



State of New Hampshire

DEPARTMENT OF SAFETY
DIVISION OF STATE POLICE
33 HAZEN DRIVE
CONCORD, NH 03305



APPLICATION FOR: (check appropriate box)

Private Investigator Individual Security Guard Individual Bail Bondsman Individual

PLEASE REVIEW BEFORE SUBMITTING APPLICATION:

The following documentation must be submitted at the same time, or application will not be accepted.

- A) Completed application
- B) A two-year, \$50,000.00 surety bond on approved form, dated to run concurrent with the license, in the individual's name.
- C) Fee of \$150.00 (If applying for more than one type of individual, \$150.00 fee for each), plus a \$25.00 criminal record check fee pursuant to RSA 106-F:8,III and Saf-C 2205.02 and a \$10.00 background investigative fee pursuant to RSA 106-F:8,III and Saf-C 2205.03.
- D) Applicants for a private investigator or bail bondsman individual license must submit complete and verifiable documentation that the minimum standards for application, required by RSA 106-F:6, VII, have been met.

1) Name:						
1a) Doing Business As:						
2) Present Home Address (street, town/city, state, zip code):					3) Home Telephone No.:	
2a) Home Mailing Address if different (street, town/city, state, zip code):						
4) Business Address (If different than Home Address):					5) Business Tel. No.:	
4a) Business Mailing Address if different (street, town/city, state, zip code):						
6) Date of Birth	6a) Place of Birth	7) Height	8) Weight	9) Hair	10) Eyes	11) Soc. Sec. No.
12) Have you ever been convicted of a felony or misdemeanor that has not been pardoned or annulled by a court in this state of nation?					<input type="checkbox"/> YES	If YES, explain in block #18
					<input type="checkbox"/> NO	
13) Have you ever been treated for mental illness or an emotional disorder or confined to an institution?					<input type="checkbox"/> YES	If YES, explain in block #18
					<input type="checkbox"/> NO	
14) Have you ever been convicted of a crime associated with theft, honesty, fraud, use or sale of controlled substances or misdemeanor crimes of violence, domestic violence or abuse of any type that has not been pardoned or annulled by a court in this state or any other jurisdiction in the United States? (Except traffic violations)					<input type="checkbox"/> YES	If YES, explain in block #18
					<input type="checkbox"/> NO	

15) Are you or have you ever been a user of drugs or narcotics?
(Except under the direction of a doctor) YES If YES, explain in block #18
 NO

16) Are you currently the subject of an active domestic violence
Protective Order in New Hampshire or any other jurisdiction
in the United States, it's possessions or territories? YES If YES, explain in block #18
 NO

17) Has any license (private investigator, security guard or bail bondsman)
applied for or issued to you, a partnership or a corporation of which you
were a member ever been denied, revoked or suspended in this or any
other state or territory? YES If YES, explain in block #18
 NO

18) If "YES" on questions 12-17, please explain here: (attach separate sheet if necessary).

19) List three (3) persons, unrelated to you, of whom an inquiry can be made as to your character, integrity, and reputation. Give the full name and **complete** mailing address as these persons will be sent questionnaires. Failure to respond to the questionnaires will delay this application for a license.

1. Name: _____ Mailing Address (if different): _____

2. Name: _____ Mailing Address (if different): _____

3. Name: _____ Mailing Address (if different): _____

ALL LICENSE APPLICANTS

Applicant's Name (please print) _____

I certify that I have read the following application and affirm that every statement contained herein is true and correctly set forth and I also certify that I am familiar with all state laws, regulations and local ordinances relating to the license for which I am applying, for the locations in which I intent to conduct operations.

Signature of Applicant _____
(False statements punishable under N.H. RSA 641:3)

EMAIL ADDRESS: _____

By providing an email address, you are acknowledging that the Permits and Licensing Unit may handle your application in whole or part via electronic mail.

MAKE CHECKS PAYABLE TO: STATE OF N.H. TREASURER