

## PRIVACY ACT STATEMENT/PAYMENT OF FEES TO NSP-CID

NEBRASKA LIQUOR CONTROL COMMISSION

301 CENTENNIAL MALL SOUTH

PO BOX 95046

LINCOLN, NE 68509-5046

PHONE: (402) 471-2571

FAX: (402) 471-2814

Website: [www.lcc.nebraska.gov](http://www.lcc.nebraska.gov)

### **THIS FORM IS REQUIRED TO BE SIGNED BY EACH PERSON BEING FINGERPRINTED:**

#### **DIRECTIONS FOR SUBMITTING FINGERPRINTS AND FEE PAYMENTS:**

- **FAILURE TO FILE FINGERPRINT CARDS AND PAY THE REQUIRED FEE TO THE NEBRASKA STATE PATROL WILL DELAY THE ISSUANCE OF YOUR LIQUOR LICENSE**
- Fee payment of **\$55.00 per person** **MUST** be made **DIRECTLY** to the Nebraska State Patrol;  
It is recommended to make payment through the **NSP PayPort** online system at [www.ne.gov/go/nsp](http://www.ne.gov/go/nsp)  
Or a check made payable to **NSP** can be mailed directly to the following address:  
**\*You must indicate on your check who the payment is for (the name of the person being fingerprinted) and the payment is for a Liquor License\*\*\***  
The Nebraska State Patrol – CID Division  
4600 Innovation Drive  
Lincoln, NE 68521
- Fingerprints taken at NSP LIVESCAN locations will be forwarded to NSP – CID  
**Applicant(s) will not have cards to include with license application.**
- Fingerprints taken at local law enforcement offices may be released to the applicants;  
**Original fingerprint cards must be mailed to the NLCC office.**
- Please visit <https://statepatrol.nebraska.gov/services/fingerprinting> for more information

***Applicant Notification and Record Challenge:** Your fingerprints will be used to check the criminal history records of the FBI. You have the opportunity to complete or challenge the accuracy of the information contained in the FBI identification record. The procedures for obtaining a change, correction, or updating a FBI identification record are set forth in Title 28, CFR, 16.34.*

Trade Name \_\_\_\_\_

Name of Person Being Fingerprinted: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Last 4 SSN: \_\_\_\_\_

Date fingerprints were taken: \_\_\_\_\_

Location where fingerprints were taken: \_\_\_\_\_

How was payment made to NSP?

☐ NSP PAYPORT ☐ CASH ☐ CHECK SENT TO NSP CK # \_\_\_\_\_

My fingerprints are already on file with the commission – fingerprints completed for a previous application less than 2 years ago? YES ☐

\_\_\_\_\_  
SIGNATURE REQUIRED OF PERSON BEING FINGERPRINTED