Kansas Attorney General
Derek Schmidt

Private Detective Licensing Unit
120 SW 10th Avenue, 2nd Floor
Topeka, KS 66612-1597
PHONE: (785) 296-4240 ● FAX: (785) 368-6468
www.ag.ks.gov

AGENCY LICENSE – *INITIAL* APPLICATION

This application is submitted under oath and must be signed in the presence of a notary public. Knowingly providing false information on this application or any accompanying documents may result in the denial of a license, and subject the applicant to prosecution for the crime of perjury, K.S.A. 21-5903, and amendments thereto, a severity level nine (9) non-person felony, or other applicable criminal charges.

Part I: Instructions

Agency Name: _____ Date: _____
(Print agency name) (Month/day/year)

In addition to the completed agency application form, the following items must be submitted:

- If applicable, attach a copy of the agency's occupation or business license, or application therefor, issued by the city, county or state where the agency maintains its principal place of business.
- If registered as a corporation, limited liability company or partnership, attach a copy of the agency's certificate and most current annual report listing the officers and directors of the business entity.
- $250.00 Agency Application Fee. Submit a personal check, money order or cashier's check made payable to the Attorney General. **The application fee is non-refundable.**
- Verification of a corporate surety bond in the amount of $100,000 or more OR a certificate of insurance showing general liability insurance providing coverage in the amount of $100,000 or more for bodily injury or property damage caused by negligence and errors or omissions; OR verification of $100,000 or cash deposit with the state treasurer.
- Completed initial private detective application form for the *applicant* submitting this application on behalf of the agency. No additional fee is required if the applicant does not intend to act in the capacity of a private detective or otherwise engage in private detective business.
- Completed initial private detective application forms for each *owner, officer, director, partner or associate* of the agency. No additional fee is required if the applicant does not intend to act in the capacity of a private detective or otherwise engage in private detective business.

This application form must be completed in its entirety and submitted along with supporting documents and applications completed by all individuals meeting any of the criteria listed above. An incomplete application will result in processing delays. Generally, applications will be processed within 90 days of receipt.

Fees and Application Forms:

A complete schedule of fees and application materials is available at no cost on the Attorney General's website, www.ag.ks.gov. Printed application packets are available through the Private Detective Licensing Unit. A fee of $15.00 must accompany each request for an application packet.

Agency License Certificate:

Upon approval of this application, the agency license will be mailed to the attention of the individual completing this application at the agency business address. The license will be valid two years from the date of issuance. It will be renewable every two years. The agency license certificate must be posted in a conspicuous place in the principal place of business.

Other Information:

The following statutes and regulations pertaining to the Private Detective Licensing Act are posted on the Attorney General's website at www.ag.ks.gov.

- Private Detective Licensing Act - K.S.A. 75-7b01 et seq.
- Kansas Administrative Regulations - K.A.R 16-1-7 and K.A.R. 16-2-1(a) through K.A.R. 16-6-3
- Criminal Carrying of Weapons - K.S.A 21-6302 (d) (3).

Please direct questions to the Private Detective Licensing Unit, Office of Attorney General, (785) 296-4240, or email ksagpi@ksag.org.

Mail completed application and all attachments to:

Private Detective Licensing
Office of Attorney General
120 SW 10th Ave
Topeka, Kansas 66612-1597

Part II: Agency Information

A private detective agency license is required if you or your business entity intends to employ any person(s) to engage in detective business.

1. Agency name: _____
(Print agency name)

Type of business: ☐ Corporation ☐ Partnership ☐ Association ☐ Sole Proprietorship

2. Person submitting application on behalf of agency: _____
(Print last name, first name , middle name)

3. Street address of agency: _____
(Street Number)

_____
(City, State & Zip Code)

4. Business mailing address: _____
(if different than #3) _____

_____

5. Telephone number: _____ FAX number: _____

E-mail address: _____

6. Provide a statement of the general nature of the private detective business in which the agency intends to engage: _____

_____

_____

_____

_____

7. Provide the following information* for **each** officer, director, partner or associate of the agency. **If an officer, director, partner or associate intends to engage in private detective business, that individual must complete and submit the initial private detective license application.**

- Name _____ Position _____
  (Print last name, first name, middle name)

  Res. address _____
  (Number & Street) (City) (State) (Zip)

  Date of birth: _____ SSN# _____ Driver's Lic #_____
  (Month/day/year)

  Will engage in detective business? ☐ Yes ☐ No

- Name _____ Position _____
  (Print last name, first name, middle name)

  Res. address _____
  (Number & Street) (City) (State) (Zip)

  Date of birth: _____ SSN# _____ Driver's Lic #_____
  (Month/day/year)

  Will engage in detective business? ☐ Yes ☐ No

- Name _____ Position _____
  (Print last name, first name, middle name)

  Res. address _____
  (Number & Street) (City) (State) (Zip)

  Date of birth: _____ SSN# _____ Driver's Lic #_____
  (Month/day/year)

  Will engage in detective business? ☐ Yes ☐ No

- Name _____ Position _____
  (Print last name, first name, middle name)

  Res. address _____
  (Number & Street) (City) (State) (Zip)

  Date of birth: _____ SSN# _____ Driver's Lic #_____
  (Month/day/year)

  Will engage in detective business? ☐ Yes ☐ No

- Name _____ Position _____
  (Print last name, first name, middle name)

  Res. address _____
  (Number & Street) (City) (State) (Zip)

  Date of birth: _____ SSN# _____ Driver's Lic #_____
  (Month/day/year)

  Will engage in detective business? ☐ Yes ☐ No

- Name _____ Position _____
  (Print last name, first name, middle name)

  Res. address _____
  (Number & Street) (City) (State) (Zip)

  Date of birth: _____ SSN# _____ Driver's Lic #_____
  (Month/day/year)

  Will engage in detective business? ☐ Yes ☐ No

- Name _____ Position _____
  (Print last name, first name, middle name)

  Res. address _____
  (Number & Street) (City) (State) (Zip)

  Date of birth: _____ SSN# _____ Driver's Lic #_____
  (Month/day/year)

  Will engage in detective business? ☐ Yes ☐ No

Attach additional copies of this page, if needed, to list **all** owners, officers, directors, partners and associates.

*Providing a social security number is voluntary, but it is requested pursuant to K.S.A.74-139 and 74-148 and may be provided to the Kansas Director of Taxation for tax purposes and/or the Department for Children and Families for child support purposes.

Please answer the following questions. If you answer "yes" to any of these questions, please provide a full explanation on a separate sheet of paper and attach to the application.

8. In the past, to your knowledge, has any owner, officer, director, partner or associate of the agency:

   (a) been arrested or cited for **any** crime other than minor traffic violations in this state or any other state?

   ☐ Yes ☐ No

   (b) been indicted or convicted of a felony in this state or any other state?

   ☐ Yes ☐ No

   (c) been convicted of a misdemeanor in this state or any other state?

   ☐ Yes ☐ No

   (d) been the subject of a complaint to any department, bureau, board, prosecuting officer, criminal court, or any other governmental or regulatory body or officer in this state or any other state?

   ☐ Yes ☐ No

   (e) had any license as a private detective, issued in Kansas or any other jurisdiction, denied, suspended, revoked, or subjected to other disciplinary action in this state or any other state?

   ☐ Yes ☐ No

   (f) become a law enforcement officer or been granted a special commission from any law enforcement?

   ☐ Yes ☐ No

   (g) been found incompetent, incapacitated or impaired by reason of mental condition, deficiency or disease?

   ☐ Yes ☐ No

   (h) become addicted to, dependent on or abusive of alcohol or any controlled substance, narcotic or drugs?

   ☐ Yes ☐ No

   (i) received inpatient or outpatient treatment for alcohol, any controlled substance, narcotic or drug addiction, dependence or abuse?

   ☐ Yes ☐ No

<u>Remember</u>: Any owner, officer, director, partner or associate of the agency who intends to personally engage in detective business must complete and submit an initial private detective license application.

APPLICANT'S AFFIDAVIT

(Must be signed before a Notary Public)

I, _____, am authorized by the _____,
(Print applicant name) (Print agency name)
Private Detective Agency, to sign the agency application. I have read and examined the statements made in the above application and the information contained herein is true and correct to the best of my knowledge and belief. I understand that private detective agencies can only employ licensed private detectives to engage in investigative activities, such as surveillance, interviews and background investigations. I, and the Agency represented herein, understand that in Kansas the unlicensed practice of 'detective business,' as defined by K.S.A. 75-7b01, is a crime. Anyone, except as authorized under K.S.A. 75-7b03, who engages in 'detective business' in Kansas must be licensed as a private detective by the Kansas Attorney General.

_____
Applicant's Signature

_____
Title or Position in the Agency

_____
Date

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

_____
Notary's Signature

My commission expires: _____