



OHIO DEPARTMENT OF PUBLIC SAFETY
OHIO HOMELAND SECURITY – PI/SG
1970 West Broad Street
P.O. Box 182001
Columbus, OH 43218-2001
PHONE (614) 466-4130 FAX (614) 752-6380
http://homelandsecurity.ohio.gov/ohs_pisg.stm

PI/SG

EMPLOYEE REGISTRATION APPLICATION INSTRUCTIONS

PLEASE FOLLOW THE INSTRUCTIONS CAREFULLY.

- Only one (1) individual per application.
- **Print** or **Type** the form.
- Select the class of the registration.
- Check the appropriate item indicating the purpose for which this application is being filed.
- Enter Licensee Information.
- Enter Applicant Information.
- Affix a 2" x 2" color photograph of the registrant. Photo must be on a white background with the full-face visible (No Headgear) and be no more than 30 day old. Copies of driver license photos are not acceptable. Write the name of the registrant on the back of the photo and use only transparent tape to affix the photograph. **Do not** use glue or opaque tape.
- Incomplete applications and applications that are filled out improperly will be returned for correction
- Mail the application and any required attachments to the address listed above.

FINGERPRINT REQUIREMENTS:

To be registered as a private investigator or security guard in Ohio, you must submit an application with all required enclosures. In addition, you must provide fingerprints to the Attorney General's Office, Bureau of Criminal Identification and Investigation (BCI&I) for the purpose of conducting a criminal records check.

All fingerprint information and payments for BCI&I criminal records checks must be submitted to BCI&I. The cost is: \$22.00 for state criminal records check for new or re-hire registrations.

To be registered as a Private Investigator or Security Guard with a firearm bearer notation (FAB) you must complete the HLS 0069.

For additional information on submitting fingerprints, a link to the Attorney General's Web site www.ag.state.oh.us can be found on the Ohio Homeland Security Division's Web site http://homelandsecurity.ohio.gov/ohs_pisg.stm. There you can find a list of WebCheck locations and "WebCheck Community" throughout the state. In order to insure that results of criminal records checks are returned to the Ohio Department of Public Safety, PLEASE BE CERTAIN TO INDICATE THE "MAIL TO" ADDRESS as the **Ohio Department Of Public Safety** whenever fingerprints are submitted electronically. **Please remember if using fingerprint cards, send them with proper payment directly to BCI&I. Do not forward them with this application form.**

Notice: Entering information in the date fingerprints submitted and the authentication number fields is NOT the official criminal records check as required by Ohio Revised Code Chapter 4749. If these fields are incomplete the application will be returned. The criminal records check requirement will not be complete until the official results are received from BCI&I and any necessary additional research has been completed. **It is the responsibility of the company and the registrant to insure that the PI/SG unit receives the criminal records checks and any necessary documents to complete the review.**

ORC 4749.06 Registration of Investigator or Security Guard Employees; Identification Card; Firearms Training. (B)(2) The employee shall submit one complete set of fingerprints directly to the superintendent of the Bureau of Criminal Identification and Investigation for the purpose of conducting a criminal records check. The employee shall provide the fingerprints using a method the superintendent prescribes pursuant to division (C)(2) of section 109.572 [109.57.2] of the Revised Code and fill out the form the superintendent prescribes pursuant to division (C)(1) of section 109.572 [109.57.2] of the Revised Code. An employee who intends to carry a firearm as defined in section 2923.11 of the Revised Code in the course of business or employment shall so notify the superintendent. This notification is in addition to any other requirement related to carrying a firearm that applies to the employee. The individual or corporation requesting the criminal records check shall pay the fee the superintendent prescribes.

Currently Registered Employees applying only for name change, replacement card or class change do not need to submit a new criminal records check.

Notice: Evidence that payment has been refused by the drawer's bank upon a check drawn to the order of the **Ohio Treasurer Kevin L. Boyce**, shall constitute prima facie evidence of misconduct and shall constitute a violation of section 4749.13 of the Revised Code.

Additional information, the rules and additional forms can be found at http://homelandsecurity.ohio.gov/ohs_pisg.stm Questions can be directed to the Ohio Homeland Security, **Private Investigator/Security Guard Licensing and Registration (PI/SG) Unit** at (614) 466-4130.

**MAKE CHECK OR MONEY ORDERS PAYABLE TO
OHIO TREASURER KEVIN L. BOYCE.**



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EMPLOYEE REGISTRATION APPLICATION

Affix a 2" x 2" color photograph of the registrant in this space.

Photo Must be on a white background with the Full Face Visible (No Headgear) and be no more than 30 day old. Copies of Driver license Photos are not acceptable.

Write the name of the registrant on the back of the photo and use only Transparent Tape to affix the photograph. **Do not** use glue or opaque tape.

Use this form to register new employees, file a change-of-name or request a replacement identification card.

- This form is interactive. You may, before printing, type your responses directly onto the form. Otherwise, this form must be typewritten or printed legibly in black ink.
- Fill out all applicable sections of this application. Incomplete applications and applications that are filled out improperly will be returned for correction.
- A check or money order for fees, made payable to, **Ohio Treasurer Kevin L. Boyce**, **MUST** be remitted with this application. **Cash is not accepted.**

CLASS OF REGISTRATION (CHECK ONE)

PURPOSE OF APPLICATION (CHECK ONE)

<input type="checkbox"/> Private Investigator & Security Guard Registration (A) <input type="checkbox"/> Private Investigator Registration (B) <input type="checkbox"/> Security Guard Registration Only (C)	<input type="checkbox"/> New Registration/Late Renewal/Rehire	\$35.00	\$
	<input type="checkbox"/> Replacement Card	\$ 5.00	\$
	<input type="checkbox"/> Name Change	\$ 5.00	\$
	<input type="checkbox"/> Class Change	\$ 5.00	\$

LICENSEE INFORMATION

COMPANY NAME		LICENSEE FILE #
DOING BUSINESS AS (DBA) NAME		FED TAX ID #
ADDRESS (PHYSICAL ADDRESS)		
CITY	STATE	ZIP CODE
DAYTIME PHONE # () -	FAX # () -	E-MAIL ADDRESS

EMPLOYEE REGISTRATION INFORMATION

FIRST NAME	MI	LAST NAME	SUFFIX	SSN
HOME ADDRESS (NO P.O. BOXES)		PHONE # () -	DATE OF BIRTH	
CITY	STATE	ZIP CODE	COUNTY	
CITY OF BIRTH	STATE OF BIRTH	COUNTRY OF BIRTH	HEIGHT	WEIGHT LBS.
HAIR COLOR		EYE COLOR		
HIRE DATE	DRIVER LICENSE #		STATE ISSUED	
SCARS AND MARKS				
DATE FINGERPRINTS SUBMITTED			AUTHENTICATION #	

NAME CHANGE REQUESTS Complete former name information if applying for a name change. Include copy of new Social Security Card.

FORMER FIRST NAME	FORMER MIDDLE NAME	FORMER LAST NAME
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CERTIFICATION (CHECK ONE)

- I have not been convicted of a felony within the past 20 years.
- I have been convicted of a felony within the past 20 years, but the conviction was expunged and I have attached certified copies of the documentation expunging the conviction.

I affirm that the information provided within and attached hereto this application is complete and accurate.

PRINT NAME OF EMPLOYEE	SIGNATURE OF EMPLOYEE X	DATE
PRINT NAME OF QUALIFYING AGENT	SIGNATURE OF QUALIFYING AGENT X	DATE