

## Request for Proposal

### RFP Cover Sheet

#### Administrative Information

<b>Title of RFP:</b> Live Scans & Card Scans		<b>RFP Number:</b> RFP0917595030	
<b>Agency:</b> Iowa Department of Administrative Services on behalf of Iowa Department of Public Safety			
Number of years of initial contract term: One	Number of possible annual extensions: Five	Available to Political Subdivisions?	Yes
<b>State Issuing Officer:</b> Steve Oberbroeckling Purchasing Agent III Phone: 515-725-2090 E-mail: steve.oberbroeckling@iowa.gov		<b>Mailing Address:</b> Iowa Department of Administrative Services Hoover State Office Building, Level 3 1305 East Walnut Street Des Moines, IA 50319-0105	
<b>PROCUREMENT TIMETABLE—Event or Action:</b>		<b>Date/Time (Central Time):</b>	
State Posts Notice of RFP on TSB website		25 JULY 2017	
State Issues RFP		27 JULY 2017	
RFP written questions, requests for clarification, and suggested changes from Contractors due:		09 AUGUST 2017/1:00PM	
Agency's written response to questions, requests for clarification, and suggested changes due approximately:		16 AUGUST 2017	
Proposals Due Date:		01 SEPTEMBER 2017/1:00PM	
Vendor Demonstration:		Week of 11 September 2017	
<b>Relevant Websites:</b>	<b>Web-address:</b>		
Internet website where Addenda to this RFP will be posted:	<a href="http://bidopportunities.iowa.gov/">http://bidopportunities.iowa.gov/</a>		
Internet website where contract terms and conditions are posted:	<a href="https://das.iowa.gov/sites/default/files/procurement/pdf/050116%20terms%20services.pdf">https://das.iowa.gov/sites/default/files/procurement/pdf/050116%20terms%20services.pdf</a> <a href="https://das.iowa.gov/sites/default/files/procurement/pdf/050116%20terms%20goods.pdf">https://das.iowa.gov/sites/default/files/procurement/pdf/050116%20terms%20goods.pdf</a>		
Number of Copies of Proposals Required to be Submitted:	<b>Technical Proposal :</b> 1 Original, 2 Copies, and 1 Digital  <b>Cost Proposal:</b> 1 Original, 2 Copies, and 1 Digital		

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<b>SECTION 1      INTRODUCTION</b>
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**1.1 Purpose**

The purpose of this Request for Proposals (RFP) is to solicit proposals from Responsible Respondents to provide the goods and/or services identified on the RFP cover sheet and further described in Sections of this RFP to the Agency identified on the RFP cover sheet. The Agency intends to award a Contract(s) for the initial period identified on the RFP cover sheet, and the Agency, in its sole discretion, may extend the Contract(s) for up to the number of annual extensions identified on the RFP cover sheet.

**1.2 Definitions**

For the purposes of this RFP and the resulting contract, the following terms shall mean:

**“Agency”** means the agency identified on the RFP cover sheet that is issuing the RFP and any other agency that purchases from the Contract.

**“Contract”** means the contract(s) entered into with the successful Contractor(s) as described in Section 6.

**“Contractor”** means the contract(s) entered into with the successful Contractor(s) as described in Section 6.1.

**“General Terms and Conditions”** shall mean the General Terms and Conditions for Services Contracts as referenced on the RFP cover page.

**“Materially Unbalanced Response”** means a response in which line item prices are structured so that it is possible that the Respondent who appears to be low will not end up having the lowest overall cost to the State, due to high prices on particular line items.

**“Mathematically Unbalanced Proposal”** occurs when a Respondent’s pricing on some items is significantly more heavily loaded than the pricing on other items. A mathematically unbalanced response may include pricing on some item(s) that is significantly lower than the Respondent’s actual costs on those item(s) (including reasonable proportionate share of the Respondent’s anticipated profit, overhead costs, and other indirect costs that the Respondent anticipates for the performance of the items in question) and significantly higher than the Respondent’s actual costs on other item(s). In multi-year contracts, a bid might also be mathematically unbalanced if the costs are front-end loaded. A mathematically unbalanced response is also a materially unbalanced response if there is reasonable doubt that awarding the contract to the low Respondent, who submitted a mathematically unbalanced response, would result in the lowest overall cost.

**“Proposal”** means the Respondent’s proposal submitted in response to the RFP.

**“Respondent”** means the company, organization or other business entity submitting a proposal in response to this RFP.

**“Responsive Proposal”** means a Proposal that complies with the material provisions of this RFP.

“RFP” means this Request for Proposals and any attachments, exhibits, schedules or addenda hereto.

“State” means the State of Iowa, the Agency identified on the Contract Declarations & Execution Page(s), and all state agencies, boards, and commissions, and any political subdivisions making purchases from the Contract as permitted by this RFP.

### **1.3 Overview of the RFP Process**

This RFP is designed to provide Respondents with the information necessary for the preparation of competitive Proposals. The RFP process is for the Agency’s benefit and is intended to provide the Agency with competitive information to assist in the selection process. It is not intended to be comprehensive. Each Contractor is responsible for determining all factors necessary for submission of a comprehensive Proposal.

Respondents will be required to submit their Proposals in hardcopy and on digital media (i.e. CD, USB drive, etc.). It is the Agency’s intention to evaluate Proposals from all Respondents that submit timely Responsive Proposals, and award the Contract(s) in accordance with Section 5, Evaluation and Selection.

### **1.4 Background**

The Iowa Division of Criminal Investigation (DCI) is designated as the central repository for Iowa’s criminal history files and records. All Iowa criminal history files are created with the use of fingerprint based arrest data. This fingerprint based arrest data is submitted by any of Iowa’s nearly 400 law enforcement agencies and correctional institutions.

All fingerprint based data is housed in the DCI’s Biometric Identification System (BIS). The DCI is in the process of activating a new BIS, which is expect to go-live in October 2017.

Submission of the fingerprint based arrest data is completed by either of two means: inked submission or electronic submissions. Inked submissions require an arrestee to roll their fingers and palms in ink and then roll the impressions on to a card. The card is then placed the US Mail and delivered to the DCI for processing. Electronic submissions are inkless, requiring the arrestee to roll their finger and palms on a scanner. The prints are then submitted to the DCI, electronically, using for processing. Electronic submission allows for the submission of additional biometric data, such as mugshot.

Submission of electronic prints allow for more useable prints and a processing time that is more efficient and timely.

Electronic submission can be obtained through use of a “live scan” terminal. A live scan terminal allows a law enforcement agency to submit prints thorough a secure connection to the central database. Because the live scan terminals are housed in a jail setting, a ruggedized housing is required for safety reason.

Inked submissions, while historically submitted via US Mail, can also be submitted electronically through the use of a “card scan” terminal. A card scan terminal allows a law enforcement agency to scan inked cards and submit the cards through a secure connection to the central database.

In FY16, the DCI processed nearly 80,000 criminal fingerprint cards, with approximately 80% being electronically submissions and the remaining 20% being inked submissions.

Currently, there are approximately 48 Iowa criminal justice agencies that use live scan terminals. The 48 live scan terminals are a combination of county/local funded and grant funded terminals. Maintenance and/or maintenance contracts for the 48 live scan sites is the responsibility of the county/local agency.

The needs of law enforcement are ever changing. In the future, criminal live scans may need to be portable, with those live scans being either ruggedized or non-ruggedized.

The DCI is seeking a respondent(s) to provide a live scan solution, both ruggedized and non-ruggedized, as well as portable and fixed, for criminal application.

The DCI is seeking a respondent(s) to provide a card scan solution for criminal application.

In addition, the DCI is seeking a maintenance contract option(s) that allow agencies to 1) pay, in full, at the time of purchase and be in effect for five (5) years beyond any initial manufacturer's maintenance/service warranty; or 2) pay a static amount for maintenance for five (5) years beyond any initial manufacturer's maintenance/service warrant.

**2.1 Issuing Officer**

The Issuing Officer identified in the RFP cover sheet is the sole point of contact regarding the RFP from the date of issuance until a Notice of Intent to Award the Contract is issued.

**2.2 Restriction on Communication**

From the issue date of this RFP until a Notice of Intent to Award the Contract is issued, Respondents may contact only the Issuing Officer. The Issuing Officer will respond only to written questions regarding the procurement process. Questions related to the interpretation of this RFP must be submitted as provided in Section 2. Oral questions related to the interpretation of this RFP will not be accepted. Respondents may be disqualified if they contact any State employee other than the Issuing Officer about the RFP except that Respondents may contact the State Targeted Small Business Office on issues related to the preference for Targeted Small Businesses.

**2.3 Downloading the RFP from the Internet**

The RFP and any addenda to the RFP will be posted at <http://bidopportunities.iowa.gov/>. The Respondent is advised to check the website periodically for addenda to this RFP, particularly if the Respondent downloaded the RFP from the Internet as the Respondent may not automatically receive addenda. It is the Respondent's sole responsibility to check daily for addenda to posted documents.

**2.4 Procurement Timetable**

The dates provided in the procurement timetable on the RFP cover sheet are provided for informational and planning purposes. The Agency reserves the right to change the dates. If the Agency changes any of the deadlines for Respondent submissions, the Agency will issue an addendum to the RFP.

**2.5 Questions, Requests for Clarification, and Suggested Changes**

Respondents are invited to submit written questions and requests for clarifications regarding the RFP. Respondents may also submit suggestions for changes to the specifications of this RFP. The questions, requests for clarifications, or suggestions must be in writing and received by the Issuing Officer before the date and time listed on the RFP cover sheet. Oral questions will not be permitted. If the questions, requests for clarifications, or suggestions pertain to a specific section of the RFP, Respondent shall reference the page and section number(s). The Agency will send written responses to questions, requests for clarifications, or suggestions received from Respondents. The Agency's written responses will become an addendum to the RFP. If the Agency decides to adopt a suggestion that modifies the RFP, the Agency will issue an addendum to the RFP.

The Agency assumes no responsibility for oral representations made by its officers or employees unless such representations are confirmed in writing and incorporated into the RFP through an addendum.

## 2.6 Amendment to the RFP

The Agency reserves the right to amend the RFP at any time using an addendum. The Respondent shall acknowledge receipt of all addenda in its Proposal. If the Agency issues an addendum after the due date for receipt of Proposals, the Agency may, in its sole discretion, allow Respondents to amend their Proposals in response to the addendum.

## 2.7 Amendment and Withdrawal of Proposal

The Respondent may amend or withdraw and resubmit its Proposal at any time before the Proposals are due. The amendment must be in writing, signed by the Respondent and received by the time set for the receipt of Proposals. Electronic mail and faxed amendments will not be accepted. Respondents must notify the Issuing Officer in writing prior to the due date for Proposals if they wish to completely withdraw their Proposals.

## 2.8 Submission of Proposals

The Agency must receive the Proposal at the Issuing Officer's address identified on the RFP cover sheet before the "Proposals Due" date listed on the RFP cover sheet. **This is a mandatory specification and will not be waived by the Agency. Any Proposal received after this deadline will be rejected and returned unopened to the Respondent.** Respondents mailing Proposals must allow ample mail delivery time to ensure timely receipt of their Proposals. It is the Respondent's responsibility to ensure that the Proposal is received prior to the deadline. Postmarking by the due date will not substitute for actual receipt of the Proposal. Electronic mail and faxed Proposals will not be accepted.

Respondents must furnish all information necessary to enable the Agency to evaluate the Proposal. Oral information provided by the Respondent shall not be considered part of the Respondent's Proposal unless it is reduced to writing.

## 2.9 Proposal Opening

The Agency will open Proposals after the deadline for submission of Proposals has passed. The Proposals will remain confidential until the Evaluation Committee has reviewed all of the Proposals submitted in response to this RFP and the Agency has issued a Notice of Intent to Award a Contract. *See Iowa Code Section 72.3.* However, the names of Respondents who submitted timely Proposals will be publicly available after the Proposal opening. The announcement of Respondents who timely submitted Proposals does not mean that an individual Proposal has been deemed technically compliant or accepted for evaluation.

## 2.10 Costs of Preparing the Proposal

The costs of preparation and delivery of the Proposal are solely the responsibility of the Respondent.

## 2.11 No Commitment to Contract

The Agency reserves the right to reject any or all Proposals received in response to this RFP at any time prior to the execution of the Contract. Issuance of this RFP in no way constitutes a commitment by the Agency to award a contract.

## **2.12 Rejection of Proposals**

The Agency may reject outright and not evaluate a Proposal for reasons including without limitation:

- 2.12.1** The Respondent fails to deliver the cost proposal in a separate envelope.
- 2.12.2** The Respondent acknowledges that a mandatory specification of the RFP cannot be met.
- 2.12.3** The Respondent's Proposal changes a material specification of the RFP or the Proposal is not compliant with the mandatory specification of the RFP.
- 2.12.4** The Respondent's Proposal limits the rights of the Agency.
- 2.12.5** The Respondent fails to include information necessary to substantiate that it will be able to meet a specification of the RFP as provided in Section 4 of the RFP.
- 2.12.6** The Respondent fails to timely respond to the Agency's request for information, documents, or references.
- 2.12.7** The Respondent fails to include proposal security, if required.
- 2.12.8** The Respondent fails to include any signature, certification, authorization, stipulation, disclosure or guarantee as provided in Section 4 of this RFP.
- 2.12.9** The Respondent presents the information requested by this RFP in a format inconsistent with the instructions of the RFP or otherwise fails to comply with the specifications of this RFP.
- 2.12.10** The Respondent initiates unauthorized contact regarding the RFP with state employees.
- 2.12.11** The Respondent provides misleading or inaccurate responses.
- 2.12.12** The Respondent's Proposal is materially unbalanced.
- 2.12.13** There is insufficient evidence (including evidence submitted by the Respondent and evidence obtained by the Agency from other sources) to satisfy the Agency that the Respondent is a Responsible Respondent.
- 2.12.14** The Respondent alters the language in Attachment 1, Certification Letter or Attachment 2, Authorization to Release Information letter.

## **2.13 Nonmaterial Variances**

The Agency reserves the right to waive or permit cure of nonmaterial variances in the Proposal if, in the judgment of the Agency, it is in the State's best interest to do so. Nonmaterial variances include but are not limited to: minor failures to comply that do not affect overall

responsiveness, that are merely a matter of form or format, that do not change the relative standing or otherwise prejudice other Contractors, that do not change the meaning or scope of the RFP, or that do not reflect a material change in the specifications of the RFP. In the event the Agency waives or permits cure of nonmaterial variances, such waiver or cure will not modify the RFP specifications or excuse the Respondent from full compliance with RFP specifications or other Contract specifications if the Respondent is awarded the Contract. The determination of materiality is in the sole discretion of the Agency.

#### **2.14 Reference Checks**

The Agency reserves the right to contact any reference to assist in the evaluation of the Proposal, to verify information contained in the Proposal and to discuss the Respondent's qualifications and the qualifications of any subcontractor identified in the Proposal.

#### **2.15 Information from Other Sources**

The Agency reserves the right to obtain and consider information from other sources concerning a Respondent, such as the Respondent's capability and performance under other contracts, the qualifications of any subcontractor identified in the Proposal, the Respondent's financial stability, past or pending litigation, and other publicly available information.

#### **2.16 Verification of Proposal Contents**

The content of a Proposal submitted by a Respondent is subject to verification. If the Agency determines in its sole discretion that the content is in any way misleading or inaccurate, the Agency may reject the Proposal.

#### **2.17 Proposal Clarification Process**

The Agency reserves the right to contact a Respondent after the submission of Proposals for the purpose of clarifying a Proposal. This contact may include written questions, interviews, site visits, a review of past performance if the Respondent has provided goods and/or services to the State or any other political subdivision wherever located, or requests for corrective pages in the Respondent's Proposal. The Agency will not consider information received from or through Respondent if the information materially alters the content of the Proposal or the type of goods and/or services the Respondent is offering to the Agency. An individual authorized to legally bind the Respondent shall sign responses to any request for clarification. Responses shall be submitted to the Agency within the time specified in the Agency's request. Failure to comply with requests for additional information may result in rejection of the Proposal.

#### **2.18 Disposition of Proposals**

All Proposals become the property of the State and shall not be returned to the Respondent. Once the Agency issues a Notice of Intent to Award the Contract, the contents of all Proposals will be in the public domain and be available for inspection by interested parties, except for information for which Respondent properly requests confidential treatment according to exceptions provided in *Iowa Code Chapter 22* or other applicable law.

#### **2.19 Public Records and Requests for Confidential Treatment**

The Agency's release of public records is governed by Iowa Code chapter 22. Contractors are encouraged to familiarize themselves with Chapter 22 before submitting a Proposal. The Agency will copy and produce public records upon request as required to comply with Chapter 22 and will treat all information submitted by a Contractor as non-confidential records unless

Contractor requests specific parts of the Proposal be treated as confidential at the time of the submission as set forth herein **AND the information is confidential under Iowa or other applicable law.**

**2.19.1 Form 22 Request for Confidentiality**

***FORM 22 MUST BE COMPLETED AND INCLUDED WITH CONTRACTOR'S PROPOSAL. COMPLETION AND SUBMITTAL OF FORM 22 IS REQUIRED WHETHER THE PROPOSAL DOES OR DOES NOT CONTAIN INFORMATION FOR WHICH CONFIDENTIAL TREATMENT WILL BE REQUESTED. FAILURE TO SUBMIT A COMPLETED FORM 22 WILL RESULT IN THE PROPOSAL CONSIDERED NON-RESPONSIVE AND NOT EVALUATED.***

**2.19.2 Confidential Treatment Is Not Requested**

A Contractor not requesting confidential treatment of information contained in its Proposal shall complete Section I of Form 22 and submit Form 22 with the Proposal.

**2.19.3 Confidential Treatment of Information is Requested**

A Contractor requesting confidential treatment of specific information shall: (1) fully complete Section II of Form 22, (2) conspicuously mark the outside of its Proposal as containing confidential information, (3) mark each page upon which the Contractor believes confidential information appears **and CLEARLY IDENTIFY EACH ITEM for which confidential treatment is requested; MARKING A PAGE IN THE PAGE MARGIN IS NOT SUFFICIENT IDENTIFICATION**, and (4) submit a "Public Copy" from which the confidential information has been excised.

Form 22 will not be considered fully complete unless, for each confidentiality request, the Contractor: (1) enumerates the specific grounds in Iowa Code chapter 22 or other applicable law that supports treatment of the material as confidential, (2) justifies why the material should be maintained in confidence, (3) explains why disclosure of the material would not be in the best interest of the public, and (4) sets forth the name, address, telephone, and e-mail for the person authorized by Contractor to respond to inquiries by the Agency concerning the confidential status of such material.

**The Public Copy from which confidential information has been excised is in addition to the number of copies requested in Section 3 of this RFP.** The confidential material must be excised in such a way as to allow the public to determine the general nature of the material removed and to retain as much of the Proposal as possible.

**Failure to request information be treated as confidential as specified herein shall relieve Agency and State personnel from any responsibility for maintaining the information in confidence. Contractors may not request confidential treatment with respect to pricing information and transmittal letters. A contractor's request for confidentiality that does not comply with this section or a contractor's request for confidentiality on information or material that cannot be held in confidence as set forth herein are grounds for rejecting contractor's Proposal as non-responsive. Requests to maintain an entire Proposal as confidential will be rejected as non-responsive.**

If Agency receives a request for information that Contractor has marked as confidential and if a judicial or administrative proceeding is initiated to compel the release of such material, Contractor shall, at its sole expense, appear in such action and defend its request for confidentiality. If Contractor fails to do so, Agency may release the information or material with or without providing advance notice to Contractor and with or without affording Contractor the opportunity to obtain an order restraining its release from a court possessing competent jurisdiction. Additionally, if Contractor fails to comply with the request process set forth herein, if Contractor's request for confidentiality is unreasonable, or if Contractor rescinds its request for confidential treatment, Agency may release such information or material with or without providing advance notice to Contractor and with or without affording Contractor the opportunity to obtain an order restraining its release from a court possessing competent jurisdiction.

**2.20 Copyright Permission**

By submitting a Proposal, the Respondent agrees that the Agency may copy the Proposal for purposes of facilitating the evaluation of the Proposal or to respond to requests for public records. By submitting a Proposal, the Respondent consents to such copying and warrants that such copying will not violate the rights of any third party. The Agency shall have the right to use ideas or adaptations of ideas that are presented in Proposals.

**2.21 Release of Claims**

By submitting a Proposal, the Respondent agrees that it will not bring any claim or cause of action against the Agency based on any misunderstanding concerning the information provided in the RFP or concerning the Agency's failure, negligent or otherwise, to provide the Respondent with pertinent information in this RFP.

**2.22 Respondent Presentations**

Respondents may be required to make a presentation. The determination as to need for presentations, and the location, order, and schedule of the presentations is at the sole discretion of the Agency. The presentation may include slides, graphics and other media selected by the Respondent to illustrate the Respondent's Proposal. The presentation shall not materially change the information contained in the Proposal.

**2.23 Evaluation of Proposals Submitted**

Proposals that are timely submitted and are not rejected will be reviewed in accordance with Section 5 of the RFP. The Agency will not necessarily award a Contract resulting from this RFP to the Respondent offering the lowest cost. Instead, the Agency will award the Contract(s) to the Responsible Respondent(s) whose Responsive Proposal the agency believes will provide the best value to the Agency and the State.

**2.24 Award Notice and Acceptance Period**

Notice of Intent to Award the Contract(s) will be sent to all Respondents submitting a timely Proposal and may be posted at the website shown on the RFP cover sheet. Negotiation and execution of the Contract(s) shall be completed no later than thirty (30) days from the date of the Notice of Intent to Award or such other time as designated by Agency. If the successful Respondent fails to negotiate and deliver an executed Contract by that date, the Agency, in its sole discretion, may cancel the award and award the Contract to the remaining Respondent the Agency believes will provide the best value to the State.

**2.25 No Contract Rights until Execution**

No Contractor shall acquire any legal or equitable rights regarding the Contract unless and until the Contract has been fully executed by the successful Contractor and the Agency.

**2.26 Choice of Law and Forum**

This RFP and the Contract shall be governed by the laws of the State of Iowa. Changes in applicable laws and rules may affect the award process or the Contract. Respondents are responsible for ascertaining pertinent legal requirements and restrictions. Any and all litigation or actions commenced in connection with this RFP shall be brought in the appropriate Iowa forum.

**2.27 Preference**

By virtue of statutory authority, a preference will be given to products and provisions grown and coal produced within the state of Iowa. Preference application: Tied responses to solicitations, regardless of the type of solicitation, are decided in favor of Iowa products and Iowa-based businesses per 11 IAC 117.5(1)-(2), 117.12(4).

**2.28 Restrictions on Gifts and Activities**

*Iowa Code Chapter 68B* restricts gifts which may be given or received by State employees and requires certain individuals to disclose information concerning their activities with State government. Respondents are responsible to determine the applicability of this Chapter 68B to their activities and to comply with its requirements. In addition, pursuant to *Iowa Code section 722.1*, it is a felony offense to bribe or attempt to bribe a public official.

**2.29 No Minimum Guaranteed**

The Agency does not guarantee any minimum level of purchases under the Contract.

**2.30 Appeals**

Appeals of the Notice of Intent to Award are governed by the Agency's vendor appeal process. Contractors may obtain information about the appeal process from the Issuing Officer and at Iowa Administrative Code chapters 11-7 and 11-105.

**SECTION 3      FORM AND CONTENT OF PROPOSALS**

**3.1      Instructions**

These instructions describe and define the format and content of the Proposal. They are designed to facilitate a uniform review process. Failure to adhere to the Proposal format may result in the rejection of the Proposal.

**3.1.1**    The Proposal shall be typewritten on 8.5" x 11" paper, include numbered pages, and sent in sealed envelope. The Proposal shall be divided into two parts: (1) the Technical Proposal and (2) the Cost Proposal. The Technical Proposal and the Cost Proposal shall be labeled as such and placed in separate sealed envelopes. The envelopes shall be labeled with the following information:

RFP Number: RFP091759530  
RFP Title: DCI LiveScan & CardScan  
Steve Oberbroeckling  
Iowa Department of Administrative Services  
Hoover State Office Building, Level 3  
1305 East Walnut Street  
Des Moines, IA 50319-0105

The Agency shall not be responsible for misdirected packages or premature opening of Proposals if a Proposal is not properly labeled.

**3.1.2**    1 Original, 1 Digital, & 2 Copies of the Technical Proposal shall be timely submitted to the Issuing Officer in a sealed envelope. 1 Original, 1 Digital, & 2 Copies of the Cost Proposal shall be submitted in a separate sealed envelope.

Technical Proposal Envelope Contents  
Original Technical Proposal and any copies  
Public Copy (if submitted)  
Technical Proposal on digital media  
Electronic Public Copy on same digital  
media (if submitted)

Cost Proposal Envelope Contents  
Original Cost Proposal and any copies  
Cost Proposal on digital media

**3.1.3**    If the Respondent designates any information in its Proposal as confidential pursuant to Section 2, the Respondent must also submit one (1) copy of the Proposal from which confidential information has been excised as provided in Section 2 and which is marked "Public Copy".

**3.1.4**    Proposals shall not contain promotional or display materials.

**3.1.5**    Attachments shall be referenced in the Proposal.

**3.1.6**    If a Respondent proposes more than one solution to the RFP specifications, each shall be labeled and submitted separately and each will be evaluated separately.

### **3.2 Technical Proposal**

The following documents and responses shall be included in the Technical Proposal in the order given below:

#### **Exhibit 1 – Transmittal Letter (Required)**

An individual authorized to legally bind the Respondent shall sign the transmittal letter. The letter shall include the Respondent's mailing address, electronic mail address, fax number, and telephone number. Any request for confidential treatment of information shall be included in the transmittal letter in accordance with the provisions of Section 2.19.

[Respondent shall sign and submit as part of Exhibit 20 the document included as Attachment #3 Form 22 – Request for Confidentiality.]

#### **Exhibit 2 – Executive Summary**

The Respondent shall prepare an executive summary and overview of the goods and/or services it is offering, including all of the following information:

- Statements that demonstrate that the Respondent has read and understands the terms and conditions of the RFP including the contract provisions in Section 6, except as noted in Attachment #4 Exceptions to Terms and Conditions.
- An overview of the Respondent's plans for complying with the specifications of this RFP.
- Any other summary information the Respondent deems to be pertinent.

#### **Exhibit 3 – Firm Proposal Terms**

The Respondent shall guarantee in writing the goods and/or services offered in the Proposal are currently available and that all Proposal terms, including price, will remain firm 120 days following the deadline for submitting Proposals.

#### **Exhibit 4 – Respondent Background Information**

The Respondent shall provide the following general background information:

- Does your state have a preference for instate Contractors? Yes or No. If yes, please include the details of the preference.
- Name, address, telephone number, fax number and e-mail address of the Respondent including all d/b/a's or assumed names or other operating names of the Respondent and any local addresses and phone numbers.
- Form of business entity, i.e., corporation, partnership, proprietorship, or LLC.
- Copy of W-9.
- State of incorporation, state of formation, or state of organization.
- The location(s) including address and telephone numbers of the offices and other facilities that relate to the Respondent's performance under the terms of this RFP.
- Number of employees.
- Type of business.
- Name, address and telephone number of the Respondent's representative to contact regarding all contractual and technical matters concerning the Proposal.
- Name, contact information and qualifications of any subcontractors who will be involved with this project the Respondent proposes to use and the nature of the goods and/or services the subcontractor would perform.
- Respondent's accounting firm.

- By submitting a Proposal, Respondent hereby explicitly authorizes the Agency to conduct criminal history and/or other background investigation(s) of the Contractor, its officers, directors, shareholders, partners and managerial and supervisory personnel who will be involved in the performance of the Contract.
- Awarded Contractor will be required to register to do business in Iowa before payments can be made. Registration required upon award. Do not need to register to submit response.
- For Contractor registration documents, go to:  
[https://vss.iowa.gov/webapp/VSS\\_ON/AltSelfService](https://vss.iowa.gov/webapp/VSS_ON/AltSelfService)

#### **Exhibit 5 – Experience**

The Respondent must provide the following information regarding its experience:

- Number of years in business.
- Number of years of experience with providing the types of services sought by the RFP.
- The level of technical experience in providing the types of services sought by the RFP.
- A list of all goods and/or services similar to those sought by this RFP that the Respondent has provided to other businesses or governmental entities.
- Provide reference contact person and telephone number from three (3) previous or current customers or clients knowledgeable of the Respondent's performance in providing goods and/or services similar to the goods and/or services described in this RFP.

#### **Exhibit 6 – Personnel**

The Contractor must provide resumes for all key personnel who will be involved in providing the goods and/or services contemplated by this RFP. The following information must be included in the resumes:

- Full name
- Education
- Years of experience and employment history particularly as it relates to the requirements of the RFP

#### **Exhibit 7 – Termination, Litigation, and Debarment**

The Respondent must provide the following information for the past five (5) years:

- Is there any current litigation in progress involving this voting service? If so, please explain.
- Has the Respondent had a contract for goods and/or services terminated for any reason? If so, provide full details regarding the termination.
- Describe any damages or penalties assessed against or dispute resolution settlements entered into by Respondent under any existing or past contracts for goods and/or services. Provide full details regarding the circumstances, including dollar amount of damages, penalties and settlement payments.
- Describe any order, judgment or decree of any Federal or State authority barring, suspending or otherwise limiting the right of the Respondent to engage in any business, practice or activity.
- A list and summary of all litigation or threatened litigation, administrative or regulatory proceedings, or similar matters to which the Respondent or its officers have been a party.
- Any irregularities discovered in any of the accounts maintained by the Respondent on behalf of others. Describe the circumstances and disposition of the irregularities. Failure to disclose these matters may result in rejection of the Proposal or termination of any subsequent Contract. The above disclosures are a continuing requirement of the Respondent. Respondent

shall provide written notification to the Agency of any such matter commencing or occurring after submission of a Proposal, and with respect to the successful Contractor, following execution of the Contract.

**Exhibit 8 – Acceptance of Terms and Conditions**

By submitting a Proposal, Respondent acknowledges its acceptance of the terms and conditions of the RFP and the General Terms and Conditions and Iowa HSEMD Additional Terms and Conditions without change except as otherwise expressly stated in its Proposal. If the Respondent takes exception to a provision, it must identify it by page and section number, state the reason for the exception, and set forth in its Proposal the specific RFP or General Terms and Conditions language it proposes to include in place of the provision. If Respondent’s exceptions or responses materially alter the RFP, or if the Respondent submits its own terms and conditions or otherwise fails to follow the process described herein, the Agency may reject the Proposal, in its sole discretion.

**Exhibit 9 – Certification Letter**

The Respondent shall sign and submit with the Proposal, the document included as Attachment #1 (Certification Letter) in which the Respondent shall make the certifications included in Attachment #1.

**Exhibit 10 – Authorization to Release Information**

The Respondent shall sign and submit with the Proposal the document included as Attachment #2 (Authorization to Release Information Letter) in which the Respondent authorizes the release of information to the Agency.

**Exhibit 11 – Mandatory Specifications**

The Respondent shall answer whether or not it will comply with each mandatory specification in Section 4 of the RFP. Where the context requires more than a yes or no answer or the specific specifications so indicates, Respondent shall explain how it will comply with the specification. Merely repeating the Section 4 mandatory specifications may be considered non-responsive and result in the rejection of the Proposal. Proposals must identify any deviations from the specifications of the RFP or specifications the Respondent cannot satisfy. If the Respondent deviates from or cannot satisfy the specification(s) of this section, the Agency may reject the Proposal.

**Exhibit 12 – Functionality and Capabilities – Live Scan**

Describe your proposed solution’s functionality and capabilities. Answers should include at least the following information regarding:

- The ability to meet all current CJIS and NGI requirements.
- The ability to meet all current state and local requirements.
- The ability to meet all requirements set out in the “foreign live scan” ICD provided as an attachment.
- The ability to meet future modifications as dictated by CJIS, NGI, state, or local requirements.
- The ability to submit fingerprints, palm prints, mugshot, and identifying information in the required NIST format.
- The ability to submit fingerprints and palm prints at a 1000dpi.
- Ability to connect to the BIS network.

- Ability to allow users to submit and access all mugshots.
- Ability to allow users to use the “2-finger” identification.
- Ability to allow users to print, locally, with a certified FBI card printer.
- Ability to allow users to scan a drivers’ license for identification and population of identification information.
- Ability to allow users to edit and resubmit reject card and biometric data.
- Ability to allow users to store at least 90 days of biometric data in a local setting.
- Ability to allow data to be maintained in a folder stored by booking/tracking number.

**Exhibit 13 – Functionality and Capabilities – Card Scan**

Describe your proposed solution’s reporting procedures. Answers should include at least the following information regarding:

- The ability to meet all current CJIS and NGI requirements.
- The ability to meet all current state and local requirements.
- The ability to meet all requirements set out in the “foreign live scan” ICD provided as an attachment.
- The ability to meet future modifications as dictated by CJIS, NGI, state, or local requirements.
- The ability to submit fingerprints, palm prints, mugshot, and identifying information in the required NIST format.
- The ability to submit fingerprints and palm prints at a 1000dpi.
- Ability to connect to the BIS network.
- Ability to allow users to print, locally, with a certified FBI card printer.
- Ability to allow users to edit and resubmit reject card and biometric data.
- Ability to allow users to store at least 90 days of biometric data in a local setting.
- Ability to allow data to be maintained in a folder stored by booking/tracking number.

**Exhibit 14 – Ability to Provide Ruggedized Options**

Live scans housed in a law enforcement/jail setting require a certain level of security and should have the option to be ruggedized, so as to protect not only the equipment but, more importantly, the people with the law enforcement/jail setting. Live scan terminals, other than mobile terminals, should include an option to be ruggedize. Answers should include at least the following information:

- Must meet all Functionality and Capabilities as spelled out in Exhibit 12.
- The ability to ruggedize a live scan terminal without modification to the terminal.
- Any ruggedized live scan terminal shall be delivered, installed and made operational in the ruggedized manner. No ruggedized live scan terminal shall be delivered, installed nor made operational without being fully ruggedized according the specifications when ordered.

**Exhibit 15 – Customer Service**

Describe your proposed solution’s customer service features. Answers should include at least the following information regarding:

- The ability to provide customer support without additional cost to an agency.
- The ability to provide customer support with cost to an agency.
- The ability to provide pricing to include a service/maintenance contract to extend five (5) years beyond any manufacturer’s warranty, with price to include a pay in-full (one time) option and a static, annual, payment option.

- Describe ongoing customer support plan, including options with and without cost to the agency.
- DELIVERY TIMELINE: The ability to deliver, install and make functional on the DCI BIS within sixty (60) days of purchase.
- Describe the notification and customer support plan for the DCI. The DCI, as the central repository, is often the primary POC for all criminal live scan/card scan issues. These issues include operational inquiries, technical guidance, and potential equipment malfunctions. Additionally, the DCI process live scan/card scan submission for all law enforcement and correctional agencies. The DCI should be made aware of operational, technical and equipment issues with any criminal live scan/card scan terminal. The DCI should be provided tracking and status updates for any criminal live scan/card scan terminal without service for more than 4-hours.
- ON-SITE SERVICE TIMELINE: Describe response times to provide on-site service to any of Iowa's 99 counties, including nights, holidays and weekends. The response should include the maximum response times to have a representative/technician on-site to evaluate. The response time need not include the time to replace or repair, as those times are less predictable.
- REMOTE SERVICE TIMELINE: Describe response time to provide remote, electronic and telephonic, service to any of Iowa's 99 counties, including nights, holidays and weekends. The response should include the maximum response time to have a representative/technician communicated, directly, with the live scan/card scan operator. The response time need not include the time to have a technician on-site nor the time to replace or repair.
- Describe the remedy for failure to meet 1) delivery timeline, 2) on-site service timeline, and 3) remote service timeline.
- Describe the process Respondent employs when a client is dissatisfied with the service it has been provided.

#### **Exhibit 16 – Security**

Describe your proposed solution's security measures. Answers should include at least the following information regarding:

- Describe a process to report to the DCI and all Iowa customers any security breaches of any live scan/card terminals of the same make, model or classification as those being used by Iowa customer, regardless of the jurisdiction where the incident occurred.
- Describe a process to report to the DCI and all Iowa customers any known technical issues that will affect the performance, security, or functionality of the live scan/card scan terminals.
- Describe a process to report to the DCI and all Iowa customers any CJIS violations, regardless of the jurisdiction where the incident occurred.
- Describe a process to assure live scan/card scan software is compatible with local and state network security application.

#### **Exhibit 17 – Implementation and Maintenance Training**

Describe the implementation and maintenance process of your proposed solution. Answers should include at least the following information regarding:

- Any training that would be provided to any agency purchasing a live scan/card scan terminal, with training be on-site training in a "train-the-trainer" format.
- Any training that would be provided to the DCI staff for any first time live scan/card scan implementation in Iowa. This training should take place at a site of implementation or at a site

mutually agreed upon, by the respondent and the DCI, location. This training shall be free of charge to the DCI.

- Describe a plan for training to accommodate for any system, software, or other upgrades/changes that will affect the daily operation of the live scan/card scan. This plan should, specifically, include a plan for training on any issues that would alter daily activities or workflow.
- Describe any online, video, or other readily accessible “how-to” guides that would be available to live scan/card scan operators.

#### **Exhibit 18 – Optional Service**

- Describe any other related services or capabilities you would like the State to know about?
- Is there any other information you would like to share as it relates to this RFP?
- Provide detailed information for any optional items that may be available. (Include costs for these items in the Cost Proposal)

#### **Exhibit 19 – Addendums**

Provide signed copy of posted RFP addendums.

#### **Exhibit 20 – Request for Confidentiality**

The Respondent shall sign and submit with the Proposal the document included as Attachment #3 Form 22 – Request for Confidentiality.

### **3.3 Cost Proposal**

The Respondent shall provide its cost proposal in a separately sealed envelope for the proposed goods and/or services. All prices are quoted pursuant to the terms and conditions of this RFP. Respondent’s Cost Proposal shall include an all-inclusive, itemized, total cost in U.S. Dollars (including all travel, expenses, etc. in prices) for the proposed services. All pricing to be FOB Destination, freight cost, and all expenses included; and based on Net 60 Days Payment Terms. Cost proposals must utilize Cost Proposal Attachment #6 format and include the following:

- Provide cost per live scan terminal.
- Provide cost per card scan terminal.
- Provide cost per ruggedized live scan terminal.
- Provide any training costs.
- Provide cost for one-time, annual incremental, and annual static maintenance agreements for live scan and card scan terminals.
- Provide cost for hour service rate without maintenance agreement for live scan and card scan terminals.
- Provide any ‘other’ costs associated with live scan or card scan terminal purchase and/or installation that are not specifically enumerated in this RFP.

#### **3.3.1 Payment Methods**

The State of Iowa, in its sole discretion, will determine the method of payment for goods and/or services as part of the Contract. The State Pcard and EAP are preferred payment methods, but payments may be made by any of the following methods: Pcard/EAP, EFT/ACH, or State Warrant. Contractors shall provide payment acceptance

information in this section 3.3.1 in their Cost Proposals. **This information will not be scored as part of the Cost Proposal or evaluated as part the Technical Proposal.**

**3.3.1.1 Credit card or ePayables**

The State of Iowa's Purchasing Cards (Pcards) and ePayable solution (EAP) are commercial payment methods utilizing the VISA credit card network. The State of Iowa will not accept price changes or pay additional fees if Contractor uses the Pcard or EAP payment methods. Pcard-accepting Contractors must abide by the State of Iowa's Terms of Pcard Acceptance, as provided in Section 6.2 of the RFP. Contractors must provide a statement regarding their ability to meet the requirements I this subsection, as well as identifying their transaction reporting capabilities (Level I, II, or III).

**3.3.1.2 Electronic Funds Transfer (EFT) by Automated Clearing House (ACH)**

Contractors shall provide a statement regarding their ability to accept payment by EFT by ACH. Payments are deposited into the financial institution of the claimant's choice three working days from the issue date of the direct deposit.

[https://das.iowa.gov/sites/default/files/acct\\_sae/man\\_for\\_ref/forms/eft\\_authorized\\_form.pdf](https://das.iowa.gov/sites/default/files/acct_sae/man_for_ref/forms/eft_authorized_form.pdf)

**3.3.1.3 State Warrant**

The State of Iowa's warrant drawn on the Treasurer of State is used to pay claims against the departments of the State of Iowa. The warrant is issued upon receipt of proper documentation from the issuing department.

**3.3.2 Payment Terms**

Per Iowa Code 8A.514 the State of Iowa is allowed sixty (60) days to pay an invoice submitted by a Vendor/Contractor.

**3.3.3 Contractor Discounts**

Contractors shall state in their Cost Proposals whether they offer any payment discounts, including but not limited to:

**3.3.3.1 Prompt Payment Discount**

The State can agree to pay in less than sixty (60) days if an incentive for earlier payment is offered.

**3.3.3.2 Cash Discount**

The State may consider cash discounts when scoring Cost Proposals.

<b>SECTION 4            MANDATORY SPECIFICATIONS</b>
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**4.1      Overview**

The successful Contractor shall provide the goods and/or services to the State in accordance with the specifications and technical specifications as provided in this Section. The Respondent shall address each specification in this Section and indicate whether or not it will comply with the specification. If the context requires more than a yes or no answer or the section specifically indicates, Respondent shall explain how it will comply with the specification. Proposals must address each specification. Merely repeating the specifications may be considered non-responsive and may disqualify the Respondent. Proposals must identify any deviations from the specifications of this RFP or specifications the Respondent cannot satisfy. If the Respondent deviates from or cannot satisfy the specification (s) of this section, the Agency may reject the Proposal.

All items listed in this section are Mandatory Specifications. Respondents must indicate either “yes” or “no” to each specification in their Proposals and provide an explanation as to how the specification is met. By indicating “yes” a Respondent agrees that it shall comply with that specification throughout the full term of the Contract, if the Respondent is successful. In addition, if specified by the specifications or if the context otherwise requires, the Respondent shall provide references and/or supportive materials to verify the Respondent’s compliance with the specification. The Agency shall have the right to determine whether the supportive information and materials submitted by the Respondent demonstrate that the Respondent will be able to comply with the Mandatory Specifications. If the Agency determines the responses and supportive materials do not demonstrate the Supplier will be able to comply with the Mandatory Specifications, the Agency may reject the Proposal.

- 4.1.1**      All live scan/card scan terminals must be installed and functional on the BIS within sixty (60) days of purchase.
- 4.1.2**      No live scan/card scan terminal may be functional on the BIS before October 1, 2017.
- 4.1.3**      Must currently be in the business of providing live scan and/or card scan solutions.
- 4.1.4**      Must have been in the business of providing live scan and/or card scan solutions for a minimum of five (5) years.
- 4.1.5**      Ability to provide live scan and/or card scan solutions that are compliant with CJIS requirements at the time of purchase.
- 4.1.6**      Ability to provide live scan and/or card scan solutions that are compliant with FBI NGI requirements at the time of purchase.
- 4.1.7**      All employees with access to the live scan and/or card scan solutions, after installation, must be willing to submit to and pass a fingerprint based background check completed by the DCI. This would include remote access, as well as onsite maintenance and installation personnel.

- 4.1.8** Must be provided five (5) references from 5 individual clients.
- 4.1.9** Must disclose any and all CJIS violations, sanctions, and remedies to said violations and sanctions, that have occurred since January 1, 2015.

<b>SECTION 5      EVALUATION AND SELECTION</b>
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**5.1 Introduction**

This section describes the evaluation process that will be used to determine which Proposal(s) provides the greatest value to the State. The Agency will not necessarily award the Contract to the Contractor offering the lowest responsible bid. Instead, the Agency will award to the Contractor whose Responsive Proposal the Agency believes will provide the best value to the State.

**5.2 Evaluation Committee**

The Agency will use an evaluation committee to conduct a comprehensive, fair, and impartial evaluation of Proposals received in response to this RFP. The evaluation committee will recommend an award based on the results of their evaluation to the Agency or to such other person or entity that must approve the recommendation.

**5.3 Scoring Breakdown**

Technical Proposal	800
<u>Cost Proposal</u>	<u>200</u>
Total	1000

**5.4 Technical Proposal Evaluation and Scoring**

All Technical Proposals will be evaluated to determine if they comply with the Mandatory Specifications. The evaluation committee will fully evaluate and score all Responsive Proposals submitted by Responsible Respondents in accordance with this Section. In addition to other RFP requirements, to be deemed a Responsive Proposal, the Proposal must:

- Answer “Yes” to all parts of Section 4 and include supportive materials as required to demonstrate the Respondent will be able to successfully comply with the Mandatory Specifications in that section and
- Obtain the minimum score of 480 points (60%) of the available 800 points for the Technical Proposal.
- The committee members may select Respondents to participate in demonstrations.

An addendum identifying the point value assigned to specific Section 3 Exhibits (Technical Proposal) will be posted prior to opening submitted proposals.

**5.5 Tied Bids and Preferences**

An award shall be determined by a drawing when responses are received that are equal in all respects and tied in price. Whenever it is practical to do so, the drawing will be held in the presence of the contractors who are tied in price. Otherwise the drawing will be made in front of at least three non-interested parties. All drawings shall be documented.

Notwithstanding the foregoing, if a tied bid involves an Iowa-based contractor or products produced within the State of Iowa and a contractor based or products produced outside the State of Iowa, the Iowa contractor will receive preference. If a tied bid involves one or more

Iowa contractors and one or more contractors outside the state of Iowa, a drawing will be held among the Iowa contractors only.

In the event of a tied bid between Iowa contractors, the Agency shall contact the Iowa Employer Support of the Guard and Reserve (ESGR) committee for confirmation and verification as to whether the contractors have complied with ESGR standards. Preference, in the case of a tied bid, shall be given to Iowa contractors complying with ESGR standards.

Second preference in tied bids will be given to contractors based in the United States or products produced in the United States over contractors based or products produced outside the United States.

Preferences required by applicable statute or rule shall also be applied, where appropriate.

## 5.6 Cost Proposal Scoring

After the Technical Proposals are evaluated and scored, those proposals which meet the minimum score for the Technical Specifications will advance in the evaluation process and their Cost Proposals will be opened and scored.

To assist the agency in evaluating, Cost Proposals may be evaluated and points awarded as detailed in this paragraph. The Cost Proposals will remain sealed during the evaluation of the Technical Proposal and any Bidder Demonstration. Only prospective contractors that meet all of the required features will be considered during the cost evaluation phase of the review process. The compliant prospective contractor's technical points will be added to the cost points, to obtain the total points awarded for the proposal. The Cost Proposals for the mandatory telephonic system fixed rate will be ranked from cheapest to the most expensive. The cheapest shall receive the maximum number of points available in this section. To determine the number of points to be awarded all other Cost Proposals, the cheapest bid will be used in all cases as the numerator. Each of the other bids will be used as the denominator. The percentage will then be multiplied by the maximum number of points and the resulting number will be the cost points awarded to other compliant contractors. Percentages and points will be rounded to the nearest whole value.

Example:

Contractor A quotes \$35,000; Contractor B quotes \$45,000 and Contractor C quotes \$65,000.

Contractor A:  $\frac{\$35,000}{\$35,000} =$  receives 100% of available points on cost.

Contractor B:  $\frac{\$35,000}{\$45,000} =$  receives 78% of available points on cost.

Contractor C:  $\frac{\$35,000}{\$65,000} =$  receives 54% of available points on cost.

**6.1 Contract Terms and Conditions**

The Contract that the Agency expects to award as a result of this RFP shall comprise the specifications, terms and conditions of the RFP, written clarifications or changes made in accordance with the provisions of the RFP, the General Terms and Conditions, the offer of the successful Contractor contained in its Proposal, and any other terms deemed necessary by the Agency. No objection or amendment by a Contractor to the provisions or terms and conditions of the RFP or the General Terms and Conditions shall be incorporated into the Contract unless Agency has explicitly accepted the Contractor's objection or amendment in writing.

The General Terms and Conditions will be incorporated into the Contract. The General Terms and Conditions may be supplemented at the time of contract execution and are provided to enable Contractors to better evaluate the costs associated with the RFP specifications and the Contract. All costs associated with complying with these specifications should be included in any pricing quoted by the Contractor.

**By submitting a Proposal, Contractor acknowledges its acceptance of the terms and conditions of the RFP and the General Terms and Conditions without qualification except as otherwise expressly stated in its Proposal. If the Contractor takes exception to a provision, it must identify it by page and section number, state the reason for the exception, and set forth in its Proposal the specific RFP or General Terms and Conditions language it proposes to include in place of the provision. If Contractor's exceptions or proposed responses materially alter the RFP, or if the Contractor submits its own terms and conditions or otherwise fails to follow the process described herein, the Agency may reject the Proposal, in its sole discretion.**

The Agency reserves the right to either award a Contract(s) without further negotiation with the successful Contractor or to negotiate Contract terms with the successful Contractor if the best interests of the State would be served.

**6.2 Contract Length**

The term of the Contract will begin and end on the dates indicated on the RFP cover sheet. The Agency shall have the sole option to renew the Contract upon the same or more favorable terms and conditions for up to the number of annual extensions identified on the RFP cover sheet.

**6.3 Insurance**

The Contract will require the successful Contractor to maintain insurance coverage(s) in accordance with the insurance provisions of the General Terms and Conditions and of the type and in the minimum amounts set forth below, unless otherwise required by the Agency.

Type of Insurance	LIMIT	AMOUNT
General Liability (including contractual liability) written on an occurrence basis	General Aggregate Products – Comp/Op Aggregate Personal injury Each Occurrence	\$2 million \$1 Million \$1 Million \$1 Million
Automobile Liability (including contractual liability) written on an occurrence basis	Combined single limit	\$1 Million
Excess Liability, umbrella form	Each Occurrence Aggregate	\$1 Million \$1 Million
Errors and Omissions Insurance	Each Occurrence	\$1 Million
Property Damage	Each Occurrence Aggregate	\$1 Million \$1 Million
Workers Compensation and Employer Liability	As Required by Iowa law	As required by Iowa law

#### 6.4 Terms and Conditions for State of Iowa Purchasing Cards

The State of Iowa shall pay Contractor's invoices using its Purchasing Card Program (Pcard) whenever possible. The Pcard is a VISA credit card issued by U.S. Bank to allow authorized employees to make purchases on behalf of the State. It is a faster, more convenient alternative to traditional invoicing and remittance processing, allowing US Bank to pay the Contractor directly, generally within 48 hours of the transaction. Contractor shall comply with security measures for Pcard payments including:

- Contractor shall comply with Payment Card Industry Data Security Standard (PCI DSS) to assure confidential card information is not compromised;
- Contractor shall adhere to Fair and Accurate Credit Transactions Act requirements that limit the amount of consumer and account information shared for greater security protection;
- Contractor shall not write down card numbers or store card information. When accepting orders by phone, Contractor shall process the transaction during the call and send itemized receipts (excluding card numbers) to the cardholder by fax, email, or mail (with delivery);
- Contractor shall process payment for items when an order is placed only for items currently in stock and available for shipment, and only for services already rendered;
- Contractor shall confirm that the name of purchaser matches the name on the card;
- Contractor shall ensure Internet orders are processed via secure websites, featuring Verisign, TRUSTe, BBBOnline, or "https" in the web address;
- Contractor shall shred any documentation with credit card numbers.

**Attachment #1  
Certification Letter**

(Date) \_\_\_\_\_

Steve Oberbroeckling, Issuing Officer  
Iowa Department of Administrative Services  
Hoover State Office Building, Level 3  
1305 East Walnut Street  
Des Moines, IA 50319-0105

Re: Request for Proposal Number RFP091759530 - PROPOSAL CERTIFICATIONS

Dear Steve:

I certify that the contents of the Proposal submitted on behalf of **(Name of Respondent)** in response to **Iowa Department of Administrative Services** for Request for Proposal Number RFP091759530 for DCI LiveScan & Card Scan are true and accurate. I also certify that Respondent has not knowingly made any false statements in its Proposal.

**Certification of Independence**

I certify that I am a representative of Respondent expressly authorized to make the following certifications on behalf of Respondent. By submitting a Proposal in response to the RFP, I certify on behalf of the Respondent the following:

1. The Proposal has been developed independently, without consultation, communication or agreement with any employee or consultant to the Agency or with any person serving as a member of the evaluation committee.
2. The Proposal has been developed independently, without consultation, communication or agreement with any other Respondent or parties for the purpose of restricting competition.
3. Unless otherwise required by law, the information found in the Proposal has not been and will not be knowingly disclosed, directly or indirectly prior to Agency's issuance of the Notice of Intent to Award the contract.
4. No attempt has been made or will be made by Respondent to induce any other Contractor to submit or not to submit a Proposal for the purpose of restricting competition.
5. No relationship exists or will exist during the contract period between Respondent and the Agency or any other State agency that interferes with fair competition or constitutes a conflict of interest.

**Certification Regarding Debarment**

I certify that, to the best of my knowledge, neither Respondent nor any of its principals: (a) are presently or have been debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by a Federal Agency or State Agency; (b) have within a five year period preceding this Proposal been convicted of, or had a civil judgment rendered against them for commission of fraud, a criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state, or local) transaction or contract under a public transaction, violation of antitrust statutes; commission of embezzlement, theft, forgery, falsification or destruction of records, making false statements, or receiving stolen property; (c) are presently indicted for or criminally or civilly charged by a government entity (federal, state, or local) with the commission of

any of the offenses enumerated in (b) of this certification; and (d) have not within a three year period preceding this Proposal had one or more public transactions (federal, state, or local) terminated for cause.

This certification is a material representation of fact upon which the Agency has relied upon when this transaction was entered into. If it is later determined that Respondent knowingly rendered an erroneous certification, in addition to other remedies available, the Agency may pursue available remedies including suspension, debarment, or termination of the contract.

**Certification Regarding Registration, Collection, and Remission of Sales and Use Tax**

Pursuant to *Iowa Code sections 423.2(10) and 423.5(8) (2013)* a retailer in Iowa or a retailer maintaining a business in Iowa that enters into a contract with a state agency must register, collect, and remit Iowa sales tax and Iowa use tax levied under *Iowa Code chapter 423* on all sales of tangible personal property and enumerated services. The Act also requires Contractors to certify their compliance with sales tax registration, collection, and remission requirements and provides potential consequences if the certification is false or fraudulent.

By submitting a Proposal in response to the (RFP), the Respondent certifies the following: (check the applicable box)

- Respondent is registered with the Iowa Department of Revenue, collects, and remits Iowa sales and use taxes as required by *Iowa Code chapter 423*; or
- Respondent is not a “retailer” or a “retailer maintaining a place of business in this state” as those terms are defined in *Iowa Code subsections 423.1(47) and (48)*.

Respondent also acknowledges that the Agency may declare the Respondent’s Proposal or resulting contract void if the above certification is false. The Respondent also understands that fraudulent certification may result in the Agency or its representative filing for damages for breach of contract in addition to other remedies available to Agency.

Sincerely,

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Name and Title of Authorized Representative**

\_\_\_\_\_  
**Date**

**Attachment #2**  
**Authorization to Release Information Letter**

(Date) \_\_\_\_\_

Steve Oberbroeckling, Issuing Officer  
Iowa Department of Administrative Services  
Hoover State Office Building, Level 3  
1305 East Walnut Street  
Des Moines, IA 50319-0105

Re: Request for Proposal Number RFP091759530 - AUTHORIZATION TO RELEASE INFORMATION

Dear Steve:

**(Name of Respondent)** hereby authorizes the **Iowa Department of Administrative Services** ("Agency") or a member of the Evaluation Committee to obtain information regarding its performance on other contracts, agreements or other business arrangements, its business reputation, and any other matter pertinent to evaluation and the selection of a successful Respondent in response to Request for Proposal (RFP) Number RFP091759530.

The Respondent acknowledges that it may not agree with the information and opinions given by such person or entity in response to a reference request. The Respondent acknowledges that the information and opinions given by such person or entity may hurt its chances to receive contract awards from the State or may otherwise hurt its reputation or operations. The Respondent is willing to take that risk.

The Respondent hereby releases, acquits and forever discharges the State of Iowa, the Agency, their officers, directors, employees and agents from any and all liability whatsoever, including all claims, demands and causes of action of every nature and kind affecting the undersigned that it may have or ever claim to have relating to information, data, opinions, and references obtained by the Agency or the Evaluation Committee in the evaluation and selection of a successful Respondent in response to the RFP.

The Respondent authorizes representatives of the Agency or the Evaluation Committee to contact any and all of the persons, entities, and references which are, directly or indirectly, listed, submitted, or referenced in the Respondent's Proposal submitted in response to RFP.

The Respondent further authorizes any and all persons, and entities to provide information, data, and opinions with regard to its performance under any contract, agreement, or other business arrangement, its ability to perform, business reputation, and any other matter pertinent to the evaluation of the Respondent's Proposal. The Respondent hereby releases, acquits and forever discharges any such person or entity and their officers, directors, employees and agents from any and all liability whatsoever, including all claims, demands and causes of action of every nature and kind affecting the Respondent that it may have or ever claim to have relating to information, data, opinions, and references supplied to the Agency or the Evaluation Committee in the evaluation and selection of a successful Respondent in response to RFP.

A photocopy or facsimile of this signed Authorization is as valid as an original.

Sincerely,

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Name and Title of Authorized Representative**

\_\_\_\_\_  
**Date**

Attachment #3  
Form 22 – Request for Confidentiality

**CONTRACTOR NOTE: SUBMISSION OF THIS FORM 22 IS REQUIRED**

**THIS FORM 22 (FORM) MUST BE COMPLETED AND INCLUDED WITH YOUR RESPONSE (PROPOSAL) TO THE REQUEST FOR PROPOSAL (RFP). THE FORM IS REQUIRED WHETHER THE PROPOSAL DOES OR DOES NOT CONTAIN INFORMATION FOR WHICH CONFIDENTIAL TREATMENT WILL BE REQUESTED.**

**FAILURE TO SUBMIT A COMPLETED FORM WILL RESULT IN THE PROPOSAL CONSIDERED NON-RESPONSIVE AND ELIMINATED FROM EVALUATION.**

**I. Confidential Treatment Is Not Requested**

A request for confidential treatment of information contained in our Proposal is not submitted.

Company	RFP Number	RFP Title
Signature	Title	Date

\*\*\*\*\*

**II. Confidential Treatment Is Requested**

***The below information is to be completed and signed ONLY if Contractor is requesting confidential treatment of any information submitted in its Proposal.***

Per the paragraph labeled as Public Records and Requests for Confidential Treatment in section 2 of the Request for Proposal (RFP), a Contractor requesting portions of its Proposal be maintained in confidence must complete this form and submit it with its Proposal. Contractors should read and familiarize themselves with chapter 22 of the Iowa Code regarding release of public records before completing this Form. Contractor shall refer to the paragraph labeled as Public Records and Requests for Confidential Treatment in section 2 of the RFP for instructions regarding how to request confidential treatment of portions of its Proposal.

**NOTE:**

- 1 Completion of this Form is the sole means of requesting confidential treatment.**
- 2 A CONTRACTOR MAY NOT REQUEST PRICING PROPOSALS BE HELD IN CONFIDENCE.**

Completion of the Form and Agency's acceptance of Contractor's submission does not guarantee the agency will grant Contractor's request for confidentiality. The Agency may reject Contractor's Proposal entirely in the event Contractor requests confidentiality and does submit a fully completed Form or requests confidentiality for portions of its Proposal that are improper under the RFP.

**To request confidentiality, Contractor must provide the following information:**

- 1  Contractor must conspicuously mark confidential material in its Proposal in accordance with the section titled Public Records and Requests for Confidential Treatment. **Check box when completed.**
  
- 2 Contractor must specifically identify and list the Proposal section(s) for which it seeks confidentiality and answer the following questions for each section listed:
  - Explain the specific grounds in *Iowa Code Chapter 22* or other applicable law which support treatment of the material as confidential.
  - Justify why the material should be kept in confidence.
  - Explain why disclosure of the material would not be in the best interest of the public.
  - Provide the name, address, telephone, and email for the Contractor’s person authorized to respond to inquiries by the Agency concerning the status of confidential materials.

**Please provide the information in the table below. Contractor may add additional lines if necessary or add additional pages using the same format as the table below.**

RFP Section:	Contractor must cite the specific grounds in <i>Iowa Code Chapter 22</i> or other applicable law which supports treatment of the material as confidential.	Contractor must justify why the material should be kept in confidence.	Contractor must explain why disclosure of the material would not be in the best interest of the public.	Contractor must provide the name, address, telephone, and email for the person at Contractor’s organization authorized to respond to inquiries by the Agency concerning the status of confidential materials.

- 3  Contractor must submit a Public Copy of its Proposal from which the confidential information has been excised. The confidential material must be excised in such a way as to allow the public to determine the general nature of the material removed and to retain as much of the Proposal as possible. **Check box when completed.**

This Form must be signed by the individual who signed the Contractor’s Proposal. The Contractor shall place this Form completed and signed in its Proposal immediately following the transmittal letter. A copy of this document shall be placed in all Proposals submitted including the Public Copy.

***\*Failure to provide the information required on this Form may result in rejection of Contractor’s submittal to request confidentiality or rejection of the Proposal as being non-responsive.***

***\*Please note that this Form is to be completed and signed only if you are submitting a request for confidential treatment of any information submitted in your Proposal.***

\_\_\_\_\_  
Company

\_\_\_\_\_  
RFP Number

\_\_\_\_\_  
RFP Title

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

-----  
**Department of Administrative Services – Central Procurement Bureau Review**  
**(For Agency use only)**

- Contractor's Proposal is rejected as non-compliant because of one or more of the following reasons:
  - Contractor's Proposal is rejected due to not submitting a fully completed Form 22 to either request or not request confidential treatment of information.
  - Contractor's Proposal is rejected due to the request to treat the entire response as confidential.
  - Contractor's Proposal is rejected due to the request to treat Proposal pricing as confidential.
  - Contractor requested confidentiality without submitting a **fully completed** Form 22.
  - Contractor requested confidentiality and failed to conspicuously mark such material as confidential within its Proposal in accordance with the RFP.
  - Contractor requested confidentiality without submitting a public copy of its Proposal with the confidential information redacted.
  - Contractor requested confidentiality on material in contravention of the RFP.
  - Other: \_\_\_\_\_.
- Contractor's submission is accepted.<sup>1</sup>

\_\_\_\_\_  
Purchasing Agent Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
RFP Number

\_\_\_\_\_  
RFP Title

\_\_\_\_\_  
**NOTE:** Agency's acceptance of Contractor's submission should not be construed as Agency's approval of Contractor's request for confidentiality. Instead, acceptance of Contractor's submission simply means that Agency believes Contractor's Form 22 appears fully completed in accordance with the RFP.

**Attachment #4**  
**Exceptions to Terms and Conditions**

Proposed exceptions should be listed in this in this attachment of contractor's proposal. Any proposed exceptions should be in a table similar to the one below:

<b>Section #</b>	<b>Original Text Referenced</b>	<b>Proposed Language</b>	<b>Reason for Exception</b>

**Attachment #5  
Response Check List**

RFP REFERENCE	RESPONSE INCLUDED	
	Yes	No
<b>Technical Proposal</b>		
One (1) original, two (2) copies of Proposal and One (1) electronic copy on digital media.		
One (1) Public Copy with Confidential Information Excised (optional)		
Exhibit 1 – Transmittal Letter		
Exhibit 2 – Executive Summary (Include Attachment #4)		
Exhibit 3 – Firm Proposal Terms		
Exhibit 4 – Respondent Background Information		
Exhibit 5 – Experience		
Exhibit 6 – Personnel		
Exhibit 7 – Termination, Litigation, and Debarment		
Exhibit 8 – Acceptance of Terms and Conditions		
Exhibit 9 – Certification Letter (Include Attachment #1)		
Exhibit 10 – Authorization to Release Information (Include Attachment #2)		
Exhibit 11 – Mandatory Specifications		
Exhibit 12 – Functionality and Capabilities – Live Scan		
Exhibit 13 – Functionality and Capabilities – Card Scan		
Exhibit 14 – Ability to Provide Ruggedized Options		
Exhibit 15 – Customer Service		
Exhibit 16 – Security		
Exhibit 17 – Implementation and Maintenance Training		
Exhibit 18 – Optional Service		
Exhibit 19 – Addendums		
Exhibit 20 – Request for Confidentiality (Include Attachment #3)		
<b>Cost Proposal</b>		
One (1) original, two (2) copies of Proposal and One (1) electronic copy on digital media. (Include Attachment #6)		

**Attachment #6  
Cost Proposal Form**

**Payment Terms**

Per *Iowa Code § 8A.514* the State of Iowa is allowed sixty (60) days to pay an invoice submitted by a vendor.

What discount will you give for payment in 15 days? \_\_\_\_\_ What discount will you give for payment in 30 days? \_\_\_\_\_

**Cost Proposal**

All Contractors must complete Section 1. Telephonic System Fixed Rate. Contractor’s Cost Proposal shall include an all-inclusive, itemized, total cost in Firm U.S. Dollars (including all travel, expenses, etc. in prices). All pricing to be FOB Destination, freight cost and all expenses included; and based on Net 60 Days Payment Terms. Include any escalation over the course of six years. The following template is required.

**1. Mandatory Live Scan/Card Scan Terminals**

Contractors offering Live Scan and/or Card Scan terminals should complete the following portions of the cost proposal. Please use additional pages to provide additional narrative support for the costing information. Additional information should include but is not limited to:

- Provide cost per live scan terminal.
- Provide cost per card scan terminal.
- Provide cost per ruggedized live scan terminal.
- Provide any training costs.

Please use additional pages to provide additional narrative support for the costing information.

Deliverable Item	Total First Year (2018) Implementation or other One-Time Costs	2018 Recurring Costs	2019 Recurring Costs	2020 Recurring Costs	2021 Recurring Costs	2022 Recurring Costs	2023 Recurring Costs
Cost per Live Scan	\$	\$	\$	\$	\$	\$	\$
Cost per Card Scan	\$	\$	\$	\$	\$	\$	\$
Ruggedized Functionality	\$	\$	\$	\$	\$	\$	\$
Training	\$	\$	\$	\$	\$	\$	\$
Other (Specify)	\$	\$	\$	\$	\$	\$	\$
<b>TOTAL COST:</b>	\$	\$	\$	\$	\$	\$	\$

**2. Live Scan/Card Scan Terminal – Maintenance Costs**

Contractors offering Live Scan and/or Card Scan maintenance should complete the following portions of the cost proposal. Please use additional pages to provide additional narrative support for the costing information. Contractors not offering Live Scan and/or Card Scan maintenance should provide an additional narrative with explanation.

Deliverable Item	Total First Year (2018) Implementation or other One-Time Costs	2018 Recurring Costs	2019 Recurring Costs	2020 Recurring Costs	2021 Recurring Costs	2022 Recurring Costs	2023 Recurring Costs
Annual Maintenance Agreement - Static (PORTABLE Live Scan)	\$	\$	\$	\$	\$	\$	\$
5-year, one-time, Maintenance Agreement * (PORTABLE Live Scan)	\$						
Annual Maintenance Agreement – Incremental (PORTABLE Live Scan)	\$	\$	\$	\$	\$	\$	\$
Hourly Rate for Service without Maintenance Agreement (PORTABLE Live Scan)	\$	\$	\$	\$	\$	\$	\$
Annual Maintenance Agreement - Static (FIXED Live Scan)	\$	\$	\$	\$	\$	\$	\$
5-year, one-time, Maintenance Agreement * (FIXED Live Scan)	\$						
Annual Maintenance Agreement – Incremental (FIXED Live Scan)	\$	\$	\$	\$	\$	\$	\$
Hourly Rate for Service without Maintenance Agreement (FIXED Live Scan)	\$	\$	\$	\$	\$	\$	\$
Annual Maintenance Agreement - Static (Card Scan)	\$	\$	\$	\$	\$	\$	\$
5-year, one-time, Maintenance Agreement * (Card Scan)	\$						
Annual Maintenance Agreement – Incremental (Card Scan)	\$	\$	\$	\$	\$	\$	\$
Hourly Rate for Service without Maintenance Agreement (Card Scan)	\$	\$	\$	\$	\$	\$	\$
<b>TOTAL COST:</b>	\$	\$	\$	\$	\$	\$	\$

\* 5-year, one-time payment, maintenance agreement begins at the conclusion of any manufacturer/service warranty and extends for 5 consecutive years.

**Appendix A**  
**Biometric Identification System (BIS)**  
MORPHOTRAK PUBLIC



**Foreign Livescan**  
**INTERFACE CONTROL DOCUMENT**  
**Iowa Division of Criminal Investigation**

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Reference Number: ICD4-SF0006A

Release Version: 1.1

Release Date: May 5, 2017

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## Confidentiality Rules

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## Revision History

Version	Date	Description
1.0	March 17, 2017	Document Creation
1.1	May 5, 2017	Minor updates after internal review

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# 1 Introduction

## 1.1 Purpose

This document provides the system interface controls and description for the Iowa Division of Criminal Investigation (IADCI) livescan interface to the IADCI AFIS.

This document provides the specifications for the interface transmission protocol, transaction format, and types of transactions required. This document will not provide instructions on how to build the interface capability within the livescan environment. Vendors are required to have the knowledge to create interfaces based on American National Standard for Information Systems (ANSI) National Institute of Standards and Technology (NIST).

## 1.2 Overview

In order to interface with the IADCI AFIS, each livescan must be capable of:

- Capturing the indicated descriptor data for the applicable transaction(s) for each applicable record.
- Capturing descriptor data and populating the appropriate livescan screen fields from a driver's license or state ID card by scanning a 2D barcode with a 2D barcode reader attached to the livescan. The remaining livescan fields that are not automatically populated will be fillable and entered by the operator.
- Capturing rolled and slap fingerprint images at 1,000 ppi (14 images) for each applicable record.
- Capturing upper, lower and writer's palmprint images at 1,000 ppi (6 images) for each applicable record.
- Capturing signature images of the subject and booking officer (2 images) for each applicable record.
- Capturing photos (up to 10) for each applicable record.
- Capturing two fingers at 1,000 ppi for a two-finger search (finger positions 1 & 6, 2 & 7, or 3 & 8) to the IADCI AFIS.
- Capturing two fingers at 1,000 ppi for an ID verification submission (finger positions 1 & 6, 2 & 7, or 3 & 8) to the IADCI AFIS.
- Receiving and displaying a photo on screen if a photo is returned for a hit from the two-finger searches or ID verification searches.
- Receiving and displaying a disclaimer message from the two-finger searches and ID verification searches.

- Interfacing with Records Management Systems (RMS) for the purpose of sending descriptors to the livescan for descriptor entry.
- Transmitting and receiving transactions in NIST format.
- Transmitting and receiving NIST-formatted transactions using Simple Mail Transfer Protocol (SMTP).
- Supporting all of the following submission and response transactions.

Submission Transaction	TOT	NIST	Response Transaction	TOT	NIST
Criminal Ten-Print Submission (Answer Required)	CAR	Type-1 Type-2 Type-8 Type-10 Type-14 Type-15	Acknowledgement Response	ACKT	Type-1 Type-2
			Submission Results – Electronic	SRU	Type-1 Type-2
			Tenprint Transaction Error	ERRT	Type-1 Type-2
Sex Offender Registrant	SOR	Type-1 Type-2 Type-8 Type-10 Type-14 Type-15	Acknowledgement Response	ACKT	Type-1 Type-2
			Submission Results – Electronic	SRU	Type-1 Type-2
			Tenprint Transaction Error	ERRT	Type-1 Type-2
Miscellaneous Applicant Civil	MAP	Type-1 Type-2 Type-8 Type-14	Acknowledgement Response	ACKT	Type-1 Type-2
			Submission Results – Electronic	SRU	Type-1 Type-2
			Tenprint Transaction Error	ERRT	Type-1 Type-2
Non-Federal Applicant User Fee	NFUF	Type-1 Type-2 Type-8 Type-14	Acknowledgement Response	ACKT	Type-1 Type-2
			Submission Results – Electronic	SRU	Type-1 Type-2
			Tenprint Transaction Error	ERRT	Type-1 Type-2
Two-Finger Search	2FS	Type-1 Type-2 Type-14	Local AFIS Search Results	SRU	Type-1 Type-2 Type-10
ID Verification	IDVERIFY	Type-1 Type-2 Type-14	Local AFIS Search Results	SRU	Type-1 Type-2 Type-10

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## 1.3 Reference Documents

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The following documents were used in the preparation of the ICD:

- 1) ANSI/NIST-ITL 1-2011: American National Standard for Information Systems Data Format for the Interchange of Fingerprint, Facial & Other Biometric Information, November 2011

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## 1.4 Project Assumptions

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The following are the assumptions used in defining the system's ICD:

- Audience is familiar with industry standard protocols
- Audience is familiar with industry standard NIST notation

## 2 Interface Specifications

### 2.1 Message Protocol

The interface for the livescans shall use Simple Mail Transfer Protocol (SMTP) for sending and receiving messages. NIST files shall be included as Multipurpose Internet Mail Extensions (MIME) encoded email attachments.

### 2.2 Email Accounts

The AFIS email account for the livescans to submit transactions is: TBD

The AFIS email account for the livescans to receive transactions is: TBD

### 2.3 Message Flow

The following table provides the transactions sent between the livescans and the AFIS. The transactions shall be in NIST format.

TOT	Description	Origin	Destination	Response To
CAR	Criminal Tenprint Submission (Answer Required)	Livescan	AFIS	--
SOR	Sex Offender Registrant	Livescan	AFIS	--
MAP	Miscellaneous Applicant Civil	Livescan	AFIS	--
NFUF	Non-Federal Applicant User Fee	Livescan	AFIS	--
2FS	Two-Finger Search	Livescan	AFIS	--
IDVERIFY	ID Verification	Livescan	AFIS	--
ACKT	Acknowledgement Message	AFIS	Livescan	CAR, SOR, MAP, NFUF
SRU	Local AFIS Search Results	AFIS	Livescan	CAR, SOR, MAP, NFUF 2FS, IDVERIFY
ERRT	Tenprint Transaction Error	AFIS	Livescan	CAR, SOR, MAP, NFUF, 2FS, IDVERIFY

## 2.4 Message Content

The following sections define the messages communicated between the livescans and the AFIS.

### 2.4.1 Criminal Tenprint Submission (Answer Required) (CAR)

This transaction is a criminal arrest fingerprint submission where a response is required. The types and quantities of logical records required in electronic CAR tenprint submissions are as follows:

- 1 Type-1 Header Record
- 1 Type-2 Descriptor Record
- 2 Type-8 Signature Images
- 1-10 Type-10 Photo Images
- 1-14 Type-14 1,000ppi Fingerprints
  - 10 Rolled Impressions
  - 4 Sets of Plain Impressions
- 1-6 Type-15 Palmprints (upper, lower and writer's)

Field Num	Field Name	Char Type	Field Len	Max Occ	Mandatory / Optional / Conditional
1.01	Logical Record Length	N	2-7	1	M
1.02	Version Number	N	4-4	1	M
1.03	File Content	N	9-48	1	M
1.04	Type of Transaction	A	3-5	1	M
1.05	Date	N	8	1	M
1.06	Priority	N	1-1	1	O
1.07	Destination Agency Identifier	ANS	4-35	1	M
1.08	Originating Agency Identifier	ANS	4-35	1	M
1.09	Transaction Control Number	ANS	10-40	1	M
1.11	Native Scanning Resolution	NS	5-5	1	M
1.12	Nominal Transmitting Resolution	NS	5-5	1	M
2.001	Logical Record Length	N	2-7	1	M
2.002	Image Designation Character	N	2-2	1	M
2.153	Incident ID (Booking ID/Tracking Number)	AN	7-7	1	M
2.018	Name	AS	3-30	1-1	M
2.100	Last Name	AS	1-45	1	M
2.101	First Name	AS	1-30	1	M
2.102	Middle Name	AS	1-30	1	O
2.109	Suffix	A	1-3	1	O
2.019	Aliases			10	O
A	Last Name	ANS	1-45	1	O
B	First Name	ANS	1-30	1	O

Field Num	Field Name	Char Type	Field Len	Max Occ	Mandatory / Optional / Conditional
C	Middle Name	ANS	1-30	1	O
D	Suffix	A	1-3	1	O
2.016	Social Security Number	N	9-9	4	O
2.073	Controlling Agency Identifier (ORI)	ANS	1-9	3	M
2.021	Country of Citizenship	A	2-2	1	O
2.131	Place of Birth – City	ANS	1-20	1	O
2.020	Place of Birth – State/Country	A	2-2	1	M
2.022	Date of Birth	N	8-8	5	M
2.108	Skin Tone	A	3-3	1	O
2.024	Sex	A	1-1	1	M
2.025	Race	A	1-1	1	M
2.027	Height	AN	3-3	1	M
2.029	Weight	N	3-3	1	M
2.031	Eye Color	A	3-3	1	M
2.032	Hair Color	A	3-3	1	M
2.038	Date Fingerprinted	N	8-8	1	M
2.133	Officer Taking Fingerprints	ANS	1-40	1	M
2.045	Date of Arrest	N	8-8	1	M
2.056	Identification Comments	ANS	1-50	1	O
2.026	Scars, Marks & Tattoos	AS	3-10	10	O
2.136	Scars, Marks, Tattoos			10	O
A	Scars Marks Tattoos	AS	3-10	1	O
B	SMT Description	ANS	1-50	1	O
2.104	Charge Record			40	M
A	Charge Code	ANS	1-88	1	M
B	Alternate Charge	ANS	1-50	1	O
C	Alternate Code	ANS	1-16	1	O
D	Charge Count	N	1-2	1	O
E	Date of Offense	N	8-8	1	O
2.999	Local Charge Records			0-40	O
A	Local Charge	ANS	1-50	0-1	O
B	Local Code	ANS	1-16	0-1	O
C	Charge Count	N	1-2	0-1	O
D	Date of Offense	N	8-8	0-1	O
2.904	Residence – Street	AN	1-88	1	O
2.905	Residence – City	AN	1-20	1	O
2.906	Residence – State	A	2-2	1	O
2.907	Residence – Zip	ANS	1-10	1	O
2.041	Residence of Person Fingerprinted	ANS	1-120	0-1	O
2.040	Occupation	ANS	1-50	1	O
2.039	Employer and Address	ANS	1-120	1	O

Field Num	Field Name	Char Type	Field Len	Max Occ	Mandatory / Optional / Conditional
2.903	Caution	A	1-1	1	O
2.911	Suicidal Tendencies	A	1-1	1	O
2.912	Known to Assault Police	A	1-1	1	O
2.913	Known to Go Armed	A	1-1	1	O
2.163	Juvenile Submission	A	1-1	1	M
2.087	Treat as Adult	A	1-1	1	M
2.009	Originating Agency Case Number	ANS	1-20	1	O
2.110	Type of Transaction	A	3-4	1	M
2.111	Record Type	A	8-9	1	M
2.070	Request for Electronic Rap Sheet	A	1-1	1	O
2.005	Retention Code	A	1-1	1	M
2.006	Attention Indicator	ANS	3-30	1	O
2.035	Palm Prints Avail Indicator	A	1-1	1	O
2.036	Photo Available	A	1-1	1	O
2.139	Local Agency Number	AN	1-15	1	O
2.915	Reply Desired	A	1-1	1	O
2.051	Court Segment Literal			40	O
A	Court Disposition Date	N	8-8	1	O
B	Court Offense Literal	ANS	1-300	1	M
C	Other Court Sentence Provision Literal	ANS	1-300	1	M
2.054	Custody or Supervisory Status Start Date	N	8-8	1	O
2.055	Custody or Supervisory Status Literal	ANS	1-300	1	O
2.120	FBI Number	AN	1-9	5	O
2.017	Miscellaneous Identification Number	ANS	4-15	4	O
2.914	Other Free Text	ANS	1-50	1	O
2.112	Livescan Identifier	AN	1-10	1	M
2.916	Print Card at Central Site	A	1-1	1	O
2.067	Image Capture Equipment			1	O
A	Make	ANS	1-25	1	M
B	Model	ANS	1-25	1	M
C	Serial Number	ANS	1-50	1	M
2.084	Amputated or Bandaged			9	C
A	Finger Number	N	2-2	1	M
B	Amputated or Bandaged Code	A	2-2	1	M
<b>1-14 Type-14 Fingerprints</b>					
<b>2 Type-8 Signatures</b>					
<b>1-10 Type-10 Photos</b>					
<b>1-6 Type-15 Palmprints</b>					

Note: If a value is submitted for FBI Number (2.120), AFIS shall delete the value prior to adding the record to the database.

## 2.4.2 Sex Offender Registrant (SOR)

This transaction is a sex offender registrant submission. The types and quantities of logical records required in electronic SOR tenprint submissions are as follows:

- 1 Type-1 Header Record
- 1 Type-2 Descriptor Record
- 2 Type-8 Signature Images
- 1-10 Type-10 Photo Images
- 1-14 Type-14 1,000ppi Fingerprints
  - 10 Rolled Impressions
  - 4 Sets of Plain Impressions
- 1-6 Type-15 Palmprints (upper, lower and writer's)

Field Num	Field Name	Char Type	Field Len	Max Occ	Mandatory / Optional / Conditional
1.01	Logical Record Length	N	2-7	1	M
1.02	Version Number	N	4-4	1	M
1.03	File Content	N	9-48	1	M
1.04	Type of Transaction	A	3-5	1	M
1.05	Date	N	8	1	M
1.06	Priority	N	1-1	1	O
1.07	Destination Agency Identifier	ANS	4-35	1	M
1.08	Originating Agency Identifier	ANS	4-35	1	M
1.09	Transaction Control Number	ANS	10-40	1	M
1.11	Native Scanning Resolution	NS	5-5	1	M
1.12	Nominal Transmitting Resolution	NS	5-5	1	M
2.001	Logical Record Length	N	2-7	1	M
2.002	Image Designation Character	N	2-2	1	M
2.153	Incident ID (Booking ID/Tracking Number)	AN	7-7	1	M
2.018	Name	AS	3-30	1-1	M
2.100	Last Name	AS	1-45	1	M
2.101	First Name	AS	1-30	1	M
2.102	Middle Name	AS	1-30	1	O
2.109	Suffix	A	1-3	1	O
2.019	Aliases			10	O
A	Last Name	ANS	1-45	1	O
B	First Name	ANS	1-30	1	O
C	Middle Name	ANS	1-30	1	O
D	Suffix	A	1-3	1	O
2.016	Social Security Number	N	9-9	4	O

Field Num	Field Name	Char Type	Field Len	Max Occ	Mandatory / Optional / Conditional
2.073	Controlling Agency Identifier (ORI)	ANS	1-9	3	M
2.021	Country of Citizenship	A	2-2	1	O
2.020	Place of Birth – State/Country	A	2-2	1	M
2.022	Date of Birth	N	8-8	5	M
2.024	Sex	A	1-1	1	M
2.025	Race	A	1-1	1	M
2.027	Height	AN	3-3	1	M
2.029	Weight	N	3-3	1	M
2.031	Eye Color	A	3-3	1	M
2.032	Hair Color	A	3-3	1	M
2.038	Date Fingerprinted	N	8-8	1	M
2.133	Officer Taking Fingerprints	ANS	1-40	1	M
2.037	Reason Fingerprinted	ANS	1-75	1	M
2.904	Residence – Street	AN	1-88	1	O
2.905	Residence – City	AN	1-20	1	O
2.906	Residence – State	A	2-2	1	O
2.907	Residence – Zip	ANS	1-10	1	O
2.041	Residence of Person Fingerprinted	ANS	1-120	0-1	O
2.040	Occupation	ANS	1-50	1	O
2.039	Employer and Address	ANS	1-120	1	O
2.921	Armed Forces Number	ANS	1-15	1	O
2.922	Your Number	ANS	1-15	1	O
2.009	Originating Agency Case Number	ANS	1-20	1	O
2.110	Type of Transaction	A	3-4	1	M
2.113	Type of Applicant	A	6-14	1	M
2.111	Record Type	A	8-9	1	M
2.070	Request for Electronic Rap Sheet	A	1-1	1	O
2.005	Retention Code	A	1-1	1	M
2.006	Attention Indicator	ANS	3-30	1	O
2.120	FBI Number	AN	1-9	5	O
2.015	State Identification Number	AN	3-10	5	O
2.017	Miscellaneous Identification Number	ANS	4-15	4	O
2.112	Livescan Identifier	AN	1-10	1	M
2.067	Image Capture Equipment			1	O
A	Make	ANS	1-25	1	M
B	Model	ANS	1-25	1	M
C	Serial Number	ANS	1-50	1	M
2.084	Amputated or Bandaged			9	C
A	Finger Number	N	2-2	1	M
B	Amputated or Bandaged Code	A	2-2	1	M
<b>1-14 Type-14 Fingerprints</b>					



Field Num	Field Name	Char Type	Field Len	Max Occ	Mandatory / Optional / Conditional
<b>2 Type-8 Signatures</b>					
<b>1-10 Type-10 Photos</b>					
<b>1-6 Type-15 Palmprints</b>					

Note: If a value is submitted for FBI Number (2.120), AFIS shall delete the value prior to adding the record to the database.

### 2.4.3 Miscellaneous Applicant (MAP)

This transaction is a no-charge submission for non-federal law enforcement and criminal justice employment. The types and quantities of logical records required in electronic MAP tenprint submissions are as follows:

- 1 Type-1 Header Record
- 1 Type-2 Descriptor Record
- 2 Type-8 Signature Images
- 1-14 Type-14 1,000ppi Fingerprints
  - 10 Rolled Impressions
  - 4 Sets of Plain Impressions

Field Num	Field Name	Char Type	Field Len	Max Occ	Mandatory / Optional / Conditional
1.01	Logical Record Length	N	2-7	1	M
1.02	Version Number	N	4-4	1	M
1.03	File Content	N	9-48	1	M
1.04	Type of Transaction	A	3-5	1	M
1.05	Date	N	8	1	M
1.06	Priority	N	1-1	1	O
1.07	Destination Agency Identifier	ANS	4-35	1	M
1.08	Originating Agency Identifier	ANS	4-35	1	M
1.09	Transaction Control Number	ANS	10-40	1	M
1.11	Native Scanning Resolution	NS	5-5	1	M
1.12	Nominal Transmitting Resolution	NS	5-5	1	M
2.001	Logical Record Length	N	2-7	1	M
2.002	Image Designation Character	N	2-2	1	M
2.153	Incident ID (Booking ID/Tracking Number)	AN	7-7	1	M
2.018	Name	AS	3-30	1-1	M
2.100	Last Name	AS	1-45	1	M

Field Num	Field Name	Char Type	Field Len	Max Occ	Mandatory / Optional / Conditional
2.101	First Name	AS	1-30	1	M
2.102	Middle Name	AS	1-30	1	O
2.109	Suffix	A	1-3	1	O
2.019	Aliases			10	O
A	Last Name	ANS	1-45	1	O
B	First Name	ANS	1-30	1	O
C	Middle Name	ANS	1-30	1	O
D	Suffix	A	1-3	1	O
2.016	Social Security Number	N	9-9	4	O
2.073	Controlling Agency Identifier (ORI)	ANS	1-9	3	M
2.021	Country of Citizenship	A	2-2	1	O
2.020	Place of Birth – State/Country	A	2-2	1	M
2.022	Date of Birth	N	8-8	5	M
2.024	Sex	A	1-1	1	M
2.025	Race	A	1-1	1	M
2.027	Height	AN	3-3	1	M
2.029	Weight	N	3-3	1	M
2.031	Eye Color	A	3-3	1	M
2.032	Hair Color	A	3-3	1	M
2.038	Date Fingerprinted	N	8-8	1	M
2.133	Officer Taking Fingerprints	ANS	1-40	1	M
2.037	Reason Fingerprinted	ANS	1-75	1	M
2.904	Residence – Street	AN	1-88	1	O
2.905	Residence – City	AN	1-20	1	O
2.906	Residence – State	A	2-2	1	O
2.907	Residence – Zip	ANS	1-10	1	O
2.041	Residence of Person Fingerprinted	ANS	1-120	0-1	O
2.040	Occupation	ANS	1-50	1	O
2.039	Employer and Address	ANS	1-120	1	O
2.921	Armed Forces Number	ANS	1-15	1	O
2.922	Your Number	ANS	1-15	1	O
2.009	Originating Agency Case Number	ANS	1-20	1	O
2.110	Type of Transaction	A	3-4	1	M
2.113	Type of Applicant	A	6-14	1	M
2.111	Record Type	A	8-9	1	M
2.070	Request for Electronic Rap Sheet	A	1-1	1	O
2.005	Retention Code	A	1-1	1	M
2.006	Attention Indicator	ANS	3-30	1	O
2.120	FBI Number	AN	1-9	5	O
2.015	State Identification Number	AN	3-10	5	O
2.017	Miscellaneous Identification Number	ANS	4-15	4	O



Field Num	Field Name	Char Type	Field Len	Max Occ	Mandatory / Optional / Conditional
2.112	Livescan Identifier	AN	1-10	1	M
2.067	Image Capture Equipment			1	O
A	Make	ANS	1-25	1	M
B	Model	ANS	1-25	1	M
C	Serial Number	ANS	1-50	1	M
2.084	Amputated or Bandaged			9	C
A	Finger Number	N	2-2	1	M
B	Amputated or Bandaged Code	A	2-2	1	M
<b>1-14 Type-14 Fingerprints</b>					
<b>2 Type-8 Signatures</b>					

Note: If a value is submitted for FBI Number (2.120), AFIS shall delete the value prior to adding the record to the database.

#### 2.4.4 Non-Federal Applicant User Fee (NFUF)

This transaction is for non-criminal justice and licensing purposes in which the contributor is charged a fee. The types and quantities of logical records required in electronic NFUF tenprint submissions are as follows:

- 1 Type-1 Header Record
- 1 Type-2 Descriptor Record
- 2 Type-8 Signature Images
- 1-14 Type-14 1,000ppi Fingerprints
  - 10 Rolled Impressions
  - 4 Sets of Plain Impressions

Field Num	Field Name	Char Type	Field Len	Max Occ	Mandatory / Optional / Conditional
1.01	Logical Record Length	N	2-7	1	M
1.02	Version Number	N	4-4	1	M
1.03	File Content	N	9-48	1	M
1.04	Type of Transaction	A	3-5	1	M
1.05	Date	N	8	1	M
1.06	Priority	N	1-1	1	O
1.07	Destination Agency Identifier	ANS	4-35	1	M
1.08	Originating Agency Identifier	ANS	4-35	1	M
1.09	Transaction Control Number	ANS	10-40	1	M

Field Num	Field Name	Char Type	Field Len	Max Occ	Mandatory / Optional / Conditional
1.11	Native Scanning Resolution	NS	5-5	1	M
1.12	Nominal Transmitting Resolution	NS	5-5	1	M
2.001	Logical Record Length	N	2-7	1	M
2.002	Image Designation Character	N	2-2	1	M
2.153	Incident ID (Booking ID/Tracking Number)	AN	7-7	1	M
2.018	Name	AS	3-30	1-1	M
2.100	Last Name	AS	1-45	1	M
2.101	First Name	AS	1-30	1	M
2.102	Middle Name	AS	1-30	1	O
2.109	Suffix	A	1-3	1	O
2.019	Aliases			10	O
A	Last Name	ANS	1-45	1	O
B	First Name	ANS	1-30	1	O
C	Middle Name	ANS	1-30	1	O
D	Suffix	A	1-3	1	O
2.016	Social Security Number	N	9-9	4	O
2.073	Controlling Agency Identifier (ORI)	ANS	1-9	3	M
2.021	Country of Citizenship	A	2-2	1	O
2.020	Place of Birth – State/Country	A	2-2	1	M
2.022	Date of Birth	N	8-8	5	M
2.024	Sex	A	1-1	1	M
2.025	Race	A	1-1	1	M
2.027	Height	AN	3-3	1	M
2.029	Weight	N	3-3	1	M
2.031	Eye Color	A	3-3	1	M
2.032	Hair Color	A	3-3	1	M
2.038	Date Fingerprinted	N	8-8	1	M
2.133	Officer Taking Fingerprints	ANS	1-40	1	M
2.037	Reason Fingerprinted	ANS	1-75	1	M
2.904	Residence – Street	AN	1-88	1	O
2.905	Residence – City	AN	1-20	1	O
2.906	Residence – State	A	2-2	1	O
2.907	Residence – Zip	ANS	1-10	1	O
2.041	Residence of Person Fingerprinted	ANS	1-120	0-1	O
2.040	Occupation	ANS	1-50	1	O
2.039	Employer and Address	ANS	1-120	1	O
2.921	Armed Forces Number	ANS	1-15	1	O
2.922	Your Number	ANS	1-15	1	O
2.009	Originating Agency Case Number	ANS	1-20	1	O
2.110	Type of Transaction	A	3-4	1	M
2.113	Type of Applicant	A	6-14	1	M



Field Num	Field Name	Char Type	Field Len	Max Occ	Mandatory / Optional / Conditional
2.111	Record Type	A	8-9	1	M
2.070	Request for Electronic Rap Sheet	A	1-1	1	O
2.005	Retention Code	A	1-1	1	M
2.006	Attention Indicator	ANS	3-30	1	O
2.120	FBI Number	AN	1-9	5	O
2.015	State Identification Number	AN	3-10	5	O
2.017	Miscellaneous Identification Number	ANS	4-15	4	O
2.112	Livescan Identifier	AN	1-10	1	M
2.067	Image Capture Equipment			1	O
A	Make	ANS	1-25	1	M
B	Model	ANS	1-25	1	M
C	Serial Number	ANS	1-50	1	M
2.084	Amputated or Bandaged			9	C
A	Finger Number	N	2-2	1	M
B	Amputated or Bandaged Code	A	2-2	1	M
<b>1-14 Type-14 Fingerprints</b>					
<b>2 Type-8 Signatures</b>					

Note: If a value is submitted for FBI Number (2.120), AFIS shall delete the value prior to adding the record to the database.

## 2.4.5 Two-Finger Search (2FS)

This transaction is used to perform a one-to-many two-finger search on the AFIS. The types and quantities of logical records required in electronic 2FS submissions are as follows:

- 1 Type-1 Header Record
- 1 Type-2 Descriptor Record
- 2 Type-14 1,000ppi Plain Impression Fingerprints

Field Num	Field Name	Char Type	Field Len	Max Occ	Mandatory / Optional / Conditional
1.01	Logical Record Length	N	2-7	1	M
1.02	Version Number	N	4-4	1	M
1.03	File Content	N	9-48	1	M
1.04	Type of Transaction	A	3-5	1	M
1.05	Date	N	8	1	M
1.06	Priority	N	1-1	1	O
1.07	Destination Agency Identifier	ANS	4-35	1	M

Field Num	Field Name	Char Type	Field Len	Max Occ	Mandatory / Optional / Conditional
1.08	Originating Agency Identifier	ANS	4-35	1	M
1.09	Transaction Control Number	ANS	10-40	1	M
1.11	Native Scanning Resolution	NS	5-5	1	M
1.12	Nominal Transmitting Resolution	NS	5-5	1	M
2.001	Logical Record Length	N	2-7	1	M
2.002	Image Designation Character	N	2-2	1	M
2.153	Incident ID (Booking ID/Tracking Number)	AN	7-7	1	M
2.112	Livescan Identifier	AN	1-10	1	M
<b>2 Type-14 Plain Impression Fingerprints</b>					

## 2.4.6 ID Verification (IDVERIFY)

This transaction is used to perform a one-to-one two-finger search on the AFIS. The types and quantities of logical records required in electronic IDVERIFY submissions are as follows:

- 1 Type-1 Header Record
- 1 Type-2 Descriptor Record
- 2 Type-14 1,000ppi Plain Impression Fingerprints

Field Num	Field Name	Char Type	Field Len	Max Occ	Mandatory / Optional / Conditional
1.01	Logical Record Length	N	2-7	1	M
1.02	Version Number	N	4-4	1	M
1.03	File Content	N	9-48	1	M
1.04	Type of Transaction	A	3-5	1	M
1.05	Date	N	8	1	M
1.06	Priority	N	1-1	1	O
1.07	Destination Agency Identifier	ANS	4-35	1	M
1.08	Originating Agency Identifier	ANS	4-35	1	M
1.09	Transaction Control Number	ANS	10-40	1	M
1.11	Native Scanning Resolution	NS	5-5	1	M
1.12	Nominal Transmitting Resolution	NS	5-5	1	M
2.001	Logical Record Length	N	2-7	1	M
2.002	Image Designation Character	N	2-2	1	M
2.157	Person ID (State ID)	AN	8-8	1	M
2.112	Livescan Identifier	AN	1-10	1	M
<b>2 Type-14 Plain Impression Fingerprints</b>					

## 2.4.7 Acknowledgement Message (ACKT)

This transaction is returned to the originating livescan by AFIS to acknowledge receiving a tenprint submission. An ACKT is returned for each tenprint submission. The following logical records will be returned:

- 1 Type-1 Header Record
- 1 Type-2 Descriptor Record

Field Num	Field Name	Char Type	Field Len	Max Occ	Mandatory / Optional
1.01	Logical Record Length	N	2-7	1	M
1.02	Version Number	N	4-4	1	M
1.03	File Content	N	9-48	1	M
1.04	Type of Transaction	A	3-5	1	M
1.05	Date	N	8	1	M
1.06	Priority	N	1-1	1	O
1.07	Destination Agency Identifier	ANS	4-35	1	M
1.08	Originating Agency Identifier	ANS	4-35	1	M
1.09	Transaction Control Number	ANS	10-40	1	M
1.11	Native Scanning Resolution	NS	5-5	1	M
1.12	Nominal Transmitting Resolution	NS	5-5	1	M
2.001	Logical Record Length	N	2-7	1	M
2.002	Image Designation Character	N	2-2	1	M
2.153	Incident ID (Booking ID/Tracking Number)	AN	7-7	1	M

## 2.4.8 Local AFIS Search Results (SRU)

This transaction is returned by the AFIS in response to the tenprint, two-finger and ID verification submission transactions. The response will contain the Ident/Non-Ident decision of the AFIS search. The following logical records will be returned:

- 1 Type-1 Header Record
- 1 Type-2 Descriptor Record
- 0-1 Type-10 Photo Record (if hit for 2FS and IDVERIFY)

Field Num	Field Name	Char Type	Field Len	Max Occ	Mandatory / Optional
1.01	Logical Record Length	N	2-7	1	M
1.02	Version Number	N	4-4	1	M
1.03	File Content	N	9-48	1	M
1.04	Type of Transaction	A	3-5	1	M
1.05	Date	N	8	1	M
1.06	Priority	N	1-1	1	O
1.07	Destination Agency Identifier	ANS	4-35	1	M
1.08	Originating Agency Identifier	ANS	4-35	1	M
1.09	Transaction Control Number	ANS	10-40	1	M
1.11	Native Scanning Resolution	NS	5-5	1	M
1.12	Nominal Transmitting Resolution	NS	5-5	1	M
2.001	Logical Record Length	N	2-7	1	M
2.002	Image Designation Character	N	2-2	1	M
2.009	Originating Agency Case Number	ANS	1-20	1	O
2.015	State Identification Number	AN	3-10	5	O
2.059	Search Results Findings	A	1-1	1	M
2.060	Status/Error Message (CCH rap sheet header with multiple descriptor data elements in one field)	ANS	1-300	11	M (for hits)
2.917	Disclaimer Message	ANS	TBD	1	M (for hits)
<b>0-1 Type-10 Photo</b>					

- Notes: 1) Field 2.060 is only applicable in response to the 2FS request.  
 2) The Type-10 record will only be included in the SRU in response to the 2FS and IDVERIFY requests if a hit is determined and the hit photo exists.  
 3) Field 2.917 is used only in response to the 2FS and IDVERIFY requests.

### 2.4.9 Tenprint Transaction Error (ERRT)

This transaction is returned by the AFIS to indicate a transaction error. It includes a message field indicating the type of error detected. The types and quantities of logical records required in this transaction are as follows:

- 1 Type-1 Header Record
- 1 Type-2 Descriptor Record

Field Num	Field Name	Char Type	Field Len	Max Occ	Mandatory / Optional
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Field Num	Field Name	Char Type	Field Len	Max Occ	Mandatory / Optional
1.01	Logical Record Length	N	2-7	1	M
1.02	Version Number	N	4-4	1	M
1.03	File Content	N	9-48	1	M
1.04	Type of Transaction	A	3-5	1	M
1.05	Date	N	8	1	M
1.06	Priority	N	1-1	1	O
1.07	Destination Agency Identifier	ANS	4-35	1	M
1.08	Originating Agency Identifier	ANS	4-35	1	M
1.09	Transaction Control Number	ANS	10-40	1	M
1.11	Native Scanning Resolution	NS	5-5	1	M
1.12	Nominal Transmitting Resolution	NS	5-5	1	M
2.001	Logical Record Length	N	2-7	1	M
2.002	Image Designation Character	N	2-2	1	M
2.009	Originating Agency Case Number	ANS	1-20	1	O
2.060	Status Error Message	ANS	1-300	11	M

## 3 NIST Definitions

### 3.1 Type-1 Header

This section defines the Type-1 data definitions.

#### 1.01 LEN Logical Record Length

This mandatory ASCII field shall contain the total count of the number of bytes in this Type-1 logical record. Field 1.01 shall begin with "1.01:" followed by the length of the record including every character of every field contained in the record and the information separators. The GS character shall separate the length code of Field 1.01 from the next field.

#### 1.02 VER Version Number

This mandatory four-byte ASCII field shall be used to specify the current version number of the standard implemented by the software or system creating the file. The format of this field shall consist of four numeric characters. The first two characters shall specify the major version number. The last two characters shall be used to specify the minor revision number. The entry in this field shall be "0200".

#### 1.03 CNT File Content

This mandatory field shall list and identify each of the logical records in the logical file by record type. It also specifies the order in which the remaining logical records shall appear in the logical file. It shall consist of one or more subfields. Each sub field shall contain two information items describing a single logical record found in the current logical file. The subfields shall be entered in the same order in which the logical records shall appear and be transmitted. When more than one sub field is used, the RS separator character shall be entered between the subfields.

The first sub field shall relate to this Type-1 Transaction record. The first information item within this sub field shall be the single character indicating that this is a Type-1 record consisting of header information.

The second information item of this sub field shall be the sum of the Type-2 through Type-4 logical records contained in this logical file. This number is also equal to the count of the remaining subfields of Field 1.03. The US separator character shall be entered between the first and second information items.

Each of the remaining subfields of Field 1.03 relates to a single Type-2, Type-4 and Type-10 logical record contained in the file. Two information items shall comprise each sub field. The first information item shall be the record identifier character(s) that identifies the record type. The second item shall be the IDC associated with the logical record pertaining to that sub field. The IDC shall be a positive integer equal to or greater than zero. The US character shall be used to separate the two information items.

#### 1.04 TOT Type of Transaction

This mandatory field shall contain an identifier, which designates the type of transaction and subsequent processing that this logical file should be given. The last character of this field shall be a GS

separator character used to separate Field 1.04 from the next field.

**1.05 DAT Date**

This mandatory field shall contain the date that the transaction was initiated. The date shall appear as eight digits in the format CCYYMMDD. The CCYY characters shall represent the year of the transaction; the MM characters shall be the tens and units values of the month; and the DD characters shall be the day in the month. For example, "20000101" represents January 1, 2000.

**1.06 PRY Priority**

When this field is used, it shall contain a single information character to designate the urgency with which a response is desired. The values shall range from "1" to "4", with "1" denoting the highest priority. The default value shall be defined by the agency receiving the transaction.

**1.07 DAI Destination Agency Identifier**

This mandatory field shall contain the identifier of the administration or organization designated to receive the transmission. This field shall be a nine-byte alphanumeric field.

**1.08 ORI Originating Agency Identifier**

This mandatory field shall contain the identifier of the administration or organization originating the transaction. The ORI value for this field shall be DEDSPFLSS to designate a foreign livescan submission to AFIS.

**1.09 TCN Transaction Control Number**

This mandatory field shall contain the Transaction Control Number as assigned by the originating agency. A unique control number shall be assigned to each transaction. For any transaction that requires a response, the respondent shall refer to this number in communicating with the originating agency.

**1.10 TCR Transaction Control Reference**

This optional field shall be used in responses to refer to the TCN of a previous transaction involving an inquiry or other action that required a response.

**1.11 NSR Native Scanning Resolution**

This mandatory field shall specify the native scanning resolution of the AFIS or other fingerprint image capture device supported by the originator of the transmission. This field permits the recipient of this transaction to send response data at a transmitting resolution tailored to the NSR (if it is able to do so) or to the minimum scanning resolution. This field shall contain five bytes specifying the native scanning resolution in pixels per millimeter. The resolution shall be expressed as two numeric characters followed by a decimal point and two more numeric characters (e.g. 19.69). This field is needed because the interchange of fingerprint information between systems of the same manufacturer may, in some instances, be more efficiently done at a transmitting resolution equal to the native scanning resolution of the system rather than at the minimum scanning resolution specified in this standard. This field applies only to fingerprint image data. Where resolution is not a factor or not applicable (such a facial or SMT image), this field shall be set to "00.00".



### 1.12 NTR Nominal Transmitting Resolution

This mandatory field shall specify the nominal transmitting resolution for the fingerprint image or images being exchanged. It has little relevance for non-fingerprint applications. This field shall contain five bytes specifying the transmitting resolution in pixels per millimeter. The resolution shall be expressed as two numeric characters followed by a decimal point and two more numeric characters (e.g. 19.69). The transmitting resolution shall be within the range specified by the transmitting resolution requirement. This field applies only to fingerprint image data. Where resolution is not a factor or not applicable (such a facial or SMT image), this field shall be set to "00.00".

## 3.2 Type-2 Descriptors

This section defines the Type-2 fields used for SRU and ERRT responses.

### 2.001 Logical Record Length

This mandatory field contains the length of the logical record specifying the total number of bytes, including every character of every field contained in the record. The number of characters added to the record by the LEN field itself shall be included in calculating the value of the LEN.

### 2.002 Image Designation Character

This mandatory field shall be used to identify the user-defined text information contained in this record. The IDC contained in this field shall be the IDC of the Type-2 logical record as found in the file content field of the Type-1 record.

### 2.005 Retention Code

This field indicates whether the record is to be saved at the FBI. The valid yes/no codes are listed in Table 3-1. The default picklist value shall be "Y."

**Table 3-1. Yes/No Picklist**

Code	Description
Y	Yes
N	No

### 2.006 Attention Indicator

This field contains a designation of the individual to whose attention a response is to be directed. Any printable 7-bit ASCII character is allowed as a special character with the exception of the period. A period will not be allowed as a special character for this field.

### 2.009 Originating Agency Case Number

This field contains the originating agency's case number. Any printable 7-bit ASCII character is

allowed as a special character with the exception of the period. A period will not be allowed as a special character for this field.

### 2.015 State Identification Number

This field contains the subject's state identification number. It is comprised of the Person ID/State ID (field 2.157) prefixed with "IA."

### 2.016 Social Security Number

This field contains the Social Security Number of the subject

### 2.017 Miscellaneous ID Number

This field contains any miscellaneous identification numbers. The hyphen is allowed as a special character. The operator will type in the miscellaneous identification number in the format, [Code]-[1-12 character ID number], and be limited to using the codes in the following table.

Note: This field is not a picklist field.

Code	Description
AF	Air Force Serial Number
AR	Alien Registration Number
AS	Air National Guard Serial Number, Army Serial Number, National Guard Serial Number
BF	Bureau Fugitive Index Number
CI	Canadian Social Insurance Number
CG	U. S. Coast Guard Serial Number
IO	Identification Order Number
MC	Marine Corps Serial Number
MD	Mariner's Document or Identification Number
MP	RCMP Identification or Fingerprint Section Number
NA	National Agency Case Number
NS	Navy Serial Number
PP	Passport Number (U.S. Only)
PS	Port Security Card Number
SS	Selective Service Number
VA	Veterans Administration Claim Number

### 2.018 Name

This field is not displayed. It contains the name of the subject in the FBI format: <Last Name>, <First Name> <Middle Name> <Suffix>. The Last Name, First Name, Middle Name, and Suffix fields are concatenated to create the contents of this field. The name format shall have the following order: mandatory surname, mandatory comma, space (optional), mandatory first name or initial, space (include only if middle name or initial will follow), middle name(s) or initial(s) if any, mandatory space after each middle name or initial, and suffix denoting seniority (e.g., JR, II, etc.) if any. Valid special characters are hyphens, commas, and blanks.

**2.019 Aliases**

This field contains the alias names of the subject. It is a grouped field consisting of four subfields: Last Name, First Name, Middle Name, and Suffix.

**Last Name**

This field contains the subject's alias last name. Valid special characters are hyphens, commas, and blanks.

**First Name**

This field contains the subject's alias first name. Valid numeric characters are 0-9. Valid special characters are hyphens, commas, and blanks.

**Middle Name**

This field contains the subject's alias middle name. Valid special characters are hyphens, commas, and blanks.

**Suffix**

This field contains the subject's alias suffix name. The valid suffix codes for this field are listed in Table 3-2.

**Table 3-2. Suffix Picklist**

Code	Description
SR	Senior
JR	Junior
I	First
II	Second
III	Third
IV	Fourth
V	Fifth

**2.020 Place of Birth – State/Country**

This field contains the subject's place (state or country) of birth. The valid Place of Birth codes will be provided by Iowa DCI upon request.

**2.021 Country of Citizenship**

This field contains the subject's country of citizenship. The valid country codes will be provided by Iowa DCI upon request.

**2.022 Date of Birth**

This field contains the subject's date of birth. The date shall be eight digits in the format, **CCYYMMDD**.

#### 2.024 Sex

This field contains a single alpha character that shall specify the subject's gender. The valid gender codes for this field are listed in Table 3-3. The operator will use free text entry rather than the picklist. However, the operator will only be able to enter M, F, or X.

**Table 3-3. Gender Picklist**

Code	Description
M	MALE
F	FEMALE
X	UNKNOWN

#### 2.025 Race

This field contains a single alpha character that shall specify the subject's race. The valid race codes for this field are listed in Table 3-4. The operator will use free text entry rather than the picklist. However, the operator will only be able to enter A, B, I, W, or U.

**Table 3-4. Race Picklist**

Code	Description
A	ASIAN OR PACIFIC ISLAND
B	BLACK
I	NATIVE AMERICAN INDIAN
W	WHITE
U	UNKNOWN

#### 2.026 Scars, Marks, Tattoos

This field is not displayed. It contains information on any scars, marks, or tattoos on the subject's body. Valid special characters are blanks. The valid Scars, Marks, Tattoos codes will be provided by Iowa DCI upon request.

#### 2.027 Height

This field contains the subject's height. The valid height codes for this field are listed in Table 3-5.

**Table 3-5. Height Picklist**

Code	Description
400	4'00"
401	4'01"

Code	Description
402	4'02"
403	4'03"
404	4'04"
405	4'05"
406	4'06"
407	4'07"
408	4'08"
409	4'09"
410	4'10"
411	4'11"
500	5'00"
501	5'01"
502	5'02"
503	5'03"
504	5'04"
505	5'05"
506	5'06"
507	5'07"
508	5'08"
509	5'09"
510	5'10"
511	5'11"
600	6'00"
601	6'01"
602	6'02"
603	6'03"
604	6'04"
605	6'05"
606	6'06"
607	6'07"
608	6'08"
609	6'09"
610	6'10"
611	6'11"
700	7'00"
701	7'01"
702	7'02"
703	7'03"
704	7'04"
705	7'05"
706	7'06"
707	7'07"
708	7'08"
709	7'09"

Code	Description
710	7'10"
711	7'11"

**2.029 Weight**

This field contains the subject's weight. Acceptable weight range is 050 – 499 pounds. If the weight is unknown, 000 is entered.

**2.031 Eye Color**

This field contains the subject's eye color. The valid eye color codes for this field are listed in Table 3-6.

**Table 3-6. Eye Color Picklist**

Code	Description
BLK	BLACK
BLU	BLUE
BRO	BROWN
GRY	GRAY
GRN	GREEN
HAZ	HAZEL
MAR	MAROON
MUL	MULTICOLORED
PNK	PINK
XXX	UNKNOWN

**2.032 Hair Color**

This field contains the subject's hair color. The valid hair color codes for this field are listed in Table 3-7.

**Table 3-7. Hair Color Picklist**

Code	Description
BAL	BALD
BLK	BLACK
BLN	BLOND OR STRAWBERRY
BLU	BLUE
BRO	BROWN
GRY	GRAY OR PARTIALLY GRAY
GRN	GREEN
ONG	ORANGE
PNK	PINK
PLE	PURPLE
RED	RED OR AUBURN

Code	Description
SDY	SANDY
WHI	WHITE
XXX	UNKNOWN

**2.035 Palm Prints Available**

This field indicates whether the subject's palmprints are included in the record. The valid yes/no codes are listed in Table 3-1. This field shall default to Yes for the following workflow profiles.

- Local State
- State

**2.036 Photo Available**

This field indicates whether the subject's photograph is included in the record. The valid yes/no codes are listed in Table 3-1. This field shall default to Yes for the following workflow profiles.

- Local State
- Mugshot Only
- State

**2.037 Reason Fingerprinted**

This field contains the reason why the subject was fingerprinted. Valid special characters are commas, blanks, dashes, hyphens, and slashes.

**2.038 Date Fingerprinted**

This field contains the date the subject was fingerprinted. The date shall be eight digits in the format, **CCYYMMDD**.

**2.039 Employer and Address**

This field contains the name and address of the subject's employer. Any printable 7-bit ASCII character is allowed as a special character.

**2.040 Occupation**

This field contains the name of the subject's occupation. Any printable 7-bit ASCII character is allowed as a special character.

**2.041 Residence**

This field is not displayed. It contains the subject's place of residence. Any printable 7-bit ASCII character is allowed as a special character.

**2.045 Date of Arrest**

This field contains the subject's date of arrest. The date shall be eight digits in the format, **CCYYMMDD**.

**2.047 Arrest Segment Literal**

This field is not displayed. It contains the subject's arrest segment information. It is a grouped field consisting of two subfields: Date of Offense and Arrest Offense Literal.

**Date of Offense**

This field contains the subject's date of offense. The value of this field is derived from the Date of Offense subfield of field 2.104 (Charge Record). The date shall be eight digits in the format, **CCYYMMDD**.

**Arrest Offense Literal**

This field contains a description of the offense charged on an arrest. The value of this field is derived from the charge literal portion of the Charge Code subfield of field 2.104 (Charge Record). Any printable 7-bit ASCII character is allowed as a special character.

**2.051 Court Segment Literal**

This field contains the court segment information. It is a grouped field consisting of three subfields: Court Disposition Date, Court Offense Literal, and Other Court Sentence Provision Literal.

**Court Disposition Date**

This field contains the date a court count was disposed of by the court. The date shall be eight digits in the format, **CCYYMMDD**.

**Court Offense Literal**

This field contains the description of an offense charged in a court count. Any printable 7-bit ASCII character is allowed as a special character.

**Other Court Sentence Provision Literal**

This field contains information on sentence provisions. Any printable 7-bit ASCII character is allowed as a special character.

**2.054 Custody or Supervisory Status Start Date**



This field contains the start date for the subject's indicated custody or supervisory status. The date shall be eight digits in the format, **CCYYMMDD**.

#### **2.055 Custody or Supervisory Status Literal**

This field contains the description of the subject's custody or supervisory status. Any printable 7-bit ASCII character is allowed as a special character.

#### **2.056 Identification Comments**

This field contains any additional identification comments. Any printable 7-bit ASCII character is allowed as a special character.

#### **2.060 Status/Error Message**

This field contains reasons, status, or error messages that are generated as a result of the processing of a transaction and will be sent back to the submitter. Any printable 7-bit ASCII character is allowed as a special character.

#### **2.067 Image Capture Equipment**

This field contains the make, model, and serial number of the equipment used to acquire images. It is a grouped field consisting of three subfields: Make, Model, and Serial Number.

##### **Make**

This field contains the make of the equipment used to acquire images. Any printable 7-bit ASCII character is allowed as a special character.

##### **Model**

This field contains the model of the equipment used to acquire images. Any printable 7-bit ASCII character is allowed as a special character.

##### **Serial Number**

This field contains the serial number of the equipment used to acquire images. Any printable 7-bit ASCII character is allowed as a special character.

#### **2.070 Request Electronic Rap Sheet**

This field indicates whether an electronic rap sheet is requested from the FBI. The valid yes/no codes are listed in Table 3-1.

#### **2.071 Action To Be Taken**

This field is used to include text answers to submission requests to indicate that a latent case will be established or to indicate recommendations for further actions in either latent or

tenprint responses. Valid special characters are commas, hyphens, ampersands, slashes, number signs, and blanks.

### 2.073 Controlling Agency Identifier (ORI)

This field indicates the originating agency's identifier (ORI). The valid agency identifiers are listed ORI picklist in the Picklists Section. The valid ORI codes will be provided by Iowa DCI upon request.

### 2.084 Amputated or Bandaged

This is a grouped field consisting of two subfields: Finger Number and Amputated or Bandaged Code.

#### Finger Number

This field contains the two digit finger number as listed in Table 3-8.

**Table 3-8. Finger Number**

Code	Description
01	Right Thumb
02	Right Index
03	Right Middle
04	Right Ring
05	Right Little
06	Left Thumb
07	Left Index
08	Left Middle
09	Left Ring
10	Left Little

#### Amputated or Bandaged Code

This field contains the two character amputation or bandaged code as listed in Table 3-9.

**Table 3-9. Amp Code**

Code	Description
XX	Amputation
UP	Unable to print (e.g., bandaged)

### 2.087 Treat as Adult

This field indicates whether a juvenile subject is to be processed as an adult. The valid yes/no codes are listed in Table 3-1.

**2.096 Request Photo Record**

This field is used to indicate a user's desire to have NGI return a Type-10 photo record if one is on file and distributable. The valid yes/no codes are listed in Table 3-1.

**2.100 Last Name**

This field contains the subject's last name. Valid special characters are hyphens and blanks.

**2.101 First Name**

This field contains the subject's first name. Valid special characters are hyphens and blanks.

**2.102 Middle Name**

This field contains the subject's middle name. Valid special characters are hyphens and blanks.

**2.104 Charge Record**

This field contains the charge information of the arrest. It is a grouped field consisting of the following subfields: Charge Code, Alternate Charge, Alternate Code, Charge Count and Date of Offense.

**Charge Code**

This field contains the charge code of the arrest. This field is entered by the operator using a picklist option with valid charge codes. The picklist information for the valid charge codes will be provided by Iowa DCI upon request. The picklist values displayed to the operator shall be sorted by statute code. A separate picklist file shall be created for the charge codes that contain only the charge code picklist information.

**Alternate Charge**

This field contains the alternate charge literal of the arrest. Any printable 7-bit ASCII character is allowed as a special character.

**Alternate Code**

This field contains the alternate charge code of the arrest. Any printable 7-bit ASCII character is allowed as a special character.

**Charge Count**

This field contains the number counts for the charge. The valid range is 1 to 99.

**Date of Offense**

This field contains the date of the offense. The date shall be eight digits in the format, **CCYYMMDD**.

### 2.108 Skin Tone

This field contains the subject's skin tone. The valid skin tone codes for this field are listed in Table 3-10.

**Table 3-10. Skin Tone Picklist**

Code	Description
ALB	Albino
BLK	Black
DRK	Dark
DBR	Dark Brown
FAR	Fair
LGT	Light
LBR	Light Brown
MED	Medium
MBR	Medium Brown
OLV	Olive
RUD	Ruddy
SAL	Sallow
YEL	Yellow

### 2.109 Suffix

This field contains the subject's suffix name. The valid suffix codes for this field are listed in Table 3-2.

### 2.110 Type of Transaction

This field contains the transaction type code. The transaction type code determines how a transaction will be processed through the workflow. This field is entered by the operator using a picklist with the valid types of transaction codes listed in Table 3-11. The type of transaction values are not all included in each profile. The profile column identifies which profile uses a particular element.

**Table 3-11. Type of Transaction Picklist**

Profile	Code	Description
Criminal (State)/Mugshot	CAR	Criminal Tenprint Submission (Answer Required)
Applicant/SOR	MAP	Miscellaneous Applicant Civil
Applicant/SOR	NFUF	Non-Federal Applicant User Fee
Applicant/SOR	SOR	Sex Offender Registrant

### 2.111 Record Type

This field is not displayed to the operator. It is a hidden field that contains the record type of the transaction. The value of this field is automatically set by the Livescan Station. The valid settings are “Criminal,” “SOR” or “Applicant” based on the workflow profile selected.

### 2.112 Livescan Identifier

This field is not displayed to the operator. It is a hidden field that contains the identifier of the originating Livescan. This field is used to indicate where to send response transactions back. The value of this field is automatically set by the originating Livescan Station.

### 2.113 Type of Applicant

The Type of Applicant field indicates the type of applicant being processed. This field is entered by the operator using a picklist with the valid types of applicants listed in Table 3-12.

**Table 3-12. Type of Applicant Picklist**

Code	Description
LawEnforcement	Law Enforcement
Racing and Gaming	Racing and Gaming
Teacher	Teacher
Civil Applicant	Civil Applicant
Sex Offender Registrant	Sex Offender Registrant
Other	Other

### 2.120 FBI Number

This field contains the subject’s FBI Number. When submitted from a Livescan, AFIS shall force the value to blank. The FBI Number shall not be printed on any FBI cards.

### 2.131 Place of Birth – City

This field contains the city where the subject was born. Any printable 7-bit ASCII character is allowed as a special character.

### 2.133 Officer Taking Fingerprints

This field contains the name of the officer taking the fingerprints. Any printable 7-bit ASCII character is allowed as a special character.

### 2.136 Scars, Marks, Tattoos

This field contains information on any scars, marks, or tattoos on the subject’s body. It is a grouped field consisting of two subfields: Scars Marks Tattoos and SMT Description. The maximum number of occurrences is 10.

**Scars Marks Tattoos**

This field contains the type or location of the scar, mark, or tattoo on the subject's body. The valid Scars, Marks, and Tattoos codes will be provided by Iowa DCI upon request.

**SMT Description**

This field contains a description of the scar, mark, or tattoo on the subject's body. Valid special characters are blanks, hyphens, and ampersands.

**2.139 Local Agency Number**

This field contains the local agency's number. The minimum field length is one character, and the maximum field length is 15 characters. Valid alpha characters are A-Z. Valid numeric characters are 0-9.

**2.153 Incident ID (Booking ID/Tracking Number)**

This field contains the Incident ID (Booking ID/Tracking Number) of the booking. The Incident ID (Tracking Number) is automatically generated for livescan entry.

The Incident ID shall have the format **xxPnnnn**, where:

**xx** is the Livescan identifier provided by the System Administrator.

**P** represents the transaction type.

V = Applicant

X = Law enforcement Applicant

Z = Local Applicant

0 (zero) = Criminal

L = Local Criminal

S = Sex Offender Registrant

T = Two Finger

B = State Only Background Check

**nnnn** represents a four-character (alphanumeric) sequence number. The least significant digit shall first increment (0-9, A-Z), followed by the next digit, until the most significant digit is incremented (e.g., 0000, 0001, ...0009, 000A, ...000Z, 0010, 0011, ...0019, 001A, ...001Z, 0020, 0021, ...0029, 0002A, ...002Z, 0030, ...00ZZ, 0100, 0101, ...0109, 010A, ...010Z, 0110, 0111, ...01ZZ, 0200, 0201, ...0209, 020A, ...020Z, 0210, ...0ZZZ, 1000, 1001, ...1009, 100A, ...100Z, 1010, 1011, ...1ZZZ, 2000, 2001, ...2009, 200A, ...200Z, 2010, ...2ZZZ, 3000, 3001, ...3009, 300A, ...300Z, 3010, 3011, ...ZZZZ).

**2.157 Person ID (State ID)**

This field contains the subject's Person ID or State ID. The minimum and maximum field length is eight characters. Valid alpha characters are A-Z. Valid numeric characters are 0-9.

**2.163 Juvenile Submission**

This field indicates that the transaction is a juvenile submission. The valid yes/no codes are listed in Table 3-1.

**2.903 Caution**

This field indicates whether to take caution with the subject. The valid yes/no codes are listed in Table 3-1.

**2.904 Residence – Street**

This field contains the street name and number of the subject's place of residence. The minimum field length is one character, and the maximum field length is 88 characters. Valid alpha characters are A-Z. Valid numeric characters are 0-9. Any printable 7-bit ASCII character is allowed as a special character.

**2.905 Residence – City**

This field contains the city of the subject's place of residence. The minimum field length is one character, and the maximum field length is 20 characters. Valid alpha characters are A-Z. Valid numeric characters are 0-9. Any printable 7-bit ASCII character is allowed as a special character.

**2.906 Residence – State**

This field contains the state of the subject's place of residence. The valid state codes for this field are listed in Table 3-13.

**Table 3-13. State Picklist**

Code	Description
AL	Alabama
AK	Alaska
AZ	Arizona
AR	Arkansas
CA	California
CO	Colorado
CT	Connecticut
DE	Delaware
DC	District of Columbia
FL	Florida
GA	Georgia
HI	Hawaii
ID	Idaho
IL	Illinois
IN	Indiana
IA	Iowa
KS	Kansas

Code	Description
KY	Kentucky
LA	Louisiana
ME	Maine
MD	Maryland
MA	Massachusetts
MI	Michigan
MN	Minnesota
MS	Mississippi
MO	Missouri
MT	Montana
NB	Nebraska
NV	Nevada
NH	New Hampshire
NJ	New Jersey
NM	New Mexico
NY	New York
NC	North Carolina
ND	North Dakota
OH	Ohio
OK	Oklahoma
OR	Oregon
PA	Pennsylvania
RI	Rhode Island
SC	South Carolina
SD	South Dakota
TN	Tennessee
TX	Texas
UT	Utah
VT	Vermont
VA	Virginia
WA	Washington
WV	West Virginia
WI	Wisconsin
WY	Wyoming
YY	Other Foreign
XX	Not Known

**2.907 Residence – Zip**

This field contains the zip code of the subject's place of residence. The minimum field length is one character, and the maximum field length is 10 characters. Valid numeric characters are 0-9. Any printable 7-bit ASCII character is allowed as a special character.

**2.911 Suicidal Tendencies**



This field indicates whether the subject has suicidal tendencies. The valid yes/no codes are listed in Table 3-1.

**2.912 Known to Assault Police**

This field indicates whether the subject is known to assault police officers. The valid yes/no codes are listed in Table 3-1.

**2.913 Known to Go Armed**

This field indicates whether the subject is known to carry weapons. The valid yes/no codes are listed in Table 3-1.

**2.914 Other Free Text**

This field contains any additional miscellaneous information. The minimum field length is one character, and the maximum field length is 50 characters. Valid alpha characters are A-Z. Valid numeric characters are 0-9. Any printable 7-bit ASCII character is allowed as a special character.

**2.915 Reply Desired**

This field indicates whether a response is desired. The valid yes/no codes are listed in Table 3-1.

**2.916 Print Card at Central Site**

This field indicates whether the criminal fingerprint card is to be printed at the central site for criminal livescan submissions. If this field is set to "Yes," printing will occur at the central site. If this field is set to "No" or is not included in the submission, printing will not occur at the central site. The valid yes/no codes are listed in Table 3-1.

**2.917 Disclaimer Message**

The disclaimer message is used in the Local AFIS Search Results (SRU) in response to the Two Finger Search (2FS) and the ID Verification (IDVERIFY) search request transactions. The disclaimer message will indicate that the search results are determined by the system without operator verification. IADCI will provide the content of the disclaimer message.

**2.921 Armed Forces Number**

This field contains the armed forces number of the subject. The minimum field length is one character, and the maximum field length is 15 characters. Valid alpha characters are A-Z. Valid numeric characters are 0-9. Any printable 7-bit ASCII character is allowed as a special character.

**2.922 Your Number**

This field contains the originating agency's case number for applicants. The minimum field length is one character, and the maximum field length is 15 characters. Valid alpha characters

are A-Z. Valid numeric characters are 0-9. Any printable 7-bit ASCII character is allowed as a special character.

## **2.999 Local Charge Records**

This field contains local charge information. It is a grouped field consisting of the following subfields: Local Charge, Local Code, Charge Count and Date of Offense.

### **Local Charge**

This field contains the local charge of the arrest entered as free text. Any printable 7-bit ASCII character is allowed as a special character.

### **Local Code**

This field contains the local charge code of the arrest entered as free text. Any printable 7-bit ASCII character is allowed as a special character.

### **Charge Count**

This field contains the number counts for the charge. The valid range is 1 to 99.

### **Date of Offense**

This field contains the date of the offense. The date shall be eight digits in the format, **CCYYMMDD**.



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### 3.3 Type-8 Signatures

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This section defines the Type-8 fields.

**LEN Logical record length**

This mandatory four-byte binary field shall occupy bytes one through four. It shall contain the length of the logical record expressed as the total number of bytes, including every byte of all eight fields contained in the record.

**IDC Image designation character**

This mandatory one-byte binary field shall occupy the fifth byte of the Type-8 record. It shall be used to identify the image data contained in the Type-8 record. The IDC contained in this field shall be a binary representation of the IDC found in the file content (CNT) field of the Type-1 record.

**SIG Signature type**

This mandatory one-byte binary field shall occupy the sixth byte of the Type-8 record. It shall contain a binary '0' for the signature image of the subject, or a binary '1' for the signature image of the official processing the transaction.

**SRT Signature representation type**

This mandatory one-byte binary field shall occupy the seventh byte of the Type-8 record. Its value shall be a binary '0' if the image is scanned and not compressed, a binary '1' if the image is scanned and compressed, and the binary equivalent of '2' if the image is vector data.

**ISR Image scanning resolution**

This mandatory one-byte binary field shall occupy the eighth byte of a Type-8 record. It shall contain a binary '0' if the minimum scanning resolution is used and a binary '1' if the native scanning resolution is used. A binary value of '0' shall also be used if the image is vector data.

**HLL Horizontal line length**

This mandatory two-byte binary field shall occupy the ninth and tenth bytes of the Type-8 record. For scanned signature data, this field shall be used to specify the number of pixels contained on a single horizontal line of the transmitted signature image. For vectored signature data, both bytes shall contain the binary value of '0'.

**VLL Vertical line length**

This mandatory two-byte binary field shall occupy the eleventh and twelfth bytes of the Type-8 record. For scanned signature data, this field shall be used to specify the number of horizontal lines contained in the transmitted signature image. For vectored signature data, both bytes shall contain the binary value of '0'.

### Signature image data

This field shall contain uncompressed scanned image signature data, compressed scanned image signature data, or vectored image signature data. The entry contained in the SRT field shall indicate which form of the signature data is present.

**Uncompressed scanned image data** - If the SRT field contains the binary value of '0', then this field shall contain the uncompressed scanned binary image data for the signature. In uncompressed mode, the data shall be packed at eight pixels per byte.

**Compressed scanned image data** - If the SRT field contains the binary value of '1', then this field shall contain the scanned binary image data for the signature in compressed form using the ANSI/EIA-538-1988 facsimile compression algorithm.

**Vectored image data** - If the SRT field contains the binary equivalent of '2', then this field shall contain a list of vectors describing the pen position and pen pressure of line segments within the signature. Each vector shall consist of five bytes. The first two bytes of each vector shall contain the unsigned binary X coordinate of the pen position with the high order byte containing the most significant bits. The next two bytes shall contain the unsigned Y coordinate using the same convention to denote the most significant bits. Both the X and Y coordinates shall be expressed in units of .0254 mm (.001 inches) referenced from the bottom leftmost corner of the signature. Positive values of X shall increase from left-to-right and positive values of Y shall increase from bottom-to-top. An unsigned binary number between '0' and '255' contained in the fifth byte shall represent the pen pressure. This shall be a constant pressure until the next vector becomes active. A binary value or pressure of '0' shall represent a "pen-up" (or no pressure) condition. The binary value of '1' shall represent the least recordable pressure for a particular device, while the binary equivalent of '254' shall represent the maximum recordable pressure for that device. To denote the end of the vector list the binary equivalent of '255' shall be inserted in this entry.

## 3.4 Type-10 Photos

This section defines the Type-10 fields.

### 10.001 LEN Logical Record Length

This mandatory ASCII field shall contain the total count of the number of bytes in this Type-10 logical record. Field 10.001 shall begin with "10.001:" followed by the length of the record including every character of every field contained in the record and the information separators. The number of characters added to the record by the LEN field itself shall be included in calculating the value of LEN.

### 10.002 IDC Image Designation Character

The Image Designation Character shall be a sequentially assigned positive integer starting from zero and increasing by one for each finger position, image, or Type-10 record present. Each IDC value matches a value in the Content (CNT) field of the Type-1 message header.

**10.003 IMT Image Type**

This mandatory ASCII field is used to indicate the type of image contained in this record. It shall contain "FACE", to indicate a face image. The content of this field shall conform to the requirements set forth by the agency to which the transmission is being sent.

**10.004 SRC Source Agency/ORI**

This mandatory ASCII field shall contain the identification of the administration or organization that originally captured the facial image contained in the record. Normally, the ORI of the agency that captured the image will be contained in this field. The size and data content of this field shall be denied by the user and be in accordance with the receiving agency.

**10.005 PHT Photo Date**

This mandatory ASCII field shall contain the date that the facial image contained in the record was captured. The date shall appear as eight digits in the format CCYYMMDD.

**10.006 HLL Horizontal Line Length**

This mandatory ASCII field shall contain the number of pixels contained on a single horizontal line of the transmitted image.

**10.007 VLL Vertical Line Length**

This mandatory ASCII field shall contain the number of horizontal lines contained in the transmitted image.

**10.008 SCL Scale Units**

This mandatory ASCII field shall specify the units used to describe the image sampling frequency (pixels density). A "1" in this field indicates pixels per inch. A "2" indicates pixels per centimeter. A "0" in this field indicates no scale is given, for this case, the quotient of HPS/VPS give the pixel aspect ratio.

**10.009 HPS Horizontal Pixel Scale**

This mandatory ASCII field shall specify the pixel density used in the horizontal direction providing the SLC contains a "1" or a "2". Otherwise, it indicates the horizontal component of the pixel aspect ratio.

**10.010 VPS Vertical Pixel Scale**

This mandatory ASCII field shall specify the pixel density used in the vertical direction providing the SLC contains a "1" or a "2". Otherwise, it indicates the vertical component of the pixel aspect ratio.

**10.011 CGA Compression Algorithm**

This mandatory ASCII field shall specify the algorithm used to compress the color or gray scale image. An entry of "NONE" in the field indicates that the data contained in this record is uncompressed.

**10.012 CSP Colorspace**

This mandatory ASCII field shall contain the color space used to exchange the image. For compressed images, the preferred colorspace using baseline JPEG and JFIF is YcbCr2 to be coded as "YCC". An entry

of "GRAY" shall be used for all gray scale images. For uncompressed color images containing non-interleaved red, green, and blue pixels in that order, this field shall contain "RGB".

**10.999 DAT Image Data**

This field shall contain all of the gray scale or color data from a face image. It shall begin with the ASCII identifier "10.999", and be followed by image data in a binary representation.

## 3.5 Type-14 1,000ppi Fingerprints

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This section defines the Type-14 fields.

**14.001 LEN Logical Record Length**

This mandatory ASCII field shall contain the total count of the number of bytes in the Type-14 logical record. Field 14.001 shall specify the length of the record, including every character of every field contained in the record, and the information separators.

**14.002 IDC Image Designation Character**

This mandatory ASCII field shall be used to identify the tenprint-fingerprint image contained in the record. This IDC shall match the IDC found in the file content (CNT) field of the Type-1 record.

**14.003 IMP Impression Type**

This mandatory field shall indicate the manner by which the tenprint image information was obtained. The value shall be 0 (livescan plain) or 1 (livescan rolled).

**14.004 SRC Source Agency/ORI**

This mandatory field shall contain the identification of the administration or organization that originally captured the tenprint image contained in the record. Normally, the ORI of the agency that captured the image will be contained in this field. The data content of this field shall be defined by the user and be in accordance with the receiving agency.

**14.005 FCD Fingerprint Capture Date**

This mandatory field shall contain the date that the fingerprint image contained in the record was captured. The date shall appear as eight digits in the format CCYYMMDD.

**14.006 HLL Horizontal Line Length**

This mandatory field shall contain the number of pixels contained on a single horizontal line of the transmitted image.

**14.007 VLL Vertical Line Length**

This mandatory ASCII field shall contain the number of horizontal lines contained in the transmitted image.

**14.008 SLC Scale Units**

This mandatory field shall specify the units used to describe the image sampling frequency (pixel density). A "1" in this field indicates pixels per inch; a "2" indicates pixels per centimeter. A "0" in this field indicates no scale is given. For this case, the quotient of HPS/VPS gives the pixel aspect ratio.

#### 14.009 THPS Transmitted Horizontal Pixel Scale

This mandatory field shall specify the integer pixel density used in the horizontal direction of the image if the SLC contains a "1" or a "2." Otherwise, if the SLC contains a "0", it indicates the horizontal component of the pixel aspect ratio.

#### 14.010 TVPS Transmitted Vertical Pixel Scale

This mandatory field shall specify the integer pixel density used in the vertical direction of the image if the SLC contains a "1" or "2." Otherwise, if SLC contains a "0", it indicates the vertical component of the pixel aspect ratio.

#### 14.011 CGA Compression Algorithm

This mandatory ASCII field shall specify the algorithm used to compress grayscale images. An entry of "NONE" in this field indicates that the data contained in this record are uncompressed. For those images that are to be compressed, this field shall contain "WSQ20" the preferred method for the compression of tenprint-fingerprint images of 500ppi. For those images at 1000ppi, JPEG2000 Lossless is the preferred method of compression.

#### 14.012 BPX Bits per Pixel

This mandatory ASCII field shall contain the number of bits used to represent a pixel. This field shall contain an entry of "8" for normal grayscale values of "0" to "255". Any entry in this field greater than "8" shall represent a grayscale pixel with increased proportion.

#### 14.013 FGP Fingerprint Position

This mandatory tagged field shall contain the position code that matches the image position. The decimal code number corresponding to the known finger position shall be taken from the following table.

Finger Position	Code
Right thumb	1
Right index finger	2
Right middle finger	3
Right ring finger	4
Right little finger	5
Left thumb	6
Left index finger	7
Left middle finger	8
Left ring finger	9
Left little finger	10

Finger Position	Code
Plain right thumb	11
Plain left thumb	12
Plain right four fingers	13
Plain left four fingers	14

#### 14.016 THPS Scanned Horizontal Pixel Scale

This optional ASCII field shall specify the horizontal pixel density used for the scanning of the original impression providing the SLC field contains a "1" or "2." Otherwise, it indicates the horizontal component of the pixel aspect ratio. This field is used if the transmission pixel scale differs from the original image scale, as listed in Transmitted Horizontal Pixel Scale (HPS).

#### 14.017 TVPS Scanned Vertical Pixel Scale

This optional ASCII field shall specify the vertical pixel density used for the scanning of the original impression providing the SLC field contains a "1" or a "2." Otherwise, it indicates the vertical component of the pixel aspect ratio. This field is used if the transmission pixel scale differs from the original image scale, as listed in Transmitted Vertical Pixel Scale (VPS).

#### 14.018 AMP Amputated or Bandaged

This optional ASCII field shall specify if one or more fingers are amputated or bandaged. This field shall consist of one subfield for each amputated or missing finger. Each subfield shall contain two information items separated by the <US> separator.

This field consists of the following subfields:

- Finger Number. The following is a list of allowable codes for the finger number.

Finger Position	Code
Right thumb	1
Right index finger	2
Right middle finger	3
Right ring finger	4
Right little finger	5
Left thumb	6
Left index finger	7
Left middle finger	8
Left ring finger	9
Left little finger	10
Plain right thumb	11
Plain left thumb	12
Plain right four fingers	13
Plain left four fingers	14

- Amputated or bandaged code. The following is a list of allowable codes for the AMPCD:  
XX (Amputation)  
UP (Unable to print)

**14.020 COM Comment**

This optional field may be used to insert comments or other text information with the attached image data.

**14.999 DAT Image Data**

This field shall contain all of the data from a captured tenprint image. It shall always be assigned field number 999 and must be the last physical field in the record. For example, 14.999: is followed by image data in a binary representation. Each pixel of uncompressed grayscale data shall be quantized to eight bits (256 gray-levels) contained in a single byte. If compression is used, the pixel data shall be compressed in accordance with the compression technique specified in the CGA field.

## 3.6 Type-15 Palmprints

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This section defines the Type-15 fields.

**15.001 LEN Logical Record Length**

This mandatory ASCII field shall contain the total count of the number of bytes in the Type-15 logical record. Field 15.001 shall specify the length of the record including every character of every field contained in the record and the information separators. The "GS" character shall separate the length code of Field 15.001 from the next field.

**15.002 IDC Image Designation Character**

This mandatory ASCII field shall be used to identify the palmprint image contained in the record. This IDC shall match the IDC found in the file content field of the Type-1 record.

**15.003 IMP Impression Type**

This mandatory ASCII field indicates the manner by which the palmprint image was obtained, where: 10 = Live-scan Palm.

**15.004 SRC Source Agency/ORI**

This mandatory ASCII field contains the identifier of the agency that originally captured the palmprint image.

**15.005 PCD Palmprint Capture Date**

This mandatory ASCII field shall contain the date that the palmprint image was captured. The date shall appear as eight digits in the format, YYYYMMDD.

**15.006 HLL Horizontal Line Length**



This mandatory field contains the number of pixels contained on a single horizontal line.

**15.007 VLL Vertical Line Length**

This mandatory field contains the number of horizontal lines contained in the transmitted image.

**15.008 SLC Scale Units**

This field specifies the units used to describe the image sampling frequency (pixel density). A "1" in this field indicates pixels per inch. A "2" indicates pixels per centimeter, and a "0" indicates no scale is given.

**15.009 HPS Horizontal Pixel Scale**

This field specifies the integer pixel density used in the horizontal direction. For example, a value of 500 means 500 pixels per inch.

**15.010 VPS Vertical Pixel Scale**

This mandatory ASCII field shall specify the pixel density used in the vertical direction providing the SLC contains a "1" or a "2". Otherwise, it indicates the vertical component of the pixel aspect ratio. For example, a value of 500 means 500 pixels per inch.

**15.011 CGA Compression Algorithm**

This mandatory ASCII field shall specify the algorithm used to compress grayscale images. An entry of "NONE" in this field indicates that the data contained in this record is uncompressed. For those images that are to be compressed, this field shall contain the preferred method for the compression of tenprint fingerprint images. For grayscale images, the FBI maintains a registry of acceptable compression techniques and corresponding codes that may be used as they become available.

**15.012 BPX Bits per Pixel**

This mandatory ASCII field shall contain the number of bits used to represent a pixel. This field shall contain an entry of "8" for normal grayscale values of "0" to "255". Any entry in this field greater than or less than "8" shall represent a grayscale pixel with increased or decreased precision respectively. Binary data shall be represented by an ASCII "1".

**15.013 PLP Palmprint Position**

This mandatory tagged-field shall contain palmprint position that matches the palmprint image. The decimal code number corresponding to the known or most probable palmprint position shall be taken from the following table and entered as a two-character ASCII subfield. The following table also lists the maximum image area that can be transmitted for each of the two palmprint positions.

Palm Position	Code	Maximum Image Area mm <sup>2</sup>
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Palm Position	Code	Maximum Image Area mm <sup>2</sup>
Right Writer's Palm	22	5645
Left Writer's Palm	24	5645
Right Lower Palm	25	19516
Right Upper Palm	26	19516
Left Lower Palm	27	19516
Left Upper Palm	28	19516

**15.020 COM Comment**

This optional field may contain comments or other ASCII text information associated with the palmprint image data.

**15.999 DAT Image Data**

This field shall contain all of the grayscale or binary data from a captured unspecified image. It shall always be assigned field number 999 and must be the last physical field in the record. For example, "15.999:" is followed by image data in a binary representation.