INSTRUCTIONS TO LIQUOR LICENSE APPLICANTS
REGARDING THE CRIMINAL HISTORY RECORD CLEARANCE

I. LEGAL REQUIREMENTS:
Section 281-45, Hawaii Revised Statutes, provides that "No license shall be issued under this chapter:

(1) To any person who has been convicted of a felony and not pardoned (except that the Commission may grant a license under this chapter to a corporation that has been convicted of a felony where the Commission finds that the organization's officers and shareholders of twenty-five percent or more of outstanding stock are fit and proper persons to have a license), or to any other person not deemed by the Commission to be a fit and proper person to have a license;

(2) To a corporation, the officers and directors of which, or any of them, would be disqualified under paragraph (1) of this section from obtaining the license individually, or a stockholder of which, owning or controlling twenty-five percent or more of the outstanding capital stock would be disqualified under that paragraph from obtaining the license individually."

II. EACH OF THE PRINCIPALS OF THE APPLICANT WHO ARE NATURAL PERSONS:

(1) The above must complete the "Request for a Criminal History Record Clearance for a Liquor License" form, copies of which are in the Liquor License Application package.

(2) FOR CLUB LIQUOR LICENSES ONLY: If you are presenting this form along with a new application or a change in Corporate Officer/Director or LLC Member/Manager/Partner a $30.00 processing fee must also be submitted.

   a. Acceptable forms of payment are a certified check or money order, payable to: "Hawaii Criminal Justice Data Center" for each individual. Submit separate checks for each individual.

   b. NO PERSONAL CHECKS OR CASH ACCEPTED FOR A CRIMINAL HISTORY RECORD CLEARANCE FOR LIQUOR LICENSE.

(3) The form and payment must be given to the Honolulu Liquor Commission.
REQUEST FOR A CRIMINAL HISTORY RECORD CLEARANCE FOR LIQUOR LICENSE

(Please PRINT in black ink or type all requested information in Part I and Part II, sign, and return to Honolulu Liquor Commission)

PART I – APPLICANT DATA:

Last Name: __________________________ First Name: __________________________ Middle Name: __________________________

Alias(es) / Former Name(s) / Maiden Name: ____________________________________________________________

Social Security No.: __________________________ Date of Birth: __________________________ Sex: ☐ M ☐ F

Race: __________________________ Height: _______ Weight: _______ Color of Eyes: _______ Color Hair: _______  

Business Name: ___________________________________ Trade Name/DBA: __________________________

Place of Birth: __________________________ Citizenship: __________________________

PART II – DISCLOSURE OF CRIMINAL HISTORY:

Have you ever been convicted of any violation of law (felony/misdemeanor) other than a minor Traffic violation? ☐ Yes ☐ No

If yes, please explain what you were convicted of, when you were convicted, and the sentence/penalty. Also explain the circumstances of the offense.

_________________________________________________________________________________________________

_________________________________________________________________________________________________

_________________________________________________________________________________________________

I certify under the penalty of perjury that the above statements are true, complete and correct to the best of my knowledge and belief. I authorize the Honolulu Liquor Commission to submit a set of my fingerprints to the Hawaii Criminal Justice Data Center (HCJDC) and the Federal Bureau of Investigation (FBI) for the purpose of accessing and reviewing the state and national criminal history records that may pertain to me, and I waive the right to hold those agencies liable in determining my qualifications for a liquor license. I understand that my fingerprints will be retained by the HCJDC and the FBI for all purposes and uses authorized for fingerprint submissions, which may include participation in the state and national rap back program.

I understand that I have the right to challenge the accuracy and completeness of the results of my fingerprint-based criminal history record check. Should the Honolulu Liquor Commission policy not allow a copy of the results to be given to me, I may obtain a copy of my criminal history record by submitting fingerprints and fees directly to the HCJDC and/or FBI. I understand that the procedures for obtaining a change, correction, or updating of my criminal history record are set forth in Title 28, Code of Federal Regulations, Section 16.34.

I acknowledge that I have read, understand, and agree to the FBI Privacy Act Statement.

Applicant’s Signature: __________________________ Date: __________________________

PART III – FILE SEARCH DATA – TO BE COMPLETED BY DATA CENTER:

HCJDC Administrator: __________________________ Date: __________________________
FBI PRIVACY ACT STATEMENT

Authority: The FBI’s acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

Social Security Account Number (SSAN). Your SSAN is needed to keep records accurate because other people may have the same name and birth date. Pursuant to the Federal Privacy Act of 1974 (5 USC 552a), the requesting agency is responsible for informing you whether disclosure is mandatory or voluntary, by what statutory or other authority your SSAN is solicited, and what uses will be made of it. Executive Order 9397 also asks Federal agencies to use this number to help identify individuals in agency records.

Principal Purpose: Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI’s Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.

Routine Uses: During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI’s Blanket Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental or authorized non-governmental agencies responsible for employment, contracting licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

Additional Information: The requesting agency and/or the agency conducting the application-investigation will provide you additional information pertinent to the specific circumstances of this application, which may include identification of other authorities, purposes, uses, and consequences of not providing requested information. In addition, any such agency in the Federal Executive Branch has also published notice in the Federal Register describing any systems(s) of records in which that agency may also maintain your records, including the authorities, purposes, and routine uses for the system(s).