



**SOUTH AFRICAN POLICE SERVICE**

**ENQUIRY**

TO BE COMPLETED IN BLOCK LETTERS

Full name and surname .....					<b>OFFICE USE ONLY</b>																							
Identity number <table border="1" style="display: inline-table; border-collapse: collapse; width: 300px; height: 20px;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>																									FIMS Enq. No. .... / .....			
Town and country of birth .....					Barcode No. ....																							
Address .....					Received		Verify																					
Date of birth..... Race: <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>B</td><td>C</td><td>I</td><td>W</td></tr></table> Gender <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>F</td></tr></table>					B	C	I	W	M	F	FIMS		Validate															
B	C	I	W																									
M	F																											
Have you ever been convicted of any offence? If so, state place, date and sentence: ..... .....					<i>Signature of applicant</i>																							
I certify that the above applicant's signature was placed on this form in my presence and his/her fingerprints taken by me.  <p style="text-align: center;">..... <i>Signature of official responsible</i></p>																												
Initials and surname..... Designation.....																												
Business address ..... (Street address)																												
Date ..... Place.....																												
LEFT THUMB		<i>Reason for enquiry:</i> ..... ..... .....					RIGHT THUMB																					
Fold																												
<b>Thumb</b>		<b>Forefinger</b>		<b>Middle finger</b>		<b>Ring finger</b>		<b>Little finger</b>																				
1 RIGHT HAND		2		3		4		5 RIGHT HAND																				
Fold																												
6 LEFT HAND		7		8		9		10 LEFT HAND																				
Fold																												
<b>Left hand</b> (Plain impressions of four fingers taken simultaneously)					<b>Right hand</b> (Plain impressions of four fingers taken simultaneously)																							