# APPLICATION FOR REGISTRANT

Under the Private Investigator and Patrol Operators Ordinance

## INCORRECT RESPONSES ON THIS FORM MAY RESULT IN DENIAL OF YOUR APPLICATION

**ATTENTION!** Incorrect or false information on this form may result in **DENIAL** of your application. It is not what you did or may have done that causes most denials. The cause is usually from answering questions incompletely, incorrectly or falsely. If you have any doubt about your past history, it is highly recommended, **before you fill out your application**, that you request copies of your traffic violation records and any other criminal records from **City, County, State or Federal law enforcement organizations**.

By my initials hereafter, I state that I have read and understand the above paragraph. _____ (Applicant's initials)

1. Date of application: _____, 20 _____
2. Name of applicant: _____
3. Name of Sponsor/Licensee (Employer): _____
4. Address of Sponsor/Licensee (Employer): _____
5. Classification of Sponsor/Licensee: Private Patrol Operator _____ Private Investigator _____ Both ____
6. Applicant's date of birth: _____
7. Applicant's present address: _____
8. Applicant's Social Security number:_____
9. Please list all residences the applicant has had for the past 10 years in chronological order.

| Address | Dates |
|---|---|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

10. State all occupations the applicant has had during the last 10 years in chronological order.

Occupation: _____ Name of Supervisor: _____

Employer: _____ Dates of Employment: _____

Address of Employer: _____

Occupation: _____ Name of Supervisor: _____

Employer: _____ Dates of Employment: _____

Address of Employer: _____

Occupation: _____ Name of Supervisor: _____

Employer: _____ Dates of Employment: _____

Address of Employer: _____

Occupation: _____ Name of Supervisor: _____

Employer: _____ Dates of Employment: _____

Address of Employer: _____

Occupation: _____ Name of Supervisor: _____

Employer: _____ Dates of Employment: _____

Address of Employer: _____

11. Attached is a full set of classifiable fingerprints and one photograph of the applicant taken within the past 6 months.

12. A brief outline of applicant's background as a private patrol operator or private investigator is as follows:
I have worked in a related field for a period of _____ years.

_____

_____

_____

_____

13. Has the applicant as an adult or juvenile, **EVER** **been arrested or detained** relating to any criminal offense (non-traffic), regardless of court disposition, dismissal or plea agreement?

Yes ____ No ____ If yes, describe, listing dates, locations and offenses. _____

_____

_____

_____

14. Has the applicant, as an adult or juvenile, **EVER** **been convicted of any criminal offense** (excluding minor traffic violations), regardless of sentence or other disposition?

Yes ____ No ____ If yes, describe, listing dates, locations and offenses. _____

_____

_____

_____

15. Has the applicant **EVER** **been refused** a license as a private investigator or private patrol operator or has the applicant had such a license revoked or suspended for cause?

Yes ____ No ____ If yes, describe, listing dates, locations and offenses. _____

_____

_____

_____

16. Is the applicant presently licensed as a private investigator or private patrol operator under the Private Investigators Act of the State of New Mexico? Yes ____ No ____

If yes, give NM State Private Patrol Operator or NM State Private Investigator license number: _____

**FOR ASSISTANCE IN COMPILING YOUR CRIMINAL AND/OR TRAFFIC OFFENSE HISTORY, CONTACT LAW ENFORCEMENT AGENCIES AND COURTS WITH WHICH YOU HAVE HAD PREVIOUS CONTACT.**

STATE OF NEW MEXICO )
COUNTY OF SAN JUAN ) ss.
CITY OF FARMINGTON )

The information contained in this application is true and complete to the best of my knowledge.

_____
Signature of Applicant

Acknowledged before me this ____ day of _____, 20 ____.

_____
Notary Public

My Commission Expires:

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**OFFICIAL USE ONLY**

The Farmington Police Department has completed an investigation of the applicant and the above application is

_____ **approved** and a license should be issued in the name of the applicant.

_____ **denied** for the following reason(s): _____

_____

_____

_____ _____
Date Chief of Police or Designee

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**FOR DENIALS ONLY**

Letter of denial sent: _____ Last date to appeal: _____

Appeal received? Yes _____ No _____ Date received: _____

Appeal Hearing date: _____ City Council **approved** ____**/denied**____

_____
City Clerk

# AFFIDAVIT

**STATE OF NEW MEXICO )**
**COUNTY OF SAN JUAN ) ss.**
**CITY OF FARMINGTON )**

I, _____, being first duly sworn upon oath, state:

I have made application under Chapter 8, Article 9 as a Licensee or Registrant in the City of Farmington, New Mexico and I understand that:

this necessitates a background check on me;

any false information provided by me on this application is grounds for denial of the City of Farmington private patrol operator/investigator license; and

I hereby give my consent to the City of Farmington to conduct such a check and appoint the City as my representative to have access to any and all information concerning me, including arrest record information.

Further, affiant states not.

_____
Signature

_____
Street Address

_____
City, State, Zip Code

Acknowledged before me this _____ day of _____, 20_____.

_____
Notary Public

My Commission Expires:

_____