



## ELECTRONIC RECORDING DELIVERY SYSTEM (ERDS) APPLICATION FOR SUB-COUNTY SYSTEM 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 Application                       Substantive Modification Application

**SECTION A - Sub-County Recorder**

SUB-COUNTY		SUB-COUNTY RECORDER NAME		
ADDRESS		CITY	STATE	ZIP CODE
TELEPHONE	FAX	E-MAIL		
CONTACT NAME (if any)				
ADDRESS		CITY	STATE	ZIP CODE
TELEPHONE	FAX	E-MAIL		

**SECTION B - Application Check List**

*The following documentation shall be submitted in conjunction with the submission of this application to the Lead County.*

CHECK BOX IF COPY IS ATTACHED:

Sub-County Resolution

Proof of fingerprint submission for individuals designated a secure access role

List of all users with secure access and/or authorized access

Statement of Understanding (ERDS 0011)

I declare under penalty of perjury under the laws of the State of California that all the information contained herein is true and correct.

Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

**APPLICATION SUBMISSION**

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

**This application and all required documentation shall be submitted to the Lead County. The Lead County is responsible for the submission to the ERDS Program.**

<p>Mail to: California Department of Justice Electronic Recording Delivery System Program P.O. Box 160526 Sacramento, CA 95816-0526</p> <p>Phone: (916) 227-8907</p>	<p><b>DOJ USE ONLY</b></p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td>Cert # _____</td> <td>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><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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