



500 James Robertson Parkway  
Nashville, TN 37243  
Tel: 615-741-2241  
<http://www.tn.gov/commerce/>

FOR OFFICE USE ONLY	
LICENSE TYPE	3703
TRANSACTION TYPE	1012
FILE NUMBER	_____
ENTITY NUMBER	_____
APPLICATION NUMBER	_____
AMOUNT PAID	_____

**CONTRACT SECURITY COMPANY INITIAL APPLICATION**

Only applicants with complete applications are eligible for consideration. You may attach additional pages as necessary. Please type or print clearly in ink. Checks should be made payable to the Department of Commerce & Insurance.

Send the completed application to:

Attn: PRIVATE PROTECTIVE SERVICES  
**The Department of Commerce & Insurance**  
**500 James Robertson Parkway**  
**Nashville, TN 37243**

**Section One:** Applicant Identification and eligibility verification

Name of Applicant: \_\_\_\_\_  
Last First Middle

Are you currently licensed? Yes/No \_\_\_\_\_ If Yes, License Number \_\_\_\_\_

Social Security Number OR Federal EIN \_\_\_\_\_

Mailing Address \_\_\_\_\_

\_\_\_\_\_

City State Zip Code

Contact Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_



STATE OF TENNESSEE  
DEPARTMENT OF COMMERCE AND INSURANCE  
DIVISION OF REGULATORY BOARDS  
PRIVATE PROTECTIVE SERVICES  
500 JAMES ROBERTSON PARKWAY  
NASHVILLE, TN 37243-1158  
615.741.6382 FAX 615.532.2965  
[www.tn.gov/commerce/](http://www.tn.gov/commerce/)

## CONTRACT SECURITY COMPANY - APPLICANT INSTRUCTIONS

REMOVE THIS PAGE BEFORE YOU SUBMIT YOUR APPLICATION - RETAIN THIS INFORMATION FOR YOUR RECORDS

**Application Fee:** **\$300.00 [Non-Refundable]**

**License Fees:**

Company employing 0- 49 security guards	<b>\$125.00</b>
Company employing 50+ security guards	<b>\$425.00</b>

### **Schedule electronic fingerprinting through L1-IdentoGo.**

- Applicants in Tennessee can schedule electronic fingerprinting for a fee of **\$38.00** by scheduling online or calling L1-IdentoGo **855-226-2937**. **You must have the correct ORI# when scheduling: TN920120Z. This service is only available in the State of Tennessee. Out of state applicants should follow instructions for Tennessee submission of fingerprint card directly to L1-IdentoGo. [www.L1enrollment.com](http://www.L1enrollment.com)**
- ❖ You may **not** undertake to provide or provide contract security services until your Contract Security Company license has been issued.
- ❖ Before proceeding, read the Tennessee Private Protective Services Laws and Administrative Rules. It is your responsibility to know and understand the laws and rules regulating contract security companies in the State of Tennessee. Please refer to the following link to access Private Protective Services Laws and Administrative Rules:  
[www.tn.gov/commerce/](http://www.tn.gov/commerce/)
- ❖ If you fail to respond to any correspondence from this office, your application will be **closed** or **denied**. Read and complete each portion of this application carefully.

### **APPLICANTS MUST SUBMIT:**

- An application completed in its entirety. The application shall be subscribed and sworn to by the applicant (if the applicant is an individual), by each partner (if the applicant is a partnership), or by the qualifying agent (if the applicant is a corporation) before a duly appointed Notary Public.
- Copy of receipt for electronic fingerprinting.
- If your experience is insufficient, or you do not submit adequate supporting documentation, **you will be required to take the prescribed examination**. You must make your own arrangements to take the examination. An **Examination Candidate Information Brochure** is available on our website.
- If applying as a partnership, **each partner** must submit fingerprint cards or submit prints electronically, each partner must qualify by experience or examination, and each partner must provide all of the required information with this application.
- If applying as a corporation, the following additional information must be submitted:
  - The correct legal name of the corporation, the address of the corporate headquarters;
  - State and date of incorporation;
  - Documentation from the Tennessee Secretary of State showing the corporation is qualified to do business in this state;
  - The names of the principal corporate officers, and the business address, residence address and the office held by each in the corporation.
- **You must submit proof of General Liability Insurance:** In accordance with **Tennessee Code Annotated §62-35-114**, attach a current Certificate of Insurance as evidence of coverage of a general liability policy meeting at least the minimum requirements.

*You should keep a photocopy of this application for your own files, before submitting the application to this office.*



STATE OF TENNESSEE  
 DEPARTMENT OF COMMERCE & INSURANCE  
 DIVISION OF REGULATORY BOARDS  
 PRIVATE PROTECTIVE SERVICES  
 500 JAMES ROBERTSON PARKWAY  
 NASHVILLE, TN 37243-1158  
 615.741.6382 FAX 615.532.2965  
[www.tn.gov/commerce/](http://www.tn.gov/commerce/)

**FOR OFFICIAL USE ONLY**

File #  
 Xact #

# CONTRACT SECURITY COMPANY APPLICATION

*Instructions: Please read this entire application carefully. Complete all sections and have notarized before returning with the appropriate application fee to the above address. Please note: application fees are not refundable. Submit additional information for any item on a separate sheet of paper.*

## 1. General Information:

Company Name (the name under which your company will be certified)

Street Address (physical location)

Mailing Address (if different than physical location)

City State ZIP Code

Area Code and Telephone Number FAX Number Company Web Page and E-MAIL Address

**a. Will you be doing business under any name other than the name listed above?** Yes  No

If yes, list the exact name under which you will be doing business.

Company Name (the exact name under which you will be doing business)

**b. How many branch offices will you have in Tennessee?** \_\_\_\_\_

Attach an additional sheet of paper listing all branch offices. Include the name of the branch manager, physical and mailing address, phone number, fax number and E-mail address (If available) for the branch office(s).

**c. How many employees will you have in service in Tennessee?** \_\_\_\_\_

**2. Is the application for:**  a single owner  a partnership  a corporation (Corp.)  
 a limited liability company (LLC)  a limited partnership (LP)  a limited liability partnership (LLP)

**a. Is this company a Corporation, LLC, LP or LLP?** Yes  No

If yes, provide the following information:

Legal Name of Corporation Date & State of Incorporation

Mailing Address of Corporation Headquarters

City State ZIP Code Area Code and Phone Number FAX Number E-mail Address

Please provide the exact name that appears on the documentation that will be on file with the office of the Tennessee Secretary of State under which the corporation will be doing business.

Date qualified to do business in Tennessee: \_\_\_\_\_

**b. Corporate Officer Information:** In accordance with Tennessee Code Annotated §62-35-105(a)(5), list below the principal corporate officer(s). Please add additional sheets if necessary.

<p>1) _____</p> <p style="text-align: center;">Last                      First                      Middle Initial</p> <hr/> <p>Social Security Number      Office Held in the Corporation</p> <hr/> <p>Business Address</p> <hr/> <p>City                                      State      ZIP Code</p> <hr/> <p>Business Phone#                      Fax#</p> <hr/> <p>Residential Address</p> <hr/> <p>City                                      State      ZIP Code</p> <hr/> <p>Home Phone#      E-mail Address</p>	<p>2) _____</p> <p style="text-align: center;">Last                      First                      Middle Initial</p> <hr/> <p>Social Security Number      Office Held in the Corporation</p> <hr/> <p>Business Address</p> <hr/> <p>City                                      State      ZIP Code</p> <hr/> <p>Business Phone#                      Fax#</p> <hr/> <p>Residential Address</p> <hr/> <p>City                                      State      ZIP Code</p> <hr/> <p>Home Phone#      E-mail Address</p>
---	---

**Tenn. Code Ann. § 62-35-105(4):** The following information must be submitted for each individual applicant, or, if the applicant is a partnership, as to each partner, or, if the applicant is a corporation, as to the qualifying agent.

**3. Corporate Qualifying Agent, Individual (Sole Proprietor), or Partnership applying for licensure:** If the application is for a partnership, attach an additional sheet of paper with the required information for ***EACH*** partner.

Last Name	First Name	Middle Name
<hr/>		
Residence Address	City	State      ZIP Code
<hr/>		
Area Code and Telephone Number	FAX Number	E-MAIL Address
<hr/>		
Social Security Number	Date of Birth	Place of Birth      Age      Sex      Race      Height      Weight      Hair      Eyes

Have you ever used a name or alias other than shown above? If so, please list: \_\_\_\_\_

**4. Credit References: [Corporate Qualifying Agent, Individual (Sole Proprietor), or Partnership Applicant]**  
 You must provide three (3) credit references from lending institutions or business firms with whom a credit record has been established. These references must be original documents from the lending institution, must be in standard business letter form and must appear on the institution's letterhead.

**5. List all residences during the immediate past five (5) years.** (Attach an additional sheet of paper listing this information, please include dates of residency for each location.)

**6. Provide all employment or occupations engaged in during the immediate past five (5) years.** (This information may be included in a formal resume. Attach a separate sheet of paper listing this information if not included in resume.)

**7. Qualifying Information:**

- I wish to apply for licensure on the basis of my ***EXPERIENCE***. Attached is all the necessary/required documentation to substantiate my indicated experience. You must include **written verification** from previous employer(s) documenting at least three (3) years of supervisory experience with a contract security company, proprietary security organization, federal, United States military, state, county or municipal law enforcement agency, as per Tenn. Code Ann. 62-35-106(6)(A) or (B). **A resume alone is not considered proof of experience.**
- I wish to apply for licensure by taking the required ***EXAMINATION***. I understand I must make the necessary arrangements with the testing agency and pay any applicable fees associated with the examination.

**8. Criminal History Information:**

Answer the following questions completely. Information you provide may not disqualify you for a license. However, all arrests or charges, regardless of disposition, appear on record returns from the Tennessee Bureau of Investigation (TBI) and the Federal Bureau of Investigations (FBI). **If you answer yes to any of these questions, it will be necessary for you to provide certified documents of the court's final disposition, including suspended or deferred sentences, as well as, a written explanation of the events that surrounded the charges. If the court no longer has these records on file, you must obtain a letter from the judge or court clerk stating so.**

- a. Have you ever been arrested in Tennessee or any other state? Yes  No   
 If YES, what state(s) \_\_\_\_\_  
 If NO, go to question #9.
- b. Were you transported to or surrendered at a police station, sheriff's office or other law enforcement facility? Yes  No
- c. Once there, were you fingerprinted, photographed and booked into jail? Yes  No
- d. Were misdemeanor or felony charges filed against you? Yes  No   
 If yes, please list the charges below. Attach a separate sheet of paper, if necessary.

Date	Charge	City	State

- e. Did you appear before the court and enter a plea of guilty, not guilty or no contest? Yes  No
- f. Did the court find you guilty or not guilty? Yes  No
- g. If you were found guilty, what was the sentence of the court? (Indicate the fine, time in the county jail or penitentiary, deferred sentence, suspended sentence, or period of probation. List the sentence below.)

Date	Charge	Sentence	Probation Completed Date

- h. Are you currently on a deferred sentence or on probation? Yes  No
- i. Did the court dismiss the charges against you? Yes  No
- j. Were those charges against you expunged from your record by the court? Yes  No   
 If yes, you must provide a copy of the expungement order.
- k. Do you currently have charges pending against you? Yes  No   
 If yes, please provide the information requested below, along with an explanation of the circumstances surrounding the charge(s). You are required to provide this office with certified court documents showing the disposition of these charges within thirty (30) days of these charges being resolved by conviction or dismissal. Attach a separate sheet if necessary.

Date of Arrest	Charge	Court of jurisdiction (City, State)	Arraignment/Court Date

Date of Arrest	Charge	Court of jurisdiction (City, State)	Arraignment/Court Date

Date of Arrest	Charge	Court of jurisdiction (City, State)	Arraignment/Court Date

9. Have you ever been declared incompetent by reason of mental defect or disease? Yes  No   
 If yes attach separate documents and a written explanation.
10. Are you currently suffering from habitual drunkenness or any narcotic addiction? Yes  No   
 If yes, attach proof (if applicable) of having completed treatment program(s).
11. Are you a United States Citizen? Yes  No   
 If not, attach documentation establishing your legal alien status. If you are not a U.S. citizen or Resident Alien you will not qualify for licensure.

12. Have you ever served in Military Service? Yes  No   
a. Did you receive an Honorable discharge? Yes  No   
If other than Honorable discharge, attach a separate sheet of paper explaining the discharge, a copy of your DD214 and copies of all final judgments or dispositions of charges.

13. Have you read the Tennessee statutes pertaining to Private Protective Services and the corresponding Administrative Rules and do you understand your responsibilities? Yes  No

14. I HAVE ENCLOSED: [Failure to include all required documents will delay processing and issuance of your license.]

- The Required Application and Fingerprint Fees:** In accordance with Private Protective Services Administrative Rule 0780-5-2-.23(1), you must include all applicable fees required for the processing of your application.
- Copy of receipt for electronic fingerprinting.**
- Documents Verifying Experience:** In accordance with Tennessee Code Annotated §62-35-106(6), if you wish to qualify for licensure based on experience, attach written verification from previous employer(s) documenting at least three (3) years of supervisory experience with a contract security company, proprietary security organization, federal, United States military, state, county or municipal law enforcement agency.
- A Document** showing all residences for the immediate past five (5) years.
- Proof of General Liability Insurance:** In accordance with Tennessee Code Annotated §62-35-114, attach a current Certificate of Insurance as evidence of coverage of a general liability policy meeting at least the minimum requirements.
- Credit reference documents in response to question 4 on the application.**

NOTICE, AUTHORIZATION AND RELEASE FOR THE PROCUREMENT OF A CONSUMER AND/OR INVESTIGATIVE CONSUMER REPORT

I, the undersigned applicant, do hereby authorize the *Tennessee Department of Commerce and Insurance, Division of Regulatory Boards, Private Protective Services* to procure a consumer report and/or investigative consumer report on me. I understand that this authorization and release shall be valid for subsequent consumer and/or investigative consumer reports during my period of certification, licensure or registration by this agency for the purpose of investigating my credit references, and any workplace misconduct or criminal activity for which I am alleged to have been involved in.

These above-mentioned reports may include, but are not limited to, information as to my character, general reputation, and personal characteristics, discerned through employment and education verifications, personal references, personal interviews, my personal credit history based on reports from any credit bureau; my driving history, including any traffic citations; a social security number verification; present and former addresses; criminal and civil history/records; any other public record.

I further authorize any person, business entity or governmental agency who may have information relevant to the above to disclose the same to the Tennessee Department of Commerce and Insurance, including but not limited to any and all courts, public agencies, law enforcement agencies and credit bureaus, regardless of whether such person, business entity or governmental agency compiled the information itself or received it from other sources.

**{Partnership applicants must submit a separate signature page/release form for all partners}**

I understand that any false statement(s) and/or misrepresentation(s) given by me on this application or on any attachments will be punishable under Tennessee Code Annotated § 62-35. Therefore, I certify that all answers, statements, and information given herein and on any attachments, are true and correct to the best of my knowledge and belief.

\_\_\_\_\_  
(Signature of Applicant)

Subscribed and sworn to, before me on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

[NOTARY SEAL]

\_\_\_\_\_  
(Signature of Notary Public)

My commission expires: \_\_\_\_\_



**STATE OF TENNESSEE  
DEPARTMENT OF COMMERCE AND INSURANCE  
PRIVATE PROTECTIVE SERVICES  
500 JAMES ROBERTSON PARKWAY  
DAVY CROCKETT TOWER  
NASHVILLE, TENNESSEE 37243-1158**

**Eligibility Verification for Entitlements Act Attestation Instructions**  
**The attached form must be completed and submitted with each application**

**INSTRUCTIONS:** If you are a natural person applying for a license, registration, certification or other benefit you must:

1. Attest, under penalty of perjury, to your status as either a United States citizen, a qualified alien as defined in Tennessee's Eligibility Verification for Entitlements Act, or a foreign national not physically present in the United States, by selecting your status in Part A below signing on the line labeled "Applicant's Signature," printing your name on the line labeled "Printed Name" and putting the current date on the line labeled "Date."

**AND**

**Do one (1) of the following:**

2. If you are claiming United States citizenship, present one (1) of the forms of identification provided for in Part B below. **If you provided your Social Security Number as part of your application for licensure, registration, certificate or other benefit, no additional documentation is required; however, please be aware that efforts may be made to verify any such number.**
3. If you are claiming qualified alien status, present two (2) forms of documentation of identity and immigration status, as determined by the United States Department of Homeland Security to be acceptable for verification through the SAVE program, as provided in Part C below.
4. If you are claiming qualified alien status but you are unable to present two (2) forms of documentation provided for in Part C of this form, then you shall present at least one (1) such document that shall then be verified through the SAVE program.  
or
5. If you are claiming you are foreign national not physically present in the United States, contact the program issuing the license, registration, certification or other benefit for which you are applying to provide such documentation as may be required to verify such status.

**Eligibility Verification for Entitlements Act Attestation**  
**Tennessee Private Protective Services**

**Part A. Eligibility Verification for Entitlements Act Attestation**

**I hereby attest under penalty of perjury that I am (select one):**

\_\_\_\_\_ A United States citizen;

\_\_\_\_\_ A qualified alien as defined in Tenn. Code Ann. § 4-58-102;<sup>1</sup>

\_\_\_\_\_ A foreign national not physically present in the United States. Further, I understand that should I ever become physically present in the United States while I hold this license, registration, certification or other benefit I agree to immediately contact the issuing agency and provide documentation to confirm my status as a qualified alien.

\_\_\_\_\_  
 Applicant's Signature

\_\_\_\_\_  
 Printed Name

\_\_\_\_\_  
 Date

**Submitting false information or omitting pertinent or material information in connection with this application or any violation of the Eligibility Verification for Entitlements Act may result in the revocation of any license, registration, certification or other benefit issued to the applicant. A person who willfully makes a false, fictitious or fraudulent statement or representation of United States citizenship may be prosecuted under 18 U.S.C. § 911 and/or the False Claims Act, T.C.A. §§ 4-18-101, *et seq.***

<sup>1</sup> Qualified alien means "A qualified alien as defined by 8 U.S.C. § 1641(b)" or "An alien or nonimmigrant eligible to receive state or local public benefits under 8 U.S.C. § 1621(a)." Pursuant to those statutes, this includes, but is not necessarily limited to:

- An alien who is lawfully admitted for permanent residence under the Immigration and Nationality Act [8 U.S.C. § 1101 et seq.];
- An alien who is granted asylum under section 208 of the Immigration and Nationality Act [8 U.S.C. § 1158];
- A refugee who is admitted to the United States under section 207 of the Immigration and Nationality Act [8 U.S.C. § 1157];
- An alien who is paroled into the United States under section 212(d)(5) of the Immigration and Nationality Act [8 U.S.C. § 1182(d)(5)] for a period of at least 1 year;
- An alien whose deportation is being withheld under section 243(h) of the Immigration and Nationality Act [8 U.S.C. § 1253] (as in effect immediately before the effective date of section 307 of division C of Public Law 104-208) or section 241(b)(3) of the Immigration and Nationality Act [8 U.S.C. § 1231(b)(3)] (as amended by section 305(a) of division C of Public Law 104-208);
- An alien who is granted conditional entry pursuant to section 203(a)(7) of the Immigration and Nationality Act [8 U.S.C. § 1153(a)(7)] as in effect prior to April 1, 1980;
- An alien who is a Cuban and Haitian entrant (as defined in section 501(e) of the Refugee Education Assistance Act of 1980);
- A nonimmigrant under the Immigration and Nationality Act [8 U.S.C. §§ 1101, *et seq.*];
- An alien who is paroled into the United States under section 212(d)(5) of the Immigration and Nationality Act [8 U.S.C. § 1182 (d)(5)] for less than one year.

**Eligibility Verification for Entitlements Act Additional Required Documentation**  
**TENNESSEE PRIVATE PROTECTIVE SERVICES**

**Part B.** If you are claiming United States citizenship, you must present **one (1)** of the following:

- A valid Tennessee driver license or photo identification license issued by the Department of Safety;
- A valid driver license or photo identification license from another state where the issuance requirements are at least as strict as those in Tennessee, as determined by the Department of Safety;
- An official birth certificate issued by a state, jurisdiction or territory of the United States, including Puerto Rico, United States Virgin Islands, Northern Mariana Islands, American Samoa, Swains Island, or Guam; provided that Puerto Rican birth certificates issued before July 1, 2010, shall **not** be recognized;
- A United States government-issued certified birth certificate;
- A valid, unexpired United States passport;
- A United States certificate of birth abroad (DS-1350 or FS-545);
- A report of birth abroad of a citizen of the United States (FS-240);
- A certificate of citizenship (N560 or N561);
- A certificate of naturalization (N550, N570 or N578);
- A United States citizen identification card (I-197, I-179);
- Any successor document of those listed at Tenn. Code Ann. §§ 4-58-103(c)(4)-(9); or
- **A social security number that may be verified with the Social Security Administration in accordance with federal law (if you provided your social security number as part of your application for licensure, no additional documentation is required; however, please be aware that efforts may be made to verify any such number).**

**Part C.** If you are claiming qualified alien status, you must present **two (2)** forms of documentation of identity and immigration status, as determined by the United States Department of Homeland Security to be acceptable for verification through the SAVE program. Such forms of identification may include:

- I-327 (Reentry Permit);
- I-551 (Permanent Resident Card);
- I-571 (Refugee Travel Document);
- I-766 (Employment Authorization Card);
- Certificate of Citizenship;
- Naturalization Certificate;
- Machine Readable Immigrant Visa (with Temporary I-551 Language);
- Temporary I-551 Stamp (on passport or I-94);
- Unexpired Foreign Passport;
- WT/WB Admission Stamp in Unexpired Foreign Passport
- I-20 (Certificate of Eligibility for Nonimmigrant (F-1) Student Status);
- DS-2019 (Certificate of Eligibility for Exchange Visitor (J-1) Status);
- Any other document determined by the U.S. Department of Homeland Security to be acceptable through the Systematic Alien Verification for Entitlements (SAVE) program created pursuant to the federal Immigration Reform and Control Act of 1986.

**Part D.** If you are claiming qualified alien status, but you are unable to present two (2) forms of documentation as described in Part C, then you shall present at least **one (1)** such document as described in Part C, which shall then be verified through the SAVE program.

**Part E.** If you are claiming that you are a foreign national not physically present in the United States, please contact the program issuing the license, registration, certification or other benefit for which you are applying to provide such documentation as may be required to verify such status.