

**Vermont Secretary of State
Office of Professional Regulation
VERMONT BOARD OF PRIVATE INVESTIGATIVE AND SECURITY SERVICES
National Life Building, North, FL 2
Montpelier, VT 05620-3402
Ph: (802) 828-2837; Fax: (802) 828-2465
E-Mail: pskinner@sec.state.vt.us
Web Site: www.vtprofessionals.org**

INSTRUCTION SHEET FOR INVESTIGATIVE OR SECURITY AGENCY

You may contact **Patty Skinner, Administrative Assistant**, at (802) 828-2837 or via E-mail: pskinner@sec.state.vt.us if you have questions or if you need additional information.

This application applies to an agency (entity) offering investigative and/or security services that has or will have employees or registrants. This application pertains only to the agency (entity) with employees. A separate application is available for a sole proprietor.

The agency must designate a qualifying agent to be the responsible person for the company. The qualifying agent for a Private Investigative or Security Guard agency shall hold a license in the same category of licensure.

Note: A separate application must be completed for an individual to become licensed to serve as a qualifying agent of an agency with employees/registrants or to practice independently (sole proprietor). Individuals who have met the experience requirement and successfully passed the examination on Vermont Law may qualify for licensure (Title 26 V.S.A. § 3174).

Owners (corporate officers, partners, members, etc.) must complete an Affirmation attesting to any prior criminal convictions, etc. Owners who plan to perform investigative and/or security services must also complete a separate application to either hold a license (which means you have met the experience and examination requirements and could serve as the qualifying agent) or be a registrant of this agency.

Once your application is complete the Board will review it. The Board usually meets on the third Friday of odd months. See the Board's Web site for specific meeting dates, agendas and minutes, etc.

Agencies must submit the following:

1. Completed application.
2. Application fees: \$270 – Security **OR** Private Investigative Service; \$320 – Combination Services Please make your check payable to Vermont Secretary of State. Application fees are non-refundable.
3. Provide the name(s) of the owner(s) and how the business is organized (trade name, partnership, corporation, limited liability company, etc.).
4. Provide a list of all individual corporate officers, directors, partners, members, etc. including, name, title, date of birth, and address. You may list this information on the application form or attach a separate sheet.
5. **Affirmation Forms.** Affirmations must be completed by the sole proprietor, all members, all partners, corporate officers, directors, or anyone with a controlling interest in the business/agency, stating that they have not been convicted of, and are not under indictment for, any felony or misdemeanor arising from the violation of any federal or state law. Questions must be answered and your signature must be notarized. This form is in lieu of a federal background check.

6. You must submit evidence of registration of the name of your business in Vermont (i.e., Trade Name; Certificate of Incorporation, Vermont Domestic; Certificate of Authority, foreign non-Vermont; Partnership, or Limited Liability Company) from the Corporations Division, Office of the Secretary of State, 26 Terrace Street, Montpelier, Vermont 05609-1104, Phone (802) 828-2386. Web site: www.sec.state.vt.us
7. If this business/entity is licensed or registered as an agency offering investigative and/or security services in another jurisdiction, verification of licensure standing directly from the licensing authority in the state where the agency is located is required. Note: Online verification is acceptable provided the state in which the facility is located reports whether disciplinary action(s) has been taken against the applicant.

NOTE: All licensees renew on a fixed 24 month schedule: May 31 (odd numbered years). Applicants issued an initial license more than 90 days prior to the renewal date will be required to renew. Initial licenses issued within 90 days of the renewal date will not be required to renew.

The Statutes and Rules are available via the Board's Web site at:
<http://vtprofessionals.org/opr1/investigators/>

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 (802) 828-1505



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 Administrative Assistant
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pskinner@sec.state.vt.us
www.vtprofessionals.org

Board of Private Investigative and Security Services

Application for Licensure as an Agency
 (Check One)

_____ Private Investigative _____ Security Services _____ Private Investigative and Security Services
 (combination)

Name of Agency (business)	
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Agency Mailing Address:	P.O. Box	
	Street/Apt #	
	City/State/Zip	
	Country	

911 Address: (if different than mailing)	P.O. Box	
	Street/Apt #	
	City/State/Zip	

Federal Identification Number:	
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Business Phone:	() -	Cell Phone:	() -
Fax:	() -	E-Mail:	

Name of person to contact re this application			
Phone		E-Mail	

Section C: Vermont Mandatory “Good Standing” Declarations

CHILD SUPPORT:

Child Support Orders (15 V.S.A. § 795):

As of the date of this application: this business, and/or the person signing this form, (check one)

- Is not subject to a child support order; OR
- Is subject to a child support order and am in good standing* or in full compliance with a plan to pay
- Is not in good standing* or in full compliance with a plan to pay.*

TAXES:

Tax Compliance (32 V.S.A. § 3113(b)):

As of the date of this application: this business, and/or the person signing this form, (check one)

- Has never lived or worked in Vermont and do not owe Vermont taxes; OR
- Has no taxes due and payable and all required returns have been filed; OR
- Has the liability for any taxes due and payable on appeal; OR
- Is not in compliance with a payment plan approved by the Vermont Department of Taxes; OR
- Is not in good standing* with the Vermont Department of Taxes or in full compliance with a plan to pay.

UNEMPLOYMENT COMPENSATION:

Unemployment Compensation (21 V.S.A. §1378(b)):

As of the date of this application: this business, and/or the person signing this form, states that: (check one)

- This does not apply because this business or I have never been an employer in Vermont; OR
- No contributions or payments in lieu of contributions are due and payable; or the liability for any contributions or payments in lieu of contributions due and payable is on appeal; or the employing unit is in compliance with a payment plan approved by the commissioner; OR
- this business or I am not in good standing* or in full compliance with a plan to pay.

DISTRICT COURT FINES / JUDICIAL BUREAU:

Unpaid Judgments (4 V.S.A. § 1110(c)):

As of the date of this application: this business, and/or the person signing this form: (check one)

- Does not have any unpaid judgments
- Is in good standing* with respect to any unpaid judgment issued by the judicial bureau or district court for fines or penalties for a violation or criminal offense.”
- Is not in good standing.*

* “Good standing” is defined in the statutes cited above. For more information, refer to the relevant statute specific to the particular question or consult the “information for applicants” on the OPR web page.
www.vtprofessionals.org

Section D: Vermont Mandatory Credential and Fitness Questions

Please circle Yes or No for each of these questions. If Yes, follow the provided instructions.

Has Vermont or any other state, federal authority, or other jurisdiction (US or elsewhere) denied an application for a license, certificate, or registration by this applicant to conduct business or perform professional services? <i>If "Yes," attach a copy of the order or official notification of the action(s).</i>	Yes	No
Has Vermont or any other state, federal authority or other jurisdiction (US or elsewhere) restricted, suspended, revoked, or taken any other disciplinary action against a license, certificate, or registration held by this applicant to conduct business or perform professional services? <i>If "Yes," provide a copy of the order or official notification of the action.</i>	Yes	No
Has the entity for which this application is submitted ever surrendered a license, certificate or registration to a licensing authority? <i>If "Yes," provide a detailed written explanation.</i>	Yes	No
Is the entity for which this application is submitted currently under investigation by a licensing authority? <i>If "Yes," provide a detailed written explanation and a copy of any available information from the licensing authority.</i>	Yes	No
Has the entity for which this application is submitted been convicted of a crime? <i>If "Yes," provide a detailed written explanation and attach the official court documents.</i>	Yes	No
Does the entity for which this application is submitted have any criminal charges pending against it in any jurisdiction (US or elsewhere)? <i>If "Yes," provide a detailed written explanation and attach a copy of the charging documents.</i>	Yes	No

Note: Vermont law requires that you report to the Office of Professional Regulation a felony conviction or any conviction of a crime related to the practice of your profession, within 30 days. 3 V.S.A. § 129a (a)(11).

Name of Licensed Qualifying Agent (prefix 066)			
First	Middle Initial	Last Name	Circle One:
			Mr. Mrs. Ms. Dr.
Previous Name(s) (Maiden)			
Indicate License Number	066-		
Address of Qualifying Agent			

Section: Ownership

Legal Organization:	<input type="checkbox"/> Trade Name <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation
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Name of Owner of Agency	
Name of Trade Name (d/b/a in Vermont)	
Address of Owner	

List the name, title, date of birth, and address of the corporate officers, directors, partners, members, etc. Each person listed below must complete an Affirmation Form. (Attach separate list if necessary.)

Name	Title	DOB	Address

Statement of Applicant

I certify, under the pains and penalties of perjury, that all information I have provided in this application is true and accurate. I understand that furnishing false information may constitute unprofessional conduct and result in the denial of this application for licensure/certification/registration. The maximum penalty for perjury is fifteen years in prison and/or a \$10,000 fine. (13 V.S.A. §2901)	
Signature of Applicant	Date

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AFFIRMATION

Name of Agency (Applicant)			
Your Name			
Your Address City, State, Zip			
Date of Birth		Email Address	

Check Applicable position or title:

<input type="checkbox"/> Qualifying Agent	<input type="checkbox"/> Partner	<input type="checkbox"/> Corporate Officer
<input type="checkbox"/> Director	<input type="checkbox"/> Member (LLC)	<input type="checkbox"/> Other

The Board requires an Affirmation by the sole proprietor, all partners, members, corporate officers, directors and the qualifying agent, that they have not been convicted of, and are not under indictment for, any felony or misdemeanor arising from the violation of any federal or state law.

Circle Yes or No for each of these questions. If the answer is Yes, follow the instructions provided.

Has Vermont or any other state, federal authority, or other jurisdiction (US or elsewhere) denied an application by you for a license, certificate, or registration to practice a profession or occupation? <i>If "Yes," you must attach a copy of the order or official notification of the action(s).</i>	Yes	No
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Has Vermont or any other state, federal authority, or other jurisdiction (US or elsewhere) restricted, suspended, revoked, or taken any other disciplinary action against a license, certificate, or registration that you hold or held in any profession or occupation? <i>If "Yes," you must provide a copy of the order or official notification of the action.</i>	Yes	No
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Have you ever surrendered a license, certificate, or registration to a licensing authority? <i>If "Yes," you must provide a detailed written explanation.</i>	Yes	No
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Are you currently under investigation by a licensing authority? <i>If "Yes," you must provide a detailed written explanation and a copy of any available information from the licensing authority.</i>	Yes	No
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Have you EVER been arrested, taken into custody, held for investigation or questioning, cited into court, charged by any law enforcement authority, completed a diversion program, had a criminal case dismissed, or been convicted of a crime other than a minor traffic violation? (Note: Driving While Intoxicated and Driving Under the Influence are not "minor traffic violations.") <i>If the answer is "Yes," you must provide a written explanation and copies of police affidavits and court documents.</i>	Yes	No
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Do you have any criminal charges pending against you in any jurisdiction (US or elsewhere)? <i>If "Yes," you must provide a detailed written explanation and attach a copy of the charging documents.</i>	Yes	No
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Note: Vermont law requires that you report to the Office of Professional Regulation, a felony conviction or any conviction of a crime related to the practice of your profession; within 30 days. 3 V.S.A. § 129a(a)(11).

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I further certify that I have read and understand the statutes and rules of the profession (www.vtprofessionals.org).

Signature of Applicant:

Date:

Signature of Notary Public:

STATE OF _____ COUNTY OF _____}ss.

Subscribed and sworn to before me this _____ day of _____, 20_____

Notary Public

Commission Expires: _____