

RENEWAL LICENSE FOR PRIVATE INVESTIGATORS OR SECURITY GUARDS
Chapter 30, Article 18 of the WV Code

STATE OF WEST VIRGINIA
NATALIE E. TENNANT
SECRETARY OF STATE
BUILDING 1, SUITE 157-K
1900 KANAWHA BOULEVARD EAST
CHARLESTON, WV 25305

Please include the following with your renewal application for private investigator or security guard license:

1. A completed renewal application.
2. A completed finger print card. (front and back)
3. A copy of your bond continuation certificate or a valid surety bond.
4. A copy of your current business registration certificate from the West Virginia State Tax Department. (If you are not currently conducting business in West Virginia please send a letter stating you are not doing business.)
5. If you would like your photo on your ID card, please provide a passport size photo taken within the past year.
6. A check (payable to Secretary of State) or money order for your renewal fee:

West Virginia Resident Application:

Individual - \$150, *Combined Individual* - \$250, Firm - \$250, *Combined Firm* - \$450

Non-Resident Application:

Individual - \$550, *Combined Individual* - \$1050, Firm - \$550, *Combined Firm* - \$1050

7. Each **firm must submit a list of employees** who are working in West Virginia. This list must include the employee's name, address, birth date and social security number. Your application will not be processed until we receive this information.

If you have any questions concerning your renewal, please contact the licensing division of the Secretary of State's office at (304) 558-6000 or 1-866-SOS-VOTE.

4. Name and address of any sub agency, office or branch office for which renewal is requested:

5. If a firm, the name of the individual whose qualifications are presented to meet the experience/education requirements of WV Code, 30-18-2(1):[Qualifying Agent]_____

*****Note that if firm changes their current qualifying agent a complete application must be submitted for the new qualifying agent. License cannot be renewed until the new qualifying agent is approved.***

6. Has the applicant or any officer, partner or employee been charged, indicted, arrested or convicted of any criminal offenses against the United States or the laws of this State or of any State or territory during the last year? _____

If yes, where and what offense _____

7. Has the applicant or any officer, partner or employee been a patient in a public or private mental hospital within the last year? _____ If yes, where? _____

I, hereby certify that all answers and statements given herein are true and complete without reservations of any kind. It is understood that all facts contained in this application are open to thorough investigation.

Date

Signature of Individual or Officer

Title of Officer

CERTIFICATION OF CHILD SUPPORT OBLIGATIONS FORM

***** PLEASE COMPLETE AND RETURN WITH YOUR APPLICATION*****
(this form must be fully completed)

1. Name _____
Last First Middle

2. Address _____
Street City County State Zip

3. Phone _____ Social Security No. _____

4. If a firm please complete the following information:

Firm Name _____

Firm Address _____

Firm Telephone _____

Pursuant to WV Code §48A-5A-5(c) each applicant for license must answer the following questions and certify, under penalty of false swearing, that these answers are true and correct.

Please answer yes or no to the following questions:

- 1. **Do you have a child support obligation?** _____
- 2. **If the answer to question 1, above “is yes”, are you in arrearage?** _____
- 3. **If the answer to question 2, above “is yes”, does your arrearage equal or exceed the amount of child support payable for six (6) months?** _____
- 4. **Are you the subject of a child support related subpoena or warrant?** _____

I, _____ do hereby certify, under penalties of perjury and false swearing, that the above questions are true and correct to the best of my knowledge. I understand that if I make a false statement concerning any question on this application, I may be subject to disciplinary action including, but not limited to, immediate revocation or suspension of your private investigator and/or security guard license.

Date

Signature of Applicant