

## Business Request Form — Private Investigators and Private Guards

<b>Full Legal Name of Applicant :</b>	<b>Date of Birth (yyyy/mm/dd)</b>	<b>License #</b>	<b>License Type:</b>
<b>Name of Business:</b>		<b>Date of Request:</b>	
<b>Request</b>	<b>Reason</b>	<b>Supporting Documentation Required</b>	
<b>Authorization for:</b> <input type="checkbox"/> Restraining Device <input type="checkbox"/> Baton <input type="checkbox"/> Uniform Exemption (Permitted only for retail) <input type="checkbox"/> Guard Dog Handler		<input type="checkbox"/> Proof of Training <input type="checkbox"/> Proof of Experience (guard dog handler only)  <input type="checkbox"/> Baton Type: _____	
<b>License Upgrade to Include:</b> <input type="checkbox"/> Private Guard <input type="checkbox"/> Private Investigator		<input type="checkbox"/> Details of experience, training received, or to be provided, must support request for private investigator upgrades	
<input type="checkbox"/> <b>Replacement of Lost /Stolen License</b>  <span style="color:red">Please note: you cannot work without having a valid license on your person.</span>		<input type="checkbox"/> Date license was lost or stolen: _____  <input type="checkbox"/> Was it reported to a police agency? _____ <input type="checkbox"/> Date reported: _____	
<p><b>Declaration</b></p> <p>By signing this form:</p> <ul style="list-style-type: none"> <li>• I understand I cannot provide private guard, armed guard, or private investigator services without being in possession of my license.</li> <li>• I understand that I cannot carry a baton or restraining device, or use a guard dog until the endorsement is stated on my license and I am in possession of the license.</li> <li>• I understand that I cannot work as a private guard in a retail environment without a uniform until a uniform exemption is stated on my license and I am in possession of the license.</li> <li>• I understand that if I am requesting an upgrade to my license to perform either private guard or private investigator services, I cannot provide the upgraded service until the request is approved and I am in possession of the upgraded license.</li> <li>• I agree that I will return my old license to my employer or the Security Programs Office within 10 days of receiving my new license.</li> <li>• I agree that if my lost or stolen license is located I will immediately return it to my employer or the Security Programs Office.</li> </ul>			
Signature of Applicant: _____		Print name: _____	
Date of signature: _____			
Signature of Authorized Business Representative: _____		Print name: _____	
Title: _____		Date of signature: _____	
<p><b>Please note:</b></p> <p><span style="color:red">-All relevant fields must be completed.</span></p> <p><span style="color:red">-If required supporting documentation is not attached, the form will be returned as incomplete.</span></p>			