AGD use only| Fingerprints #/Received on: _____ Cleared on: _____ Server Permit# _____ Expires: _____
Liquor License # _____ or Application # _____

PERSONAL DATA AFFIDAVIT

INSTRUCTIONS: Submit this page for Each Individual Applicant, Each Principal Officer and Director of a Corporation, Each Stockholder (individual) owning 10% or more of the stock in Applicant Corporation, Each individual Limited Liability or General Partner, Each Resident Agent for a Corporation, and Each Manager and Member of LLC with 10% or more interest. Make additional copies of this page if necessary.

Print clearly.

First Name: _____ Last Name: _____

SS # _____ - _____ - _____ Birth Date: ____/____/____ Contact #: _____

Email Address: _____

Business Address: _____ Business Phone: _____

Residence Address: _____

City: _____ State: _____ Zip Code: _____

Driver's License, Issued in the State of: _____ DL No. _____

U.S. Citizenship or Citizen of: _____ Resident Alien # _____

Male Female Are you at least 21 years of age? Yes No Are you married? Yes No, *If yes,*

has your spouse ever been convicted of a felony in any jurisdiction? Yes No *If yes, provide details:* _____

ALIAS: If you have been known by any other name, list date and reason for other name(s). Attach additional pages if necessary.

Name(s) Used: _____ Date(s) of Change: _____

Reason for Change (such as Marriage/Divorce/Decree): _____

Have you been Convicted of a Felony? Yes No *If yes, provide details:* _____ and,

has the Governor restored your privilege to receive and hold a Liquor License? Yes, *copy attached* No N/A

Have you been convicted of two separate misdemeanor violations of the New Mexico Liquor Control Act in any calendar year?

Yes No *If yes, provide details:* _____

Have you ever had an Application for a Liquor License, in any State, suspended or revoked? Yes No *If yes, provide details:* _____

Do you directly or indirectly own any interest in a Liquor License? Yes, *list all License No.(s) and State(s):* _____

Yes, *see attached* No

If your response is Yes to the following two questions, you need to be alcohol server certified.

1. Will you manage, direct or control the sale of alcohol? Yes No

2. Will you be present on the licensed premises on a regular basis? Yes No

You must sign before a Notary Public, and ALL questions must be answered.

I, (print name) _____ swear that I have answered each question honestly, that the information provided in my responses are true and correct, and understand that if any information contained herein is false or found to be false, the Division may revoke the Liquor License issued under this Application.

Affiant Signature: _____ Date: _____

NOTARY PUBLIC USE ONLY: (State of _____, County of _____)

SUBSCRIBED & SWORN TO before me, this _____ day of _____, 20____

By: _____ Notary Public: _____

My Commission Expires: _____

SEAL