



ELECTRONIC RECORDING DELIVERY SYSTEM (ERDS) APPLICATION FOR CERTIFIED VENDOR OF ERDS SOFTWARE CERTIFICATION

TYPE OR PRINT (IN INK) ALL INFORMATION REQUESTED ON THE APPLICATION FORM. SIGNATURE MUST BE ORIGINAL.

TYPE OF APPLICATION (Check one box only)

- INITIAL RENEWAL

SECTION A - Vendor Information

APPLICANT NAME		DRIVER LICENSE #	DATE OF BIRTH	ERDS CERTIFICATE # (Required for renewal)	
COMPANY NAME (if any)					
ADDRESS		CITY		STATE	ZIP CODE
TELEPHONE	FAX	E-MAIL			
EMPLOYER (if any)		E-MAIL		TELEPHONE	FAX
ADDRESS		CITY		STATE	ZIP CODE

SECTION B - Vendor References or Service Agreements

SUBMIT WITH APPLICATION

A. Reference(s) for Certified Vendor of ERDS Software Certification form (ERDS 0009), providing three best references within the last five years for software products or development of equivalent technology, complexity, and size of an ERDS. At least one reference shall be for a project using document imaging technology.

OR

B. A copy of Service Agreement(s). Operated as a vendor with a valid California Multiple Award Schedule (CMAS), General Services Agreement (GSA), or Master Services Agreement (MSA). The CMAS, GSA, or MSA shall include one or more of the following consulting service categories:

<ul style="list-style-type: none"> • Application Development • IT Project Planning • IT System Implementation • Software Development • System Design • System Integration 	<ul style="list-style-type: none"> • IT Acquisition Support • IT Strategic Planning • Migration Planning • System Analysis • System Development • IT Project Management
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SECTION C - Application Check List

CHECK BOX IF COPY IS ATTACHED

INITIAL APPLICATION

Reference(s) for Certified Vendor of ERDS Software form (ERDS 0009)
CMAS, GSA, or MSA Agreement(s)

Proof of fingerprint submission

Non-refundable certification fee

RENEWAL APPLICATION

Reference(s) for Certified Vendor of ERDS Software form (ERDS 0009)
CMAS, GSA, or MSA Agreement(s)

Non-refundable renewal certification fee



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APPLICANT NAME: _____

SECTION D - Terms and Conditions

I declare under penalty of perjury under the laws of the State of California all the foregoing information and all information submitted with this application is true, correct, and complete, and that a false or dishonest answer to any questions shall be grounds for denial or subsequent termination of certification.

In addition, I attest that the ERDS software, at the time of development, will meet all of the audit and testing requirements contained in the California Code of Regulations, Title 11, Chapter 18, Articles 1 - 9. I acknowledge that the ERDS Program's issuance of the Certified Vendor of ERDS Software Certificate shall include a disclaimer stating that the software is not being approved as to its ability to serve/function in an ERDS operational environment nor that it will meet all County Recorder's requirements, only that the vendor has stated that it will meet all of the audit and testing requirements.

_____	_____	<div style="border: 1px solid black; width: 100%; height: 100%;"></div>
Applicant Signature	Print Name	Date

APPLICANT SUBMISSION

The information on this application and all documentation becomes the property of the Department of Justice and will be used by authorized personnel.

<p>Mail to: California Department of Justice Electronic Recording Delivery System Program P.O. Box 160968 Sacramento, CA 95816-0968</p> <p>Phone: (916) 210-4237 E-mail: ERDS@doj.ca.gov</p>	<p style="text-align: center; margin: 0;">DOJ USE ONLY</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Cert # _____</td> <td style="width: 50%;">Tracking # _____</td> </tr> <tr> <td>Date Rec'd _____</td> <td>HDC Date _____</td> </tr> <tr> <td>Response Date _____</td> <td>Rev. By _____</td> </tr> <tr> <td>Analyst _____</td> <td style="text-align: right;"> <input type="checkbox"/> Approved <input type="checkbox"/> Denied </td> </tr> </table>	Cert # _____	Tracking # _____	Date Rec'd _____	HDC Date _____	Response Date _____	Rev. By _____	Analyst _____	<input type="checkbox"/> Approved <input type="checkbox"/> Denied
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Privacy Notice

As Required by Civil Code § 1798.17

Collection and Use of Personal Information. The California Justice Information Services (CJIS) Division in the Department of Justice collects the information requested on this form as authorized by Government Code section 27392(b) and California Code of Regulations Title 11, Division 1, Chapter 18, Article 8, section 999.203. The CJIS Division uses this information for the purpose of completing fingerprint criminal history record checks and/or approving/certifying individuals requesting approval for Certified Vendor of ERDS software. In addition, any personal information collected by state agencies is subject to the limitations in the Information Practices Act and state policy. The Department of Justice's general privacy policy is available at: <http://oag.ca.gov/privacy-policy>.

Providing Personal Information. All the personal information requested in the form must be provided. Failure to provide the requested information will result in denial of the request, although a denial shall not prohibit the submission of an application at a later date.

Access to Your Information. You may review the records maintained by the CJIS Division in the Department of Justice that contain your personal information, as permitted by the Information Practices Act. See below for contact information.

Possible Disclosure of Personal Information. In order to complete fingerprint criminal history record checks and/or approve/certify individuals requesting to obtain approval for Certified Vendor of ERDS software, we may need to share the information you give us with other government agencies. Information provided on this form will be disclosed to the public via the DOJ/ERDS web site.

The information you provide may also be disclosed in the following circumstances:

- With other persons or agencies where necessary to perform their legal duties, and their use of your information is compatible and complies with state law, such as for investigations or for licensing, certification, or regulatory purposes;
- To another government agency as required by state or federal law.

Contact Information. For questions about this notice or access to your records, you may contact the Electronic Recording Delivery System Program manager via telephone at (916) 210-4237, e-mail at erds@doj.ca.gov, or by mail at:

California Department of Justice
Electronic Recording Delivery System Program
P.O. Box 160968
Sacramento, CA 95816-0968