

**PROBATE COURT OF LORAIN COUNTY, OHIO
JUDGE JAMES T. WALTHER**

WebCheck is an electronic fingerprint background check and is used by agencies for a more comprehensive background check. This check is an actual criminal history background check. Individuals must appear in person and must bring a photo ID, preferably an Ohio driver's license with their date of birth.

There are three different WebCheck transactions available, dependent on the need of the agency requesting the check. The requesting agency must specify which checks(s) are needed and where the results are to go. The fees for the checks and their contents are listed below.

- BCI check - \$27.00 – This check covers only criminal history information in the State of Ohio. A BCI check can be conducted on anyone who requests it.
- FBI check - \$30.00 – This check covers criminal history information nationwide. An FBI check can only be conducted when State law requires the FBI check.
- BCI/FBI check - \$57.00 – This combination of checks may be required by the requestor.

Payment accepted – Money orders only. **NO CASH**

Hours – Monday, Wednesday, Friday, & Saturday 8:00 am to 6:00 pm

For more information concerning WebCheck you can visit the Ohio Attorney General's website at <http://www.ohioattorneygeneral.gov/Services/Business/WebCheck>.

**LORAIN COUNTY SHERIFF'S OFFICE
RECORDS DIVISION
9896 MURRAY RIDGE RD.
ELYRIA, OH 44035
(440)329-3703**

Request for a Background Check via Electronic Fingerprinting

BCI **FBI** **BCI & FBI**
(STATE OF OH) (REMAINING 49 STATES) (ALL 50 STATES)
(DOES NOT INCLUDE OH)

Personal Information (please print):

Name: _____

Date of Birth: _____ SSN: _____

Address: _____

City/State/Zip: _____

Phone #: (_____) _____

Reason for Background Check : COURT APPOINTED GUARDIAN FOR INCOMPETENCY OR MINOR

Name & Address for results to be mailed to (please print):

Judge James T. Walther
Lorain County Probate Court
225 Court Street
Elyria, Ohio 44035

Direct Copy (circle only one):

None

*OHIO DEPT OF EDUCATION

*OHIO BOARD OF NURSING

*CHILD CARE CTR-TYPE A, ODJFS

*DIETETIC BOARD

*RESPIRATORY CARE BOARD

*Permitted to ADD MAIL TO COPY

I certify that the personal identifiers provided on this form are accurate and I voluntarily and knowingly authorize the Web Check agency (3CE111 – Lorain County Sheriff) to submit information to the Ohio Bureau of Criminal Identification and Investigation (BCI&I) to conduct a criminal records check for information relating to me. I voluntarily and knowingly authorize BCI&I to disseminate criminal arrest, conviction and juvenile delinquency adjudication records to the Web Check provider or agency I have designated to receive this information. I voluntarily and knowingly release and discharge the Ohio Attorney General's Office, BCI&I and their employees from all claims and liability related to this authorized criminal record review and dissemination. This authorization and waiver is valid for one year from the date this background check was conducted.

By signing this form the applicant acknowledges that all information on this form is accurate. Any mistakes or errors on this form are the responsibility of the applicant.

Applicant's Name (please print) _____

Applicant's Signature _____ (Date) _____

Parent/Guardian Name (please print) (Minor Applicants Only) _____

Parent/Guardian Signature (Minor Applicants Only) _____