INFORMATION ABOUT LICENSING

PRIVATE INVESTIGATOR AND PRIVATE INVESTIGATOR QUALIFIED MANAGER

This packet contains information about obtaining a Private Investigator license and a Private Investigator Qualified Manager certificate, descriptions of required qualifications, and license application forms. It is the policy of the Bureau of Security and Investigative Services (Bureau) to provide equal licensing opportunities for all persons without regard to race, color, religion, sex, national origin, disability, age, creed, marital status or sexual orientation.

The Bureau licenses and regulates Private Investigators and Private Investigator Qualified Managers in California under the provisions of the:

- California Business and Professions Code 7512-7573
- California Code of Regulations (formerly California Administrative Code)
  Title 16, Division 7

No person may engage in the business of a Private Investigator in California without obtaining the proper license from this Bureau. Any person who operates without a license, unless exempted, or who represents himself or herself to be licensed and is not licensed, is guilty of a misdemeanor, which is punishable by a fine and/or imprisonment. Licensing laws and regulations are subject to change. Applicants are responsible for staying informed of legislative or regulatory changes which may affect the status of their application. If any such changes affect the status of an application after it has been filed with the Bureau, the applicant will be notified.

NEW LICENSING FEES – IMPORTANT INFORMATION

Due to a change in the law, the fees to apply for a Private Investigator license and a Private Investigator Qualified Manager were updated on July 1, 2020. Two separate fees are required to process a Private Investigator application for an initial license: the $340 application and examination fee and the $385 license fee ($725 total). Be advised that an application received without payment of the full application and examination fee amount owed will not be processed and will be returned to the applicant. Make check payable to the Bureau of Security and Investigative Services or BSIS. Do not submit cash by mail. Application fees are non-refundable.

GENERAL QUALIFICATIONS FOR LICENSURE

Each person listed on the application (owner, partner, corporate officer, managing member, qualified manager) is required to meet certain general qualifications regarding fitness for licensure.

The person who will be in active charge of the business for a Private Investigator is referred to as the qualified manager or qualified certificate holder. Each company license must have one person designated as the qualified manager and that person must meet the general license qualifications as well as more specific qualifications regarding age, experience and examination. The qualified manager may be an owner, partner, corporate officer, managing member, or any other person meeting the requirements for qualified manager.

DENIAL OF LICENSURE

A criminal history check is made on all applicants through the completion of a Department of Justice (DOJ) and Federal Bureau of Investigation (FBI) Live Scan. The director may deny a license if any person listed on the application as an owner, partner, corporate officer, managing member or qualified manager have done any of the following:

- Been convicted of a crime substantially related to the qualifications, functions, or duties of the business or profession for which the application is made.
- Committed any act involving dishonesty, fraud or deceit with the intent to substantially benefit himself or herself, or injure another.
- Committed any act which, if done by a licensee of the business or profession in question, would be grounds for suspension or revocation of the license.
- Knowingly made a false statement of fact required to be revealed on the license application.
- Had a license which is under suspension.
- Been refused a license or had a license revoked, or been an owner, partner, corporate officer, managing member, or qualified manager of any business that has been refused a license or had a license revoked by the Bureau.
- While unlicensed, committed, or aided and abetted the commission of, any act for which said license is required.

APPLICATION PROCESSING TIMEFRAME

The following items may affect the time required to issue a license: incomplete application forms; incorrect or nonpayment of fees; passing the examination; the DOJ and FBI's response time on criminal history checks; and the time required to verify application information.

Please allow a minimum of four weeks before contacting the Bureau about the status of an application.

FORMS REQUIRED FOR LICENSE APPLICATION

The following is a description of each type of form that must be included with an application. All required forms must be completed and submitted to the Bureau with the appropriate fees before the application will be processed. The attached Private Investigator Applications Forms Checklist on page 9 lists the forms required for a Private Investigator license. Please check the completed application package against this list before submitting it the Bureau.

APPLICATION FOR LICENSE (Form 31B-4) **(fee required)**

A separate Private Investigator Company application must be filed for each entity applying for a license. For example, to have a Private Investigator sole ownership in addition to having a partnership with someone else, two separate Private Investigator Company applications must be filed.

Note: If applying for a Private Investigator Qualified Manager license only, there is no need to complete the Application for License (Form 31B-4).

Business address: A post office box or mailbox service may not be used as the address of record unless mail delivery to the physical location of the business is not possible or the principal place of business is located in the applicant/licensee's personal residence. If a post office box or mailbox service is listed as the business address, the licensee should provide an explanation for doing so with the application and provide the actual physical location/address of the business in the accompanying explanation.

Protection Services Insurance Requirement

If you are not a Limited Liability Company, a Private Investigator who carries a firearm and provides armed bodyguard services incidental to an investigation for which the Private Investigator has been

previously hired to perform must maintain a commercial general liability policy of insurance issued by an insurance company authorized to transact business in California that provides minimum limits of insurance of one million dollars ($1,000,000) for any one loss or occurrence due to bodily injury, including death, or property damage, or both.

Corporation Applicants Only
If applying for licensure as a corporation, include an endorsed copy of the Articles of Incorporation (Domestic Corporation) or an endorsed copy of the Statement and Designation by Foreign Professional Corporation Form (Foreign Corporation) filed with the California Secretary of State. A copy of the Statement of Information, filed with the Secretary of State, must also accompany your application.

Limited Liability Company Applicants Only
If applying for licensure as an LLC, include an endorsed copy of the Articles of Organization of a Limited Liability Company (Domestic LLC) or an endorsed copy of the Application to Register a Foreign Limited Liability Company (Foreign LLC) filed with the California Secretary of State. A copy of the Statement of Information, filed with the Secretary of State, must also accompany your application.

LLC License Insurance Requirements
A Private Investigator LLC licensee must maintain a policy or policies of insurance against liability claims for acts, errors, or omissions arising out of the private investigator services it provides. For an LLC with five or fewer managing members, the aggregate liability limit shall not be less than one million dollars ($1,000,000). For an LLC with more than five managing members, an additional one hundred thousand dollars ($100,000) of insurance must be obtained for each person named as a managing member not to exceed five million dollars ($5,000,000) in any one designated period.

A Private Investigator LLC license applicant and licensee must provide proof of the required insurance by submitting a Certificate of Liability Insurance, signed by an authorized agent or employee of the insurer, to the Bureau. The Private Investigator LLC licensee will be responsible for ensuring the Bureau has current insurance information on file, which means the licensee will need to submit a new Certificate of Liability Insurance when a current policy expires. Failure to maintain the required insurance or provide the Bureau with a current Certificate of Liability Insurance subjects the Private Investigator LLC license to automatic suspension.

The Certificate of Liability Insurance must include:

- The Private Investigator LLC's company name,
- The Private Investigator's PI License Number (if already licensed),
- The insurance policy number,
- Dates that coverage is scheduled to commence and lapse, and
- The date and amount of any claims paid pursuant to the policy, and cancellation date if applicable.

Since the Certificate of Liability must include your company's name, the Bureau recommends applicants wait until receiving written authorization from the Bureau of your business name before submitting the Certificate of Liability Insurance document.

Reassignment of License (fee required)
To request the reassignment of an existing Private Investigator license, submit a letter addressed to the Bureau Chief. The letter should state the request for the reassignment and provide a brief explanation on why the reassignment is needed. Only requested where the direct and indirect owners

of the assignor (current business organization) are identical to the direct and indirect owners of the assignee (new business organization) are potentially eligible for reassignment. If consent for the assignment is granted, then the payment of the processing fee authorized by Business and Professions Code section 7570 and California Code of Regulations section 639 must be submitted for the Bureau to carry out the reassignment. To apply for reassignment, submit:

- Letter addressed to the Bureau Chief, specifically requesting the reassignment with brief explanation of why reassignment is needed
- Private Investigator Application for License (31B-4)
- Personal Identification Form for each principal involved in the business (31B-9)
- Private Investigator Request for Authorization of Business Name (31B-12)
- If consent is granted by the Bureau Chief, payment of $400.00 is required to process the reassignment

PERSONAL IDENTIFICATION FORM (Form 31B-9) (no fee required)
Each person listed on the Private Investigator Company Application for License as an owner, partner, corporate officer, managing member, and/or qualified manager of the business must complete one of these forms and submit one passport quality photograph, taken within the past year. Any person who knowingly falsifies photographs required for licensure is guilty of a felony.

QUALIFIED MANAGER - GENERAL REQUIREMENTS

QUALIFYING EXPERIENCE FORM (Form 31B-8) (no fee required)
This form must be completed for all persons applying for examination as a qualified manager for a Private Investigator Company. **All qualifying experience for the qualified manager must be certified on this form by someone other than the applicant.** A separate form is to be used by each person who is certifying experience and for each employer. All military qualifying experience must be supported by a copy of the applicant's DD-214 or Performance Evaluation Report. Additional support of experience may be required as requested by the Bureau. One year of experience is considered to be a minimum of 2,000 hours of compensated time in the required field. Applicants wishing to use education in lieu of practical experience must submit a copy of their college transcripts.

Only employers or their designated agent may certify the investigative experience obtained by the applicant. An employer who is a licensee shall respond in writing within 30 days to an applicant's written request for certification of work experience as an employee and either provide the certification or the reason for denial. If the licensee fails to respond to the applicant, the applicant must notify the Bureau in writing, under penalty of perjury, that the applicant is unable to obtain the required written response. After this procedure has been followed, the Bureau may require the licensee to submit all relevant employment records maintained regarding the applicant for evaluation in substantiating the applicant's employment experience.

The person who is designated as the qualified manager must meet these general requirements in addition to the experience requirement listed below:

General Requirements

- Be at least 18 years of age.
- Attain a passing score on the written examination.

- Have at least three years (2,000 hours each year) of compensated experience totaling no fewer than 6,000 hours in investigative work, in one or more of the following capacities:

Experience Requirements

1. Sworn law enforcement officers possessing powers to arrest and employed by agencies in the federal, state, or local government.

2. Military police of the United States armed forces or the National Guard.

3. An insurance adjuster or their employees subject to Chapter 1 (commencing with Section 14000) of Division 5 of the Insurance Code.

4. Persons employed by a private investigator who are duly licensed in accordance with the Private Investigators Act.

5. Persons employed by repossessors duly licensed in accordance with the Collateral Recovery Act (commencing with Section 7500 of the Business and Professions Code), only to the extent that those persons are routinely and regularly engaged in the location of debtors or the location of personal property utilizing methods commonly known as "skip tracing." Only that experience acquired while performing skip tracing duties shall be credited toward qualification to take the examination.

6. Persons duly trained and certified as arson investigators and employed by a public agency engaged in fire suppression.

7. Persons trained as investigators and employed by a public defender to conduct investigations.

8. Persons trained as investigative reporters and employed by a media source, as defined in Section 1070 of the Evidence Code, whose investigative journalism experience is comprised of conducting primary investigation and producing investigative projects. "Primary investigation" means original and in-depth research and analysis involving multiple sources, including, but not limited to, public records, databases, archives, published and unpublished documents, witnesses, informers, whistleblowers, public officials, and experts, to produce investigative projects.

The following activities <u>will not</u> be accepted as qualifying experience:

1. The serving of legal process or other documents.

2. Activities relating to the search for heirs or similar searches which involve only a search of public records or other reference sources in the public domain.

3. The transportation or custodial attendance of persons in the physical custody of a law enforcement agency.

4. The provision of bailiff or other security services to a court of law.

5. The collection or attempted collection of debts by telephone or written solicitation after the debtor has been located.

6. The repossession or attempted repossession of personal property after that property has been located and identified.

Note: If an applicant has previously passed the examination for a Private Investigator Qualified Manager and/or currently holds a valid license, the applicant does not have to retake the exam.

Examination: Examinations are designed to determine proficiency of the applicant to engage in the business of a Qualified Manager for a Private Investigator Company. In order to be considered for examination, the Bureau must receive the completed application and appropriate fee(s).
After an application is approved, an applicant's name and address will be sent to Psychological Services Industry (PSI). PSI will mail the applicant a candidate handbook and study materials. Upon receipt of this information the applicant may call the phone number provided in the handbook and schedule the date, time and location for an examination.

Disclaimer: Successfully passing the Private Investigator Company examination does not guarantee an applicant will be issued a Private Investigator Company license from this Bureau.

Examinees requiring special testing arrangements due to a physical or mental impairment must submit a request to the Bureau for such arrangements. This request must be in writing and include supporting documentation from a physician or other qualified professional.

Re-Examination: If an applicant did not pass the Private Investigator exam, or is unable to attend the scheduled exam date, the applicant may apply to sit for the exam at a later date by submitting a written request or an application for re-examination (form is attached to the results notice) and the appropriate fee. The applicant will receive the candidate handbook and study materials from PSI. Once this information is received the applicant may schedule an appointment with PSI to take the exam.

REQUEST FOR AUTHORIZATION OF BUSINESS NAME (Form 31B-12) (no fee required)
Business may not be conducted under a fictitious or other business name unless written authorization is received from this Bureau.

The Bureau recommends that an applicant wait until the issuance of a Private Investigator Company license before incurring expenses related to the use of the name, e.g., stationery, business cards, advertising, telephone listings, etc. for the Private Investigator Company. **Approval of a corporate name by the Secretary of State does not mean the name will be automatically approved as a business name by the Bureau.**

The Request for Authorization of Business Name form will not be processed before receipt of an application and fees. List business names to be considered in order of preference. Name approval or disapproval is not available by telephone. Applicants who have already passed the required examination will be notified of name approval or disapproval after review and acceptance of the application. New applicants will be advised of name approval or disapproval with notification of passing the written examination.

Note: If applying for a Private Investigator Qualified Manager license only, there is no need to complete the Request for Authorization of Business Name (Form 31B-12).

LIVE SCAN SITES AND FORMS

Live Scan is a system for the electronic submission of fingerprints and the subsequent automated background checks and responses. Simply go to the nearest Live Scan station to submit fingerprints to the DOJ and FBI. Visit the Bureau's website to link to the Live Scan sites and/or Live Scan forms: https://www.bsis.ca.gov/forms_pubs/livescan/criminalhistory_bgcheck.pdf.

Disclaimer: Please request the Live Scan operator to include your social security number (SSN) or individual taxpayer identification number (ITIN) when keying your information in order to aid the Bureau in processing your application.

FINGERPRINT CARDS

CALIFORNIA RESIDENTS: The Department of Justice, with rare exceptions, will only accept electronically submitted (Live Scan) fingerprints for criminal background checks related to employment, licensing, certification, etc. California residents who do not have reasonable access to Live Scan or have a justifiable reason to submit a fingerprint card may request fingerprint cards from the Bureau for submission.

NON-RESIDENTS: Out-of-state applicants will be deemed to lack reasonable access to Live Scan. Accordingly, hard fingerprint cards for such individuals will not be subject to the limitations described above.

The items listed below are required for fingerprint card submissions for each person applying for approval as a Private Investigator Qualified Manager and each person listed on the application for licensure as an owner, partner, or corporate officer.

- Two completed fingerprint cards
- Include payment of $49.00

ABANDONMENT OF APPLICATIONS

If an applicant does not complete the license application process within one year after filing the application with the Bureau, or does not pass the examination within a one-year period of becoming eligible, the application will be considered abandoned. The date the application will be considered abandoned is included in the applicant's examination scheduling letter. Once an application is considered abandoned, the applicant will be required to submit a new Live Scan form, a new application, and appropriate fees.

FINAL STEPS IN THE LICENSING PROCESS

When all requirements are met for licensing, including the requirements for the qualified manager, the applicant will be notified to send the following items:

- License fee, if not already paid (see Private Investigator Company Schedule of Fees).
- Any additional information needed to complete the application.
- **For applicants who applied as a corporation:** An endorsed copy of the Articles of Incorporation (Domestic Corporation) or an endorsed copy of the Statement and Designation by Foreign Professional Corporation Form (Foreign Corporation) filed with the California Secretary of State, if not already submitted.
- **For applicants who applied as a limited liability company (LLC):** (1) An endorsed copy of the Articles of Organization of a Limited Liability Company (Domestic LLC) or an endorsed copy of the Application to Register a Foreign Limited Liability Company (Foreign LLC) filed with the California Secretary of State AND (2) Certificate of Liability Insurance, if not already submitted.

PRIVATE INVESTIGATOR COMPANY SCHEDULE OF FEES

Fee Type	Fee Amount
Initial Application and Exam	$340
Initial License	$385
Total Initial Fee	**$725**
Qualified Manager Exam	$340
Qualified Manager Re-Exam	$60
Company Reassignment	$400
Biennial Company Renewal	$265
Delinquent Company Renewal ($265 renewal fee + $132.50 delinquency fee)	$397.50
Replacement Company License (Large or Small Wall)	$25
Replacement Company Pocket Card (for Company Principals or Qualified Managers)	$25

ANY QUESTIONS?

If you have questions regarding the Private Investigator Company licensing process or about completion of your application you may contact the Bureau at:

Bureau of Security and Investigative Services
P.O. Box 989002
West Sacramento, CA 95798-9002
(800) 952-5210
(916) 322-4000
PrivateInvestigators@dca.ca.gov

Although every effort has been made to assure the accuracy of this information packet, it does not have the force and effect of law, rule or regulation. Should any difference or error occur, the law will take precedence.

PRIVATE INVESTIGATOR AND PRIVATE INVESTIGATOR QUALIFIED MANAGER APPLICATION FORMS CHECKLIST

APPLICATION AND FINGERPRINT PROCESSING FEES ARE NON-REFUNDABLE.

This form is for your use only. Please do not submit it to the Bureau with your application. Check off each form that you have completed. When all pertinent forms are checked off, submit your application package and appropriate fees to the Bureau. Make checks payable to the Bureau of Security and Investigative Services.

PRIVATE INVESTIGATOR

If you do not have a qualified manager who already has a current qualification certificate, you must also send the forms listed for the qualified manager. If you are applying only to become certified as a Private Investigator qualified manager, do not complete these forms – see forms list for qualified manager.

- ☐ Application for License (Form 31B-4)
- ☐ Personal Identification Form (Form 31B-9)
  One form and one passport quality photograph, taken within the past year, for each owner, partner, corporate officer, managing member and manager.
- ☐ Request for Authorization of Business Name (Form 31B-12)
- ☐ **Corporation Applicants Only:** (1) Copy of endorsed Articles of Incorporation (Domestic Corporation) or copy of endorsed Statement and Designation by Foreign Professional Corporation Form (Foreign Corporation), filed with the California Secretary of State, and (2) Copy of the Statement of Information, filed with the Secretary of State.
- ☐ **LLC Applicants Only:** (1) Copy of endorsed Articles of Organization of a Limited Liability Company (Domestic LLC) or copy of endorsed Application to Register a Foreign Limited Liability Company (Foreign LLC), filed with the California Secretary of State, (2) Copy of Statement of Information, filed with the Secretary of State, and (3) Certificate of Liability Insurance.
- ☐ **Partnership, Corporation, and LLC Applicants Only:** In order to access BreEZe, the Bureau's online licensing and enforcement system, you must include your Federal Employer Identification Number (FEIN) on the Application for License (Form 31B-4).

Application Processing Fee/ Examination Fee: $ 340.00

License Fee (Fee payable once a certified qualified manager is in place): $ 385.00

QUALIFIED MANAGER ONLY

☐ Personal Identification Form (Form 31B-9)
One form and one passport quality photograph, taken within the past year.

☐ Qualifying Experience (Form 31B-8)
One form from each person who is certifying the required work experience.

Examination Fee (Payable if only taking the Qualified Manager exam): $ 340.00

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DEPARTMENT OF CONSUMER AFFAIRS
BUREAU OF SECURITY AND INVESTIGATIVE SERVICES
P.O. Box 989002, West Sacramento, CA 95798-9002
P (916) 322-4000 | P (800) 952-5210 | F (916) 575-7290 | www.bsis.ca.gov

PRIVATE INVESTIGATOR
APPLICATION FOR LICENSE

STOP DO NOT LIVE SCAN UNTIL YOU HAVE SUBMITTED YOUR APPLICATION

This information is requested pursuant to California Business and Professions Code section 7525.1 and will be used to determine eligibility for licensure. All information is necessary and if not provided, the application may be rejected. You must submit the licensing fee(s) with your application package. Failure to do so may delay the processing of your application. **Please note that the application processing fee/examination fee and/or license fees are non-refundable.** If the qualified manager has already passed the Bureau examination and is still eligible to be a qualified manager, you may submit the licensing fee and the application fee with this application.

☐ **Check this box if this application is for Reassignment of an existing license.**

PLEASE TYPE OR PRINT CLEARLY

1. Proposed Business Name

2. Business Address – Number and Street | City | State | Zip Code

3. Qualified Manager's Full Name

4. Qualified Manager License Number (if licensed) | 5. Telephone – Business ( ) | Residence ( )

6. Type of Business Organization
☐ Individual ☐ Partnership ☐ Corporation ☐ Limited Liability Company

Social Security or Individual Taxpayer Identification Number (Individual Ownership Only)	FEIN (Partnership, Corporation, or LLC only)	Secretary of State Identification Number (Corporation Only)

List the name of each owner, partner, managing member, or corporate officer of the business and identify their position. For corporations list chief executive officer, secretary, chief financial officer, and any other corporate officer who will be active in the business. If additional space is needed, attach a separate sheet.

Name – Last	First	Middle	Position	Telephone
				( )
				( )
				( )

Each person listed in items 3 and 6 must complete and submit a Private Investigator Personal Identification Form (Form 31B-9), even though the person may have previously submitted this information in connection with another license.

I/We declare under penalty of perjury, under the laws of the State of California, that all information contained on this Application for License and any accompanying documents is true and correct, with full knowledge that all statements made in this form are subject to investigation and that ANY FALSE OR DISHONEST ANSWER TO ANY QUESTION MAY BE GROUNDS FOR DENIAL OR SUBSEQUENT REVOCATION OF LICENSE.

Signature	Date	Signature	Date
Signature	Date	Signature	Date
Signature	Date	Signature	Date

SIGNATURES REQUIRED: If type of license is individual, the owner and the Qualified Manager (QM) must sign.
If type of license is a partnership, all partners and the QM must sign.
If type of license is a corporation, then a duly authorized officer and the QM must sign.
If type of license is a LLC, then a duly authorized member must sign.

(See Next Page for Additional Information)

Disclosure Language

Submission of the requested information is mandatory. The Bureau of Security and Investigative Services cannot consider your application for licensure or renewal unless you provide all of the requested information.

Pursuant to the California Public Records Act (Gov. Code § 6250 et seq.) and the Information Practices Act (Civ. Code § 1798.61), the names and addresses of persons possessing a license or registration may be disclosed by the Department unless otherwise specifically exempt from disclosure under the law. We make every effort to protect the personal information you provide us. The information you provide, however, may be disclosed in response to a court or administrative order, a subpoena, or a search warrant.

Per the Information Practices Act, the Chief of the Bureau of Security and Investigative Services, Department of Consumer Affairs, is responsible for maintaining the information in this application. You have the right to review the records maintained on you by the Bureau or Department unless the records are exempt from disclosure by section 1798.40 of the Civil Code. Your completed application becomes the property of the Bureau and will be used by authorized personnel to determine your eligibility for a license, registration or permit. Information on your application may be transferred to other governmental or law enforcement agencies, as permitted by law.

For questions about this notice or access to your record, you may contact the Bureau by mail at Bureau of Security and Investigative Services, Attn: Public Records Liaison, P.O. Box 980550, Sacramento, CA 95798-0550, by phone at (916) 322-4000 or (800) 952-5210, or by e-mail at bsis.prarequests@dca.ca.gov. For questions about the Department's Privacy Policy, you may contact the Department of Consumer Affairs at 1625 North Market Boulevard, Sacramento, CA 95834, by phone at (800) 952-5210 or by e-mail at dca@dca.ca.gov.

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PERSONAL IDENTIFICATION FORM
PRIVATE INVESTIGATOR PRINCIPALS, CORPORATE OFFICERS, MANAGING MEMBERS, AND PRIVATE INVESTIGATOR QUALIFIED MANAGER

STOP

DO NOT LIVE SCAN UNTIL YOU HAVE SUBMITTED YOUR APPLICATION

Have you served or are currently serving in the United States military? ☐ **Yes*** ☐ **No**

*In order to assist veterans in their transition from military service to civilian employment, BSIS has implemented the Veterans Come First Program which offers priority services to veteran applicants. Disclosure of military service is voluntary and participation in the program is optional. If you choose to use the Veteran's Come First Program, check the military status box and submit proof of military service (e.g. DD-214, DD-256, V-MET record, military orders, military I.D., etc.) along with your application.

Each person listed on the Private Investigator Application for License (Form 31B-4) as an owner, partner, corporate officer, managing member, and qualified manager of the business must complete and submit this form. This form is also to be completed for any change in corporate officer or qualified manager after the license is issued. A corporate officer includes the chief executive officer, secretary, chief financial officer and any other officer who will be active in the business. This form must be accompanied by one passport quality photograph, taken within the past year.

This information is requested pursuant to California Business and Professions Code sections 480, 7525, 7521.1 and Labor Code section 432.7 and will be used to determine eligibility for licensure. All information is necessary, and if not provided, the application may be rejected.

PLEASE TYPE OR PRINT CLEARLY

1. This application is for a: ☐ Private Investigator Company ☐ Private Investigator Qualified Manager	2. A change in an existing license: ☐ Corporate Officer ☐ Qualified Manager ☐ Limited Liability Company ☐ Other _____	3. Name of Qualified Manager (Please Print) _____
4. Business Name		5. License Number (if licensed)
6. Full Name Last First Middle		7. Social Security or Individual Taxpayer Identification Number (Mandatory)
8. Residence Address – Number and Street City State Zip Code		
9. Telephone Number Residence ( ) Business ( )	10. E-mail Address (optional)	11. Date of Birth (Mo/Day/Yr)

12. YOUR POSITION WITH BUSINESS: (Check all that apply)

☐ OWNER ☐ OFFICER
☐ PARTNER ☐ MANAGING MEMBER OFFICE HELD _____
☐ QUALIFIED MANAGER

13. Have you ever applied for or received a license or registration from the Department of Consumer Affairs, the Department of Professional and Vocational Standards, Bureau of Private Investigators and Adjusters, the Collection Agency Licensing Bureau, the Bureau of Collection and Investigative Services, or the Bureau of Security and Investigative Services? YES ☐ NO ☐

14. Have you or any partnership or corporation of which you were a member or officer had any license denied, suspended or revoked by any state, territory, or governmental agency? YES ☐ NO ☐

15. Have you ever used a name other than your present legal name? YES ☐ NO ☐

IMPORTANT: If you answered "YES" to any of the preceding questions, attach a supplementary statement giving a complete and detailed explanation, including dates, names used, license numbers, reasons, etc.

16. EMPLOYMENT HISTORY: Your past five-year employment history must be shown. List most recent experience first. Qualified managers must list three years of qualifying experience and attach their completed Qualifying Experience forms for any experience used to qualify for the license examination. If additional space is needed, attach a separate sheet.

NAME OF EMPLOYER	TELEPHONE NUMBER ( )
ADDRESS: NUMBER STREET CITY STATE ZIP CODE	
YOUR POSITION TITLE	SUPERVISOR'S NAME
DATES EMPLOYED (Month/Day/Year) From: To:	TOTAL NUMBER OF HOURS WORKED
NAME OF EMPLOYER	TELEPHONE NUMBER ( )
ADDRESS: NUMBER STREET CITY STATE ZIP CODE	
YOUR POSITION TITLE	SUPERVISOR'S NAME
DATES EMPLOYED (Month/Day/Year) From: To:	TOTAL NUMBER OF HOURS WORKED
NAME OF EMPLOYER	TELEPHONE NUMBER ( )
ADDRESS: NUMBER STREET CITY STATE ZIP CODE	
YOUR POSITION TITLE	SUPERVISOR'S NAME
DATES EMPLOYED (Month/Day/Year) From: To:	TOTAL NUMBER OF HOURS WORKED

17. List your residence addresses for the past five years. Give the most recent first, using additional sheets if necessary.

NUMBER AND STREET CITY STATE ZIP CODE	FROM	TO

ATTENTION – READ THE FOLLOWING PARAGRAPH CAREFULLY BEFORE SIGNING THIS FORM

I declare under penalty of perjury, under the laws of the State of California, that all information contained on this Personal Identification Form and any accompanying documents is true and correct, with full knowledge that all statements made in this application are subject to investigation and that any false or dishonest answer to any question may be grounds for denial or subsequent revocation of license.

SIGNATURE DATE

Attach one passport quality photograph, taken within the past year

.

Disclosure Language

Pursuant to Business and Professions Code section 30, providing your social security or individual taxpayer identification number is mandatory and will be used exclusively for tax enforcement purposes and for compliance with any judgment or order for family support in accordance with section 17520 of the Family Code. Your social security or individual taxpayer identification number may also be used for verification of licensure or examination status for national examination where licensure is reciprocal with a requesting state. If you fail to provide your social security or individual taxpayer identification number, you will be reported to the Franchise Tax Board, which may assess a $100 penalty against you.

Submission of the requested information is mandatory. The Bureau of Security and Investigative Services cannot consider your application for licensure or renewal unless you provide all of the requested information

Pursuant to the California Public Records Act (Gov. Code § 6250 et seq.) and the Information Practices Act (Civ. Code § 1798.61), the names and addresses of persons possessing a license or registration may be disclosed by the Department unless otherwise specifically exempt from disclosure under the law. We make every effort to protect the personal information you provide us. The information you provide, however, may be disclosed in response to a court or administrative order, a subpoena, or a search warrant.

Per the Information Practices Act, the Chief of the Bureau of Security and Investigative Services, Department of Consumer Affairs, is responsible for maintaining the information in this application. You have the right to review the records maintained on you by the Bureau or Department unless the records are exempt from disclosure by section 1798.40 of the Civil Code. Your completed application becomes the property of the Bureau and will be used by authorized personnel to determine your eligibility for a license, registration or permit. Information on your application may be transferred to other governmental or law enforcement agencies, as permitted by law.

For questions about this notice or access to your record, you may contact the Bureau by mail at Bureau of Security and Investigative Services, Attn: Public Records Liaison, P.O. Box 980550, Sacramento, CA 95798-0550, by phone at (916) 322-4000 or (800) 952-5210, or by e-mail at bsis.prarequests@dca.ca.gov. For questions about the Department's Privacy Policy, you may contact the Department of Consumer Affairs at 1625 North Market Boulevard, Sacramento, CA 95834, by phone at (800) 952-5210 or by e-mail at dca@dca.ca.gov.

BUSINESS, CONSUMER SERVICES AND HOUSING AGENCY • GAVIN NEWSOM, GOVERNOR
DEPARTMENT OF CONSUMER AFFAIRS
BUREAU OF SECURITY AND INVESTIGATIVE SERVICES
P.O. Box 989002, West Sacramento, CA 95798-9002
P (916) 322-4000 | P (800) 952-5210 | F (916) 575-7290 | www.bsis.ca.gov

PRIVATE INVESTIGATOR
REQUEST FOR AUTHORIZATION OF BUSINESS NAME

Any name under which you intend to do business, including your own name, must be submitted to the Bureau for approval pursuant to California Business and Professions Code section 7532. A Request for Authorization of Business Name form will not be accepted prior to an application for a license. Business may not be conducted under a fictitious or other business name unless written authorization is received from the Bureau. Any advertisement must contain the ***exact*** business name as approved by the Bureau. The use of a fictitious business name is subject to the provisions of California Business and Professions Code Chapter 5 (commencing with section 17900) of Part 3 of Division 7. This Chapter defines fictitious names and contains provisions regarding use and requirements for filing a statement with the local county clerk.

Private Investigator: Business and Professions Code section 7532 states in part:

The Bureau shall not authorize the use of a fictitious or other business name which is so similar to that of a public officer or agency or of that used by another licensee that the public may be confused or misled thereby.

* The Bureau must maintain a physical address of record on file at all times. If mail delivery to the physical location of the business is not possible, please list a mailing address in addition to the physical business address. If you are operating out of your residence and wish to keep your physical address confidential from public record, please submit a written request and attach it with this form.

1. Name of Qualified Manager

2. *Physical Business Address – Number and Street | City | State | Zip Code

3. *Mailing Address (If applicable) | City | State | Zip Code

4. Telephone Number Residence ( ) Business ( )

5. List proposed business names in the order of preference. At least three choices should be provided if a fictitious name is requested; however, five choices are preferable. If the first name listed is approved, additional names will not be considered. Other criteria for name approval:
   - If initials are to be used as part of the name, you must explain what they stand for.
   - The use of the following words will not be approved for an individual or partnership license: Corporation, Corp., Incorporated, Inc.
   - The following words or initials will not be approved as part of a fictitious or business name: U.S., United States, Federal, State, Bureau, Police, Task Force, Community, County.

1. _____
2. _____
3. _____
4. _____
5. _____

Department Use Only

Approved	Disapproved

6. CERTIFICATION:
If type of license is individual, the owner and QM must sign.
If type of license is a partnership, all partners must sign.
If type of license is a corporation, a duly authorized officer must sign.
If type of license is a LLC, a duly authorized member must sign.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature_____ Title _____ Date _____

Signature_____ Title _____ Date _____

Signature_____ Title _____ Date _____

Signature_____ Title _____ Date _____

Disclosure Language

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PRIVATE INVESTIGATOR QUALIFIED MANAGER QUALIFYING EXPERIENCE

STOP DO NOT LIVE SCAN UNTIL YOU HAVE SUBMITTED YOUR APPLICATION

(Not required by Private Investigator applicants who currently have a licensed Qualified Manager)

The information on this form is used to determine experience qualifications of applicants for licensure and is requested pursuant to California Business and Professions Code section 7541 and 7541.1. One form must be completed by each person (declarant) who is certifying the applicant's experience. **The declarant section of the form must be completed by someone other than the applicant who has knowledge of the work experience claimed by the applicant. Use a separate form for each employer.**

THIS SECTION TO BE COMPLETED BY THE APPLICANT

1. NAME OF APPLICANT				
2. RESIDENCE ADDRESS OF APPLICANT: NUMBER AND STREET	CITY	STATE	ZIP CODE	
3. APPLICANT'S TELEPHONE NUMBER Residence ( ) Business ( )				
4. NAME OF EMPLOYER FROM WHOM APPLICANT ACQUIRED EXPERIENCE				5. NAME OF IMMEDIATE SUPERVISOR
6. ADDRESS OF ABOVE EMPLOYER: STREET	CITY	STATE	ZIP CODE	7. EMPLOYER'S BUSINESS TELEPHONE NUMBER ( )

THIS SECTION TO BE COMPLETED BY THE DECLARANT

The declarant is the person who certifies or attests to the applicant's experience. The information given is important to the applicant since it may help that person qualify for a Private Investigator license. It is also important to the Bureau of Security and Investigative Services (Bureau) which uses it to determine if the applicant meets the experience requirements.

Please complete this form and return it to the applicant. Incomplete or inaccurate forms may be returned and/or may prevent or delay the applicant from qualifying for licensure. A Bureau representative may contact you by telephone or mail to verify statements or to get additional information regarding the applicant's experience qualifications. One year of experience is considered to be a minimum of 2,000 hours of compensated time for the specific license filed.

The applicant may have several declarants; you may be certifying only part of the experience required. The total time required to obtain a Private Investigator license is 6,000 hours of experience.

8. NAME OF DECLARANT				
9. ADDRESS OF DECLARANT: NUMBER AND STREET	CITY	STATE	ZIP CODE	
10. DECLARANT'S TELEPHONE NUMBER Residence ( ) Business ( )				11. DECLARANT'S LICENSE NUMBER IF LICENSED WITH THIS BUREAU
12. NAME OF DECLARANT'S EMPLOYER				
13. ADDRESS OF DECLARANT'S EMPLOYER: NUMBER AND STREET	CITY	STATE	ZIP CODE	

CONTINUED ON OTHER SIDE

14. DECLARANT'S RELATIONSHIP TO APPLICANT:
☐ PRESENT EMPLOYER ☐ FORMER EMPLOYER ☐ PRESENT SUPERVISOR ☐ FORMER SUPERVISOR
☐ OTHER (Give full explanation in Additional Comments section.)

15. DECLARANT HAS PERSONALLY KNOWN APPLICANT FOR: YEARS MONTHS	16. APPLICANT EMPLOYED BY EMPLOYER NAMED IN BOX NUMBER (4) FOR: YEARS MONTHS

17. Describe in detail the employment duties of the applicant during the period that you are declaring. Please indicate the percentage of time performing the types of duties listed in the box on the right. (Percentages must be shown)

POSITION TITLE

TOTAL HOURS ACCUMULATED

EXACT DATES OF EMPLOYMENT (Include Month, Day, and Year)

FROM: _____ TO: _____

DESCRIPTION OF DUTIES

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

IS/WAS APPLICANT:

Full-time ☐ Part-time ☐

If Part-time, number of hours worked per Week _____ or Month _____

On Payroll? Yes ☐ No ☐

Subcontractor? Yes ☐ No ☐

Other ☐

(Please use the space in the Additional Comments section for explanation.)

PERCENTAGE OF TIME (%)

Investigation _____

Office: (Explain) _____

Other: (Explain) _____

(Please use the space in the Additional Comments section for explanation.)

ADDITIONAL COMMENTS:

_____

_____

_____

_____

_____

Only an employer or his or her designated agent may certify the investigative experience obtained by the applicant.

The undersigned hereby declares under penalty of perjury, under the laws of the State of California, that all statements contained herein are true and correct.

SIGNATURE OF DECLARANT	TITLE	DATE

Disclosure Language

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