

Livescan Application for a New or Replacement Livescan

Complete and submit the application form to the following email address: livescans@mshp.dps.mo.gov.

The maximum amount provided by the plan for the procurement of a livescan will not exceed \$6,625.00 for either a purchase or subscription.

Agency Name:

Agency ORI:

Name of Agency Head (Chief of Police/Sheriff):

Telephone:

Email:

Agency Livescan Administrator:

Telephone:

Email:

Name of Agency Contractual Signatory Authority (Mayor, County Commissioner, etc.):

Telephone:

Email:

Agency billing address:

Name of person completing this application:

Livescan Information

Please check the appropriate boxes below:

1. Is this application for a replacement or new livescan:

Replacement

New

2. If Replacement is checked, please provide the first two letters of our agency's current livescan OCN Identifier:

3. Please provide the number of criminal arrests submitted under your agency ORI in the past 12 months:

_____ # of arrests submitted via Ink card

_____ # of arrests submitted via livescan

4. Does the location for the livescan have the required network connection (see the required network connection informational link on the webpage if unsure)? YES NO

5. Is the agency agreeing to pay for ongoing connection fees? YES NO

6. In the event the Missouri State Legislature does not renew the appropriation, is the agency agreeing to make future payments past the current state fiscal year? YES NO

7. Physical location for Livescan:

8. List any additional agencies that this new/replacement livescan will be accessible:

9. Is the agency agreeing to uphold the minimum criteria for program qualifications? Which includes a current contract, required number of criminal submissions and network connectivity. YES NO

10. Please choose your livescan configuration below: If uncertain, please return to main web page and review the "LSAAS vs. Livescan Purchase cost consideration" link

Purchase Device – Please complete the below Purchase Configuration Request

Livescan as a Service Lease – Please complete the below Livescan as a Service Lease Configuration Request.

11. Please include any other information that you believe is relevant to this application.

Livescan Expenditure Program Purchase Configuration Request

The Missouri State Livescan contract provides for the purchase of livescans and peripheral additions through the state livescan vendor, Idemia. Below represents the current purchase costs and corresponding annual maintenance. (Please note, per the state contract, annual maintenance may increase up to 3% per year after the first year. Any equipment purchased will be under warranty for the first year.) **The state livescan appropriation will cover costs on a livescan order up to \$6,625 per fiscal year.** In order to calculate the amount due, total the costs associated with your choices below and subtract the annual \$6,625 allocation.

Please choose from the following options below:

- Idemia Desktop LiveScan - TP+ PP - **\$16,573.00** to purchase (\$2,989.00 annual maintenance after one-year warranty)
- Mug-Photo Capture - **\$1,648.00** to purchase (\$212.00 annual maintenance after one-year
- warranty) FBI Duplex Printer - **\$1,365.00 to purchase** (\$208.00 annual maintenance after (Please check this box if you will need to print fingerprint cards or to provide hard copies for the Prosecutor and/or Court)
- Livescan Cabinet - If needed, this is covered under the state appropriation at no cost to agency.

The above options include standard 8x5 maintenance. If your agency desires 24x7 service, please contact MSHP CJIS for contracted 24x7 pricing.

Please provide your agency's primary contact information for Idemia contract purposes:

Printed Name: _____

Title: _____

Agency Name: _____

Date: _____

E-mail Address: _____

Delivery Information - Livescan and associated equipment should be delivered to:

Point of Contact Name _____

Number/Street: _____

City, State & Zip code: _____

Contact phone number for delivery _____

Please note: Once the order is placed for the device, Idemia will be sending a service agreement which outlines the details of the livescan contract directly to each agency and must be signed prior to any order being finalized.

Livescan Expenditure Program LSAAS Configuration Request

The Missouri State Livescan contract provides for a five-year live scan subscription option for Missouri law enforcement agencies through the state vendor, Idemia. To participate in the Livescan as a Service (LSAAS) option, your agency would sign a 5-year livescan subscription contract with Idemia, agreeing to pay the annual subscription fee which does not increase for the life of the contract. If your agency wishes to renew at the end of the 5-year subscription, Idemia will replace your livescan with an upgraded configuration with the renewal of another 5-year contract. **The state livescan appropriation will cover costs associated with the subscription up to \$6,625 per fiscal year.** Please note the Patrol will purchase a heavy-duty live scan cabinet if needed as a one-time cost and is not associated with the subscription fee.

If you would like to obtain a livescan through the subscription program, please place a check mark next to your desired options below (annual subscription fee shown beside each option):

- Idemia Desktop LiveScan - TP+ PP \$5,250 per year
- Mug-Photo Capture - \$664 per year
- FBI Duplex Printer - \$678 per year (Please check this box if you will need to print fingerprint cards, or provide hard copies for the Prosecutor and/or Court)
- Livescan Cabinet (one- time -covered cost, not included in the LAAS subscription)

The above options include standard 8x5 service. If your agency desires 24x7 service, please contact MSHP CJIS for contracted 24x7 pricing.

Please provide your agency's primary contact information for Idemia contract purposes:

Printed Name: _____

Title: _____

Agency Name: _____

Date: _____

E-mail Address: _____

Delivery Information - Livescan and associated equipment should be delivered to:

Point of Contact Name _____

Number/Street: _____

City, State & Zip code: _____

Contact phone number for delivery _____

Please note: *Once the order is placed for the device, Idemia will be sending a service agreement which outlines the details of the livescan contract directly to each agency and must be signed prior to any order being finalized.*