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

FIREARM PERMIT – *RENEWAL* APPLICATION

1. Name: _____ Detective Lic. #: _____
(Print Last name, first name, middle name or initial)

Name of agency or d/b/a (doing business as) name: _____

Business mailing address: _____
(Print street, city, zip code)
_____

Residential address: _____
(Print street, city, zip code)
_____

Telephone numbers:_____/_____/_____/_____
Work Home Cell Phone Fax

2. Explain the need to carry a firearm in your work as a private detective. _____

_____

Is it necessary for you to carry a firearm in order to protect your life or property, or to protect the life or the property of your clients?

☐Yes ☐No

3. Within each of the past 2 years, have you:

(a) satisfactorily completed a minimum of 2 clock-hours of training conducted by a certified firearms trainer in any of the following areas?

☐Yes ☐No

Check any area completed.

_____ Instruction in lawful use of force by a private detective, including concepts of civil liability and criminal culpability;

_____ weapons fundamentals and safety;

_____ marksmanship fundamentals and safety procedures;

_____ care, cleaning and maintenance of weapons;

_____ familiarization instruction in basic weapon retention and disarming techniques;

_____ familiarization instruction in daylight, dim light and darkness shooting; and

_____ instruction and shooting exercises with semi-automatic pistols or revolvers;

(b) satisfactorily completed a daylight course of fire that required you to fire 35 out of 50 rounds into the center mass portion of the National Rifle Association TQ-19 target in a static position which varied from a minimum of 3 feet to a maximum of 75 feet?

☐Yes ☐No

Name of certified trainer who provided training and certified satisfactory completion of course of fire:

_____
(Certified firearms instructor's name)

Attach a 'Notice of Completion' training form to this application.

Note: If you were a law enforcement officer within the past 24 months, attach a copy of your firearms training. K.S.A.75-7b17(a)(2)(A)

4. Identify **all** firearms for which you are applying for a firearm permit:

	Make or Manufacturer	Model	Serial Number	Caliber	Barrel Length
1.					
2.					
3.					
4.					

The above information is true and correct to the best of my knowledge.

_____ Date

_____ Signature of applicant

Application fee for a firearm permit is $50.00. Make money order, cashier check or personal check payable to the Attorney General. Mail the completed firearm permit application, 'Notice of Completion' training form and application fee to Private Detective Licensing, Office of Attorney General, 120 SW 10th Ave, Topeka, Kansas 66612-1597. If you have questions please call 785-296-4240, or email ksagpi@ksag.org.

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FIREARM PERMIT TRAINING – NOTICE OF COMPLETION FORM

This form is to be completed by the firearms trainer.

Name of private detective applicant: _____License Number: _____
(Print or Type)

Name of certified training instructor: _____
(Print or Type)

Mark which training applies for this applicant:

☐Initial firearms permit ☐Renewal of firearm permit

☐Re-certification (off year training) ☐Change or addition of a firearm(s)

Education and training course:

Did applicant successfully complete the education & training course? ☐Yes ☐No

Applicant's written examination score: _____

Date(s) of training course: _____

Firing range proficiency: Did applicant successfully fire 35 out of 50 rounds into the center mass portion of the National Rifle Association TQ-19 target in a static position from distances which varied between a minimum of 3 feet to a maximum of 75 feet?

☐Yes ☐No

Location of training: _____

Location of range (if different from training site): _____

Identify **all** firearms for which the applicant has completed a training course for the applicant's firearm permit:

Manufacture	Model Number	Serial #	Caliber	Barrel Length
1.				
2.				
3.				
4.				

I hereby certify that the above-named applicant has successfully completed the firearms and lawful use of force class. This is in accordance with the training plan on file at the Office of Attorney General. The above information is true and correct to the best of my knowledge.

_____ _____

Date Signature of certified firearm instructor

Firearm trainers must submit a completed notice of completion form to the Attorney General whenever an applicant for a firearm permit, an applicant for renewal of a firearm permit or re-certification for the firearm permit has completed a firearm training course. Such notice shall be made within 10 days of the date the training course was completed. A copy of this notice shall be given to the applicant and the firearm trainer shall retain a copy.

Note: Some firearms trainers may have their own version of the 'Notice of Completion Form'. If it contains all pertinent information, it is acceptable.

CERTIFIED FIREARMS TRAINERS
For Kansas Private Detectives

Patrick Atkins
D/B/A/Paragon Investigations
330 N. Main Street
Wichita, KS 67202
Phone: 316-371-7592 - Fax: 316-267-4160
Email: paragoninvestigations@hotmail.com

Samuel Burroughs
Clarence M. Kelley & Associates, Inc.
6840 Silverheel Street
Shawnee, KS 66226
Phone: 913-647-7700 - Fax: 913-647-7710
Email: sburroughs@cmka.com

Perry Chad Clayton
923 NE Woods Chapel Rd, Suite 133
Lee's Summit, MO 64064
Phone: 800-985-9038 - Fax: 888-675-8359
Email: chad.clayton_cpp@sbcglobal.net

Kevin Scott Harris
20505 W 37th N.
Colwich, KS 67030
Phone: 316-518-0032 - Fax: 316-796-0294
Email: scott@eagledefense.net

Mike Jordan
Safeguard Investigations & Consultants
3150 N. Lorraine
Hutchinson, KS 67502
Phone: 620-875-1650
Email: mike_jordan@consultant.com

Gerald J. Lewis
MPI Protective Service Corporation
2418 Crossroads Drive, Suite 1200
Madison, WI 53718
Phone: 608-243-7946 - Fax: 608-243-7946
Email: jlewis@mpiprotective.com

Joe Lewis
13505 Mur-Len, Suite 105-251
Olathe, KS 66062
Phone: 913-406-2698
Email: shawneeshamus@sbcglobal.net

Robert McCaslin
Associated Investigators & Security, Inc.
8106 E. Clay
Wichita, KS 67216
Phone: 316-207-7631 - Fax: 316-291-9477
Email: mac_mccaslin@yahoo.com

Bradley J. Smith
MPI Protective Service Corporation
2418 Crossroads Drive, Suite 1200
Madison, WI 53718
Phone: 608-243-7946 - Fax: 608-243-7946
Email: bsmith@mpiprotective.com

George A. Smith
MPI Protective Service Corporation
2418 Crossroads Drive, Suite 1200
Madison, WI 53718
Phone: 608-243-7946 - Fax: 608-243-7946
Email: gsmith@mpiprotective.com

Shawn Smith
MPI Protective Service Corporation
2418 Crossroads Drive, Suite 1200
Madison, WI 53718
Phone: 608-243-7946 - Fax: 608-243-7946
Email: ssmith@mpiprotective.com

Charles Stephenson
The Orion Group, Inc.
6600 W. 95th Street, Suite 102
Overland Park, KS 66212
Phone: 913-385-5657 - Fax: 913-385-5740
Email: chuck@kcdetective.com

Gary Weaver
1st Class Investigations
PO Box 414
Rose Hill, KS 67133
Phone: 316-866-2665 - Fax: 316-866-2594
Email: gweaver-pi@cox.net

Madison Webb
Executive Solutions
9127 Slater Street
Overland Park, KS 66212
Phone: 913-649-2328 - Fax: 913-649-2328
Email: madisonluapp@hotmail.com

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