

Colorado Fingerprinting Applicant Registration Instructions

Fingerprinting appointments are required. The following are step by step instructions to successfully register for fingerprinting. Please carefully read and follow the registration instructions carefully.

IMPORTANT - Make sure all of your information is correct, once your fingerprints are submitted you cannot change any information.

1. **Website** - Visit the website <https://abi.cabiond.com/> and click "Create Account" to begin.

New to Fingerprinting? [Create an Account and Proceed](#) English ▾

2. **Account Creation: Step 1** - Enter your first name, middle name (if applicable), last name, suffix (if applicable), gender, DOB & preferred communication language. Once you have verified all of your information is correct, click "Next".

Create an Account

Please fill the form below to create an account

1

2

3

Personal Information Contact Information Account Information

Personal Information

First Name *

Middle Name *

If you don't have a middle name, check the box below.

I don't have a Middle Name.

Last Name *

Suffix (Optional)

--Select--

I have an Alias, Maiden name and/or a proposed legal name change

Gender *

--Select--

Date of Birth *

mm/dd/yyyy

Preferred Communication Language

--Select--

Step 1 of 3

Next

Cancel

3. **Account Creation: Step 2** - Enter your primary email address **which should be your own personal email address** and is very important for notifications and status on your fingerprinting. Confirm your primary email address, enter your address & phone number. After verifying your information is correct click "Next".

Create an Account

Please fill the form below to create an account



Contact Information

Primary Email *

Confirm Primary Email *

[Add Secondary Email \(Optional\)](#)

Address *

Country *

State *

City *

Zip Code *

Primary Phone Number *

Secondary Phone Number (Optional)

Step 2 of 3

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Cancel

4. **Account Creation: Step 3** - Enter a user name, which can be your email address, create a password (the requirements are below), confirm your password and click “Create an Account”.

Create an Account
Please fill the form below to create an account

1 2 3
Personal Information Contact Information **Account Information**

Account Information

Username *



Password * Confirm Password *

Your Password must meet the following requirements

- Should not have blank spaces.
- Should have 8 to 15 characters.
- Should have at least one digit [0-9]
- Should have at least one capital letter [A-Z]
- Choose at least one of the listed special characters [!@#%&*_+~\':/,() [] -]

Step 3 of 3

5. **Place Order** - If you have placed an order previously, your order history will be displayed. To place a new order, click “Place New Order”.

 Welcome Smith, John  English

Order History

Order Number	Order Date	Location	Order Status	Appointment S...	Services	Amount	Action
0 - 0 of 0 items							

6. **Order Options** - Choose “Fingerprint Location” if you are visiting a fingerprint location - search by your zip code for the locations closest to you. Choose the location most convenient for you and click “Next”. If you are not able to visit a fingerprint location select “Mail Fingerprint Card” and click “Next” & skip to step 8.

Order Options

Welcome, please select which order option you want to create

Fingerprint Location
 At a Colorado Fingerprinting Sites

Event Code
 Onsite Fingerprinting

Mail Fingerprint Card
 Unable to Visit a Colorado Fingerprinting Location

You can also search zip code or choose from the map.

Enter Zip Code *

Location	Description	Images
<input type="radio"/> NewLocation_ME_1222 1925 Larimer St, Denver, CO 80202, USA	Test description	Images
<input type="radio"/> Test KM Location 221222 110 16th St Mall, Denver, CO 80202, USA	DESC KM LOC FOR FINGERPRINTING 22DEC22	Images

7. **Schedule Appointment** - The available days for the location selected will be displayed. Select the day you wish to get fingerprinted and the available times will be displayed. Select the time slot and click “Next”.

Schedule Appointment

Pick a time slot that works for you from the available dates.

January 2023							TODAY
SU	MO	TU	WE	TH	FR	SA	
1	2	3	4	5	6	7	
8	9	10	11	12	13	14	
15	16	17	18	19	20	21	
22	23	24	25	26	27	28	
29	30	31					

Selected
 Available
 Not Available

Available slots for: Tuesday, Jan 24, 2023

<input type="radio"/> 10:00 AM - 10:30 AM	<input type="radio"/> 10:30 AM - 11:00 AM	<input type="radio"/> 11:00 AM - 11:30 AM
<input type="radio"/> 11:30 AM - 12:00 PM	<input type="radio"/> 12:00 PM - 12:30 PM	<input type="radio"/> 12:30 PM - 01:00 PM
<input type="radio"/> 01:00 PM - 01:30 PM	<input type="radio"/> 01:30 PM - 02:00 PM	<input type="radio"/> 02:00 PM - 02:30 PM
<input type="radio"/> 02:30 PM - 03:00 PM	<input type="radio"/> 03:00 PM - 03:30 PM	<input type="radio"/> 03:30 PM - 04:00 PM
<input type="radio"/> 04:00 PM - 04:30 PM	<input type="radio"/> 04:30 PM - 05:00 PM	<input type="radio"/> 05:00 PM - 05:30 PM
<input type="radio"/> 05:30 PM - 06:00 PM	<input type="radio"/> 06:00 PM - 06:30 PM	<input type="radio"/> 06:30 PM - 07:00 PM
<input type="radio"/> 07:00 PM - 07:30 PM	<input type="radio"/> 07:30 PM - 08:00 PM	

Step 2 of 9

8. **Billing Code** - Select “Yes” that you do have a billing code and enter the billing code. The billing code for your institution is **1100TALIC**

Billing Code

Please select billing code option.

Do you have a Billing Code?

Yes No

Enter Billing Code *

1100TALIC

Step 3 of 9

Previous

Next

Cancel

9. **Service Type** - The Service Type & CBI Unique ID associated with the billing code for your institution will be displayed. Just click “Next” on the next two screens to proceed.

Service Types

Please select the options for the service you require. If you are not sure which service you need please consult with the agency/employer that requested you get fingerprinted.

CABS

Colorado Bureau of Investigation (CBI) fingerprint processing for licensure/employment in Colorado. Order if instructed by your employer or licensing agency and you have the CBI unique ID. If you are not sure of the CBI unique ID, you can use the lookup tool but if you are not sure contact your agency/employer for assistance.

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Service Types

Please select the options for the service you require. If you are not sure which service you need please consult with the agency/employer that requested you get fingerprinted.

Why do you need to get fingerprinted?

CABS

Enter CBI Unique ID *

1100DCLI

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10. Personal Information - Your personal information from when you created your account will be displayed. If your SSN is required for the specific service you will be required to enter your SSN. **Double check all of your information to make sure it is correct.** Click "Edit Profile" to make any changes/corrections. After verifying your information is correct click "Next".

Profile Details [Edit Profile](#)

First Name:	John	Middle Name:	
Last Name:	Smith	Primary Email:	testmanc88@gmail.com
Gender:	Female	Secondary Email:	-
Date of Birth:	7/4/1976	Primary Phone:	(720)-292-2722
Preferred Communication Language:	English (Inglés)	Secondary Phone:	
Social Security Number:		Address:	110 16th St Denver, COLORADO 80223, UNITED STATES of AMERICA

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Next

Cancel

11. DOB Confirmation - You need to enter your DOB and if applicable the last four of your SSN to proceed. The DOB and last four digits of your SSN must match what was entered for your profile.

Confirm your Date of Birth ×

Date of Birth

mm/dd/yyyy 

Cancel **Confirm**

12. Fingerprint Information - Enter the information needed for fingerprinting which includes your place of birth (country/state), citizenship, race, eye color, hair color, height & weight. If the daycare license number is required for your institution you will need to enter your institution's daycare license number.

Personal Details		Service Details	
Place of Birth (Country):*	Place of Birth (State):*	CBI Unique ID	[REDACTED]
-Select-	-Select-	Reason Fingerprinted:	CHILD CARE LICENSEE
Citizenship:*	Race:*	Reason Fingerprinted	CHILD CARE LICENSEE
-Select-	-Select-	Colorado Revised	[REDACTED]
Eye Color:*	Hair Color:*	Statute (C.R.S.):	
-Select-	-Select-	Total Fee:	[REDACTED]
Height (ft):*	Height (in):*	AcctNam (Literal):	CATHEDRAL RIDGE
-Select-	-Select-	AcctAdr:	[REDACTED]
Weight (lbs):*		AcctCty:	WOODBRIDGE PARK
Please enter value.		AcctSta:	[REDACTED]
		AcctZip:	80066
		Daycare License#*	1559492

Step 6 of 9

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13. Review and Privacy Act Statement - This is your last change to review your information and ensure it is correct. Scroll to the bottom and click the acknowledgement that you have read the privacy act statement. Click "Next" to proceed.

Privacy Act Statement

The FBI's acquisition, retention, and sharing of information submitted on this form is generally authorized under 28 USC 534 and 28 CFR 16.30-16.34. The purpose for requesting this information from you is to provide the FBI with a minimum of identifying data to permit an accurate and timely search of FBI identification records. Providing this information (including your Social Security Account Number) is voluntary; however, failure to provide the information may affect the completion of your request. The information reported on this form may be disclosed pursuant to your consent and may also be disclosed by the FBI without your consent pursuant to the Privacy Act of 1974 and all applicable routine uses.

I have read the Privacy Act Statement and Accept it.

Step 7 of 9

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14. Order Summary - You will see a summary of your order. If there is a balance you will need to pay the balance with a credit card, otherwise just click "Finish".

Payment Details

Please select your preferred method of payment to complete your order.

Order Summary

Service Name	Base Price	Unit	Unit Price	Net Price	Paid by Institution	Paid by Applicant
CABS	\$54.50	NA	NA	\$54.50	\$54.50	\$0.00

Sub Total: \$0.00
Total: \$0.00

Balance Amount: \$0.00

[Previous](#) [Finish](#) [Cancel](#)

15. Order Confirmation - Your confirmation page will be displayed with your order number which will also be emailed to your email address.

✔ Your order is created successfully.

Order Confirmation
Congratulations, Your order is confirmed.

Thank you for your order!
An email confirmation has been sent to davidtestbradley@cfp.com

Order Summary [Print Order](#)

Order Details
Order Number: 1091-285-4702-36-148 Order Date: 1/23/2023

Fingerprinting - Please bring the following when you go to the location to have your fingerprints taken.

- **Order ID** - Please make sure to bring in the order ID from the fingerprint registration.
- **Govt. Issued Photo ID** - Please make sure to bring a valid photo ID which can be one of the following:
 - Valid Driver's License - Issued by Colorado or another State.
 - Valid Identification Card - Issued by Colorado or another State.
 - Federal ID Card - With seal or logo from Federal Agency.
 - Valid Commercial Drivers License - Issued by Colorado or another State.
 - Valid U.S. Passport
 - Valid Foreign Passport
 - Valid Passport Book/Card
 - Valid U.S. Military Identification Card
 - Permanent Resident Card/Green Card
 - Enhanced Tribal Card

Rejections - In the event your fingerprints are rejected by either the CBI or FBI, you will receive a notification by email and text if you opted for receiving text messages.

DO NOT PLACE A NEW ORDER if your fingerprints are rejected, you will “reschedule an appointment” under the existing order.

Mail Fingerprint Card - If you selected mail fingerprint card if you are unable to physically visit a fingerprint location. The following are the next steps in the process.

- 1. FD-258 Fingerprint Card** - You must have your fingerprints taken on FD-258 fingerprint cards. You can typically do this at local law enforcement or any private agency qualified to take fingerprints. We recommend obtaining two (2) fingerprint cards. The cards need to be signed by both you and the official taking fingerprints and all personally identifiable information must be completed.
- 2. Confirmation** - At the end of the enrollment process please print your confirmation receipt with your order number.
- 3. Mail** - Mail all items listed above to:

**Colorado Fingerprinting
Attn: CABS Fingerprint Processing
110 16th St 8th Floor
Denver CO 80202**

Once your request has been received it will be processed within 3-5 business days.

Contact - Please contact us if you have any questions or for assistance.

Phone: 833-224-2227

Email: info@coloradofingerprinting.com

Website: www.coloradofingerprinting.com

Applicant Account Login: <https://abi.cabiond.com>