ANDY WILSON
OHIO ATTORNEY GENERAL

Civilian Identification Office
877-224-0043
Fax 866-750-0214
Civilianident@OhioAGO.gov

Procedures for Requesting a Copy of an Ohio Background Check

A copy of a prior background check may be requested only if the original background check was processed for an Ohio Revised Code reason that permits updates and if the new background check is needed for an Ohio Revised Code reason that permits updates. If you are unsure whether your request meets those parameters, please call 877-224-0043.

- You may request a copy of a prior Ohio BCI background check only. The FBI results are not permitted to be sent to any address other than the one indicated with the original background check. In such cases, a new FBI background check is required.
- To obtain a Request for Copy of Ohio Background Check please complete the form on the second page. If the request for a copy is made within 30 days of the original background check, there is no fee for processing and the request can be faxed to 866-750-0214.
- A request for a copy made more than 30 days after the original background check costs $8. Go to the e-Payment website and follow the instructions. Once the payment has been made, write the ID number at the bottom of the form under the Date line. Make sure you note the transaction number or print a receipt from the e-Payment website for your records.
- A copy request must be received within 11 months of the original fingerprint submission to allow for processing time before the background check expires.
- The request can be mailed to: BCI, Civilian Unit, PO Box 365, London, Ohio 43140, emailed to Civilianident@OhioAGO.gov or faxed to 866-750-0214.

Civilian Unit
Identification Division
Bureau of Criminal Investigation

Please note: If you are unable to submit payment electronically, a money order, certified check, business check or personal check made payable to: Treasurer, State of Ohio, must accompany the card if you do not have a billable agency code established with BCI. Cash or starter checks will not be accepted.

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REQUEST FOR COPY OF OHIO BACKGROUND CHECK:

Ohio Revised Code (ORC) for this background check: _____

(If no ORC is provided your request will NOT be processed)

Please contact your employer for assistance to obtain the correct ORC. Please visit our web-site for the list of the Ohio Revised codes at BCI-Background-Check-Reason-Codes-(PDF).aspx

NAME **(must match the same name submitted with fingerprints):**

_____

SSN: _____ DOB: _____

SEND BACKGROUND RESULTS TO:

NAME: _____

STREET: _____

CITY: _____

STATE: _____ ZIP CODE: _____

ONE free copy can be requested within 30 days of your original background check, after 30 days an $8 processing fee is required. Please go to the e-Payment website and follow the instructions. If paying by check or money order make payable to Treasurer, State of Ohio.

I hereby certify that I have given the above-mentioned person or agency permission to obtain a copy of any conviction record pertaining to me in the files of the Ohio Bureau of Criminal Investigation.

*REQUIRED:
Applicants Signature: _____ Date: _____
Applicants Phone Number: _____

e-Payment Transaction Number _____