

STATE OF UTAH
DIVISION OF OCCUPATIONAL AND PROFESSIONAL LICENSING

APPLICATION FOR LICENSURE

**REPLACEMENT OF QUALIFYING AGENT
CONTRACT SECURITY COMPANY or ARMORED
CAR COMPANY**

APPLICATION INSTRUCTIONS AND INFORMATION

General Statement: The Utah Division of Occupational and Professional Licensing (DOPL) desires to provide courteous and timely service to all applicants for licensure. To facilitate the application process, **submit a complete application form including all applicable supporting documents and fees.** Failure to submit a complete application and supply all necessary information will delay processing and may result in denial of licensure. The fees are for processing your application and will not be refunded. **Please read all instructions carefully.**

Address of Record: The address you provide on this application will be your address of record. All correspondence from DOPL will be sent to that address. You are responsible to directly notify DOPL of any change to your address of record. Do not rely on a forwarding order.

Social Security Number: Your social security number is classified as a private record under the Utah Government Records Access and Management Act. It is used by DOPL as an individual identifier. It is also used for child support enforcement pursuant to Subsection 78-32-17(3) and is mandatory pursuant to Subsection 58-1-301(1), Utah Code Ann., which implements 42 U.S.C. 666(a)(13). If an SSN is not provided, the application is incomplete and may be denied.

SUPPORTING DOCUMENTS AND FEES:

If you are applying to replace the Qualifying Agent for a Contract Security Company **In addition to submitting a completed application, complete the following:**

1. Submit the original letter from DOPL's approved examination provider verifying that the qualifying agent has passed the Utah Security Personnel Qualifying Agent Examination. For examinations taken prior to January 1, 2008, the approved provider was Thomson Prometric; for examinations taken after that date, the provider is PSI.
2. Bring your completed application to DOPL's offices (*160 E. 300 S., Main Lobby, Salt Lake City*) to complete electronic fingerprinting using DOPL's Identix equipment.

OR

Submit **two** applicant fingerprint cards (*Form FD-258: white with blue lines*) to be used by DOPL for a search through the files of the Bureau of Criminal Identification (BCI) and the Federal

Bureau of Investigation (FBI). See “Additional Important Information.”

3. Submit a resume describing in detail the qualifying agent’s 6,000 hours of qualifying experience as a manager, supervisor, or administrator of a contract security company or as a supervisor of a federal, state, county, or local law enforcement agency. Include information naming the contract security company(s) the qualifying agent worked for and the positions the qualifying agent held with each contract security company or law enforcement agency. Describe in detail the supervisory or administrative responsibilities held in each position.
4. Submit a copy of the qualifying agent’s driver’s license or Utah identification card clearly indicating the driver’s license number or Utah ID number.
5. Submit a “Request for Verification of Qualifying Experience” form (*attached to this application*) documenting the qualifying agent’s qualifying experience consisting of 6,000 hours of experience as a manager, supervisor, or administrator of a contract security company or of supervisory experience with a federal, United States military, state, county, or municipal law enforcement agency.
6. Submit an **\$90.00** non-refundable application-processing fee, made payable to “DOPL,” that includes a \$50.00 fee for the replacement of the qualifying agent, a \$20.00 surcharge for a BCI Utah Criminal History file and fingerprint file search of the qualifying agent, and a \$20.00 surcharge for a FBI fingerprint file search of the qualifying agent.

If you are applying to replace the Qualifying Agent for an Armored Car Company In addition to submitting a completed application, complete the following:

1. Submit the original letter from DOPL’s approved examination provider verifying that the qualifying agent has passed the Utah Security Personnel Armored Car Qualifying Agent's Examination. For examinations taken after January 1, 2008, the provider is PSI.
2. Bring your completed application to DOPL’s offices (*160 E. 300 S., Main Lobby, Salt Lake City*) to complete electronic fingerprinting using DOPL’s Identix equipment.

OR

Submit **two** applicant fingerprint cards (*Form FD-258: white with blue lines*) to be used by DOPL for a search through the files of the Bureau of Criminal Identification (BCI) and the Federal Bureau of Investigation (FBI). See “Additional Important Information.”

3. Submit a resume describing in detail the qualifying agent’s 6,000 hours of qualifying experience as a manager, supervisor, or administrator of an armored car company or as a supervisor of a federal, state, county, or local law enforcement agency. Include information naming the armored car company(s) the qualifying agent worked for and the positions the qualifying agent held with each armored car company or law enforcement agency. Describe in detail the supervisory or administrative responsibilities held in each position.

4. Submit a copy of the qualifying agent's driver's license or Utah identification card clearly indicating the driver's license number or Utah ID number.
5. Submit a "Request for Verification of Qualifying Experience" form (*attached to this application*) documenting the qualifying agent's qualifying experience consisting of 6,000 hours of experience as a manager, supervisor, or administrator of an armored car company or of supervisory experience with a federal, United States military, state, county, or municipal law enforcement agency.
6. Submit an **\$90.00** non-refundable application-processing fee, made payable to "DOPL," that includes a \$50.00 fee for the replacement of the qualifying agent, a \$20.00 surcharge for a BCI Utah Criminal History file and fingerprint file search of the qualifying agent, and a \$20.00 surcharge for a FBI fingerprint file search of the qualifying agent.

ADDITIONAL IMPORTANT INFORMATION:

1. **Law and Rules Exam:** The applicant's qualifying agent, if an armored car company must pass the Utah Armored Car Qualifying Agents Examination or if a contract security company, the Utah Security Personnel Qualifying Agents Examination. Applicants must apply directly to PSI Examination Services at www.psiexams.com or 1-800-733-9267 to register for the examination.

The following applicable laws and rules are available on the Internet at www.dopl.utah.gov

- Division of Occupational & Professional Licensing Act
 - General Rules of the Division of Occupational & Professional Licensing
 - Security Personnel Licensing Act
 - Security Personnel Licensing Act Contract Security Rule
 - Security Personnel Licensing Act Armored Car Rule
2. **Current Documents:** Applications, statutes, rules, and forms are occasionally changed. Go to www.dopl.utah.gov to ensure you have the most recent version of these documents.
 3. **Examination Fees:** There are separate fees for all examinations. It is the responsibility of the applicant to submit the fees directly to the testing agency.

4. **Fingerprint Information:** All applicants are required to undergo a criminal background check and fingerprint search through the files of the Bureau of Criminal Identification (BCI) and the Federal Bureau of Investigation (FBI). **Fingerprint cards that are not complete and/or properly rolled will be rejected, delaying the licensure process.**

To expedite the licensure process, you can obtain electronic fingerprinting at DOPL's offices (*160 E. 300 S., Salt Lake City*), 8:00 a.m. to 5:00 p.m., Monday through Thursday, except holidays. Currently, there is no fee to roll electronic fingerprints for DOPL licensure applicants. A current government issued picture ID is required.

If you are unable to obtain electronic fingerprints at DOPL's office, you must include two (2) blue fingerprint cards (*Form FD-258*) with your application. Fingerprint cards are supplied with the application if obtained from DOPL. If you downloaded the application from the Internet, you may obtain fingerprint cards from DOPL, the Bureau of Criminal Identification (BCI), or your local police station. **To have your fingerprints rolled onto the blue fingerprint cards, you must go to BCI or a local police station.**

BUREAU OF CRIMINAL IDENTIFICATION (BCI) INFORMATION:

- Check with BCI for pricing of their services
- Walk-ins only; no appointments taken
- Fingerprinting and Photo Services are available from 8:00 a.m. – 5:00 p.m., Monday - Friday except holidays
- Government-issued picture ID required (*driver's license, state ID, passport, etc.*)
- Website: www.bci.utah.gov
- Phone: (801) 965-4569
- Address: 3888 W. 5400 S., Taylorsville, UT 84118
(*1/2 block west of Bangerter Highway, behind McDonalds*)

REVIEW OF YOUR FBI RECORD: If you wish to challenge the accuracy of the information in your FBI record, you should contact the agency that contributed the information in question. You may also direct the challenge to the FBI, Criminal Justice Information Services (CJIS) Division, Attn. SCU, Mod. D-2, 1000 Custer Hollow Road, Clarksburg, WV 26306. The FBI will forward the challenge to the respective agency.

5. **Application Processing:** DOPL requires approximately two weeks to process a complete application for licensure. In addition, an FBI file search takes approximately 12 weeks. An applicant may not begin working in the Contract Security or Armored Car business until the application has been approved.
6. **Updating Address Information:** It is your responsibility to maintain a current address with DOPL. If your address is incorrect, you will not receive renewal notices or other correspondence. Address changes can be made online at www.dopl.utah.gov.

7. **Acceptable Forms of Payment:** Licensure fees can be paid by check or money order, made payable to “DOPL.” Cash and debit/credit cards (*American Express, MasterCard, and Visa*) are also accepted in person at DOPL’s main office – but not over the telephone.

8. **Submit Completed Application to:**

By U.S. Mail	Division of Occupational & Professional Licensing P.O. Box 146741 Salt Lake City UT 84114-6741
By Express Mail or In Person	Division of Occupational & Professional Licensing 1 st Floor Lobby 160 E 300 S Salt Lake City UT 84111-2305

9. **Telephone Numbers:** (801) 530-6628
(866) 275-3675 – Toll-free in Utah

10. **Fax Number:** (801) 530-6511

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APPLICATION FOR REPLACEMENT OF QUALIFYING AGENT:

- Contract Security Company**
 Armored Car Company

The business legal name is the name that will appear on the license. This is normally the name registered with the Utah Division of Corporations. If there is a fictitious business name (*doing business as*), list that name also, e.g., XYZ Corporation dba XYZ Contract Security or Armored Car Company. If the applicant is not required to be registered with the Division of Corporations, it is the name of the contract security or armored car company or facility where the licensed activity is to be conducted.

Business Legal Name:	
License Number:	
Name of Qualifying Agent Being Replaced:	
License Number of Qualifying Agent Being Replaced:	
Company Mailing Address:	
City:	State:
Phone #:	E-Mail:

CONTACT PERSON FOR LICENSING PURPOSES:		
Full Name:	Title:	
Mailing Address:		
City:	State:	Zip:
Phone #:	E-Mail:	

<i>DO NOT WRITE IN THIS SECTION - FOR DIVISION USE ONLY</i>	
License/Certificate Number: _____	
Date License/Certificate Approved: ____ / ____ / ____	
Approved By: _____	
Date License/Certificate Denied: ____ / ____ / ____	
Denied By: _____	
Reason for Denial/Other Comments: _____	

AFFIDAVIT and RELEASE AUTHORIZATION FOR APPLICANT

1. I certify that I am qualified in all respects for the license for which I am applying in this application.
2. I certify that to the best of my knowledge, the information contained in the application and its supporting document(s) is free of fraud, forgery, misrepresentation, omission of material fact; is truthful, correct, and complete; discloses all material facts regarding the applicant; and that I will update or correct the application as necessary, prior to any action on my application.
3. I authorize all persons, institutions, organizations, schools, governmental agencies, employers, references, or any others not specifically included in the preceding characterization, which are set forth directly or by reference in this application, to release to the Division of Occupational and Professional Licensing, State of Utah, any files, records, or information of any type reasonably required for the Division of Occupational and Professional Licensing to properly evaluate my qualifications for licensure/certification/registration by the State of Utah.
4. I understand that it is the continuing responsibility of applicants and licensees to read, understand, and apply the requirements contained in all statutes and rules pertaining to the occupation or profession for which I am applying, and that failure to do so may result in civil, administrative, or criminal sanctions.

Name: _____ Signature: _____ Date: _____

QUALIFYING AGENT: ***Please list your <u>full legal name</u> as it appears on your driver's license, Social Security Card, etc.***				
Last Name:		First Name:		Middle Name:
Social Security Number: - -			Maiden Name:	
I certify under penalty of perjury that:				
<input type="checkbox"/> I am a citizen of the United States and I have a valid US Driver License or US State ID. License/State ID Number: _____ State: __				
<input type="checkbox"/> I am a citizen of the United States currently living outside the United States and do not have a valid US Drivers License or US State ID. Please attach a legible copy of your valid passport or other documentation to verify you are a legal citizen of the United States.				
<input type="checkbox"/> I am a non-citizen of the United States, who is lawfully present in the United States and I have a valid US Drivers License or US State ID. License/State ID Number: _____ State: __				
<input type="checkbox"/> I am a non-citizen of the United States, who is lawfully present in the United States and I do not have a valid US Drivers License or US State ID. Please attach a legible copy of your current and valid government issued document showing evidence of authorization to work in the United States.				
<input type="checkbox"/> I am a foreign national not physically present in the United States.				
Mailing Address:				
City:			State:	ZIP:
<input type="checkbox"/> Male	Date of Birth:	Phone #:	E-Mail:	
<input type="checkbox"/> Female				
List all other licenses, registrations, or certifications issued by any state which you now hold or have ever held in any profession. <i>(Use additional sheets if necessary.)</i>				
Profession:		Issuing State:		
License Number:		License Status:	Issue Date:	
Profession:		Issuing State:		
License Number:		License Status:	Issue Date:	
Profession:		Issuing State:		
License Number:		License Status:	Issue Date:	
Profession:		Issuing State:		
License Number:		License Status:	Issue Date:	

Relationship of Qualifying Agent to Contract Security Company or Armored Car Company: <i>(Check all that apply.)</i>		
<input type="checkbox"/> Officer	<input type="checkbox"/> Director	<input type="checkbox"/> Partner
<input type="checkbox"/> Proprietor	<input type="checkbox"/> Manager	
Examination Requirement:		
<input type="checkbox"/> The Utah Security personnel Qualifying Agents Exam, Date(s) Taken: ____/____/____ Score: _____		
<input type="checkbox"/> The Utah Security personnel Armored Car Qualifying Agents Exam, Date(s) Taken: ____/____/____ Score: _____		

CONTRACT SECURITY or ARMORED CAR COMPANY QUALIFYING AGENT QUALIFYING QUESTIONNAIRE

Answer “yes” or “no” for each question. Do not leave any question blank.

1. _____ Have you ever applied for or received a license, certificate, permit, or registration to practice in a regulated profession under any name other than the name listed on this application?
2. _____ Have you ever been denied the right to sit for a licensure examination?
3. _____ Have you ever had a license, certificate, permit, or registration to practice a regulated profession denied, conditioned, curtailed, limited, restricted, suspended, revoked, reprimanded, or disciplined in any way?
4. _____ Have you ever been permitted to resign or surrender your license, certificate, permit, or registration to practice in a regulated profession while under investigation or while action was pending against you by any licensing agency or criminal or administrative jurisdiction?
5. _____ Are you currently under investigation or is any disciplinary action pending against you now by any licensing agency or governmental agency?
6. _____ Is any action pending against you now by either the Federal Drug Enforcement Administration or any state drug enforcement agency?
7. _____ If you are licensed in the occupation/profession for which you are applying, would you pose a direct threat to yourself, to your patients or clients, or to the public health, safety, or welfare because of any circumstance or condition?
8. _____ Have you ever been declared by any court of competent jurisdiction incompetent by reason of mental defect or disease and not restored?
9. _____ Have you ever been involved as the abuser in any incident of verbal, physical, mental, or sexual abuse?
10. _____ Have you ever been terminated from a position because of drug use or abuse?
11. _____ Are you currently using or have you recently (*within 90 days*) used any drugs (*including recreational drugs*) without a valid prescription, the possession or distribution of which is unlawful under the Utah Controlled Substances Act or other applicable state or federal law?
(Continued on the next page.)

12. _____ Have you ever used any drugs without a valid prescription, the possession or distribution of which is unlawful under the Utah Controlled Substances Act or other applicable state or federal law, for which you have not successfully completed or are not now participating in a supervised drug rehabilitation program, or for which you have not otherwise been successfully rehabilitated?
13. _____ Do you currently have any criminal action pending?
14. _____ Have you pled guilty to, no contest to, entered into a plea in abeyance or been convicted of a misdemeanor in any jurisdiction within the past ten (10) years? Motor vehicle offenses such as driving while impaired or intoxicated must be disclosed but minor traffic offenses such as parking or speeding violations need not be listed.
15. _____ Have you ever pled guilty to, no contest to, or been convicted of a felony in any jurisdiction?
16. _____ Have you, in the past ten (10) years, been allowed to plea guilty or no contest, entered into a plea in abeyance of deferred sentence to any criminal charge?
17. _____ Have you ever been incarcerated for any reason in any federal, state or county correctional facility or in any correctional facility in any other jurisdiction or on probation/parole in any jurisdiction?



If you answered “yes” to questions 13, 14, 15, 16, or 17 above, you must submit a complete narrative of the circumstances that occurred for EACH and EVERY conviction, plea in abeyance, and/or deferred sentence. You must also attach copies of all applicable police report(s), court record(s), and probation/parole officer report(s).

If you are unable to obtain any of the records required above, you must submit documentation on official letterhead from the police department and/or court indicating that the information is no longer available.

If you have formally expunged a criminal record as evidenced by a court order signed by a judge, you do not need to disclose that criminal history. Expungement orders must be sent to the Bureau of Criminal Identification and the FBI to enable the expungement to be completed and the criminal history eliminated from the records.



If you answered “yes” to any of the above questions, enclose with this application complete information with respect to all circumstances and the final result, if such has been reached.

A “yes” answer does not necessarily mean you will not be granted a license; however, the Division may request additional documentation if the information submitted is insufficient.

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REQUEST FOR VERIFICATION OF QUALIFYING EXPERIENCE

PART 1 - TO BE COMPLETED BY THE APPLICANT: Complete Part I and submit a copy of the entire document to each Contract Security or Armored Car Company or Law Enforcement Agency where you received qualifying experience.

Applicant Name: _____

Address: _____ City: _____ State: _____ Zip: _____

1. Contract Security or Armored Car Company / Law Enforcement Agency: _____

Phone: _____ Dates of Employment: from ___/___/___ to ___/___/___

Address: _____ City: _____ State: _____ Zip: _____

Number of hours as manager, supervisor, or administrator: _____

2. Contract Security or Armored Car Company / Law Enforcement Agency: _____

Phone: _____ Dates of Employment: from ___/___/___ to ___/___/___

Address: _____ City: _____ State: _____ Zip: _____

Number of hours as manager, supervisor, or administrator: _____

3. Contract Security or Armored Car Company / Law Enforcement Agency: _____

Phone: _____ Dates of Employment: from ___/___/___ to ___/___/___

Address: _____ City: _____ State: _____ Zip: _____

Number of hours as manager, supervisor, or administrator: _____

Applicant Signature: _____

Date of Signature: ___/___/___

PART 2 - TO BE COMPLETED BY AN OFFICIAL REPRESENTATIVE OF THE CONTRACT SECURITY or ARMORED CAR COMPANY or LAW ENFORCEMENT AGENCY:

Please review Part I of this form and furnish the information requested below. Sign the document, place the completed form in a sealed envelope, and return it to the applicant.

Contract Security or Armored Car Company / Law Enforcement Agency: _____

Answer "yes" or "no."

_____ Do you agree with the information listed Part I from the applicant?

_____ Would you re-hire the applicant?

_____ Would you recommend that this applicant be approved as a Qualifying Agent?

If "No," please indicate reason(s): _____

What position did the applicant have with your company? (Please check all that apply.)

- Officer Partner Manager
- Director Proprietor Other, specify: _____

GENERAL WORK HISTORY:

- Outstanding Exceeded Requirements Met Requirements
- Needed Improvement Unsatisfactory

I have reviewed ALL the information on this document and attest that to the best of my knowledge the information concerning the contract security or armored car company / law enforcement agency I represent is accurate and truthful.

Contract Security or Armored Car Company / Law Enforcement Agency Representative

Name: _____ Title: _____

License Number (if applicable): _____ State of Licensure: _____

Contract Security or Armored Car Company / Law Enforcement Agency Representative

Signature: _____ Date: ____ / ____ / ____