

Private Security Guard Company License Renewal Application

Topeka Police Department, Licensing Clerk, 320 S. Kansas Ave. Suite 100, Topeka, KS 66603, (785) 368-9456

Renewal Fee: \$100

Company License No: _____

License fee may be cash, credit/debit card, check or money order made payable to the City of Topeka.

Company Name: _____ Phone: (____) _____

Address: _____
Street City State Zip Code

Local contact information:

Address: _____
Street City State Zip Code

Phone: (____) _____ Fax: (____) _____

Company contact person and email address: _____

Mailing Address for certificate and renewal information:

Street City State Zip Code

Provide the following information and a **photocopy of a current driver's license** for all Officers of the Company (**Please complete this section even if nothing has changed from previous year**):

Position	Name	DOB	Social Security Number	Driver's License Number & State

(Use more than one line per person if needed.)

Explain type of Services offered: _____

Resident Agent: _____ Sex ____ D.O.B. _____ Age ____

Social Security # _____ State of Birth ____ Driver's License _____
State Number

Residence: _____ Phone (____) _____
Street City State Zip Code

- Attach the Following **Updated** information:
1. A photocopy of the driver's license on each of the company officers listed above.
 2. A description of the type, color and number of vehicles to be used in the conduct of business.
 3. A description and photo of the uniform, if any, to be worn by company employees.
 4. 2 sets of fingerprints and a company check, cashier's check, or money order made payable to the "KBI" for KBI processing fee (\$47.00) for each new company officer, director, principal stockholder, or partner. KBI fees for more than one individual may be combined into one check.
 5. A Certificate of Insurance showing compliance to the insurance requirement of the code of the City of Topeka section 5.90.150.

I hereby authorize the Topeka Police Department to make any record or employment checks that may be necessary, and to release any information obtained to the officials of the City of Topeka as may be needed for the ultimate approval of this application. **I understand the information on this application will be relied upon in determining whether to grant or deny a Private Security Guard license. Therefore, I verify, under penalty of perjury, that the information contained in this application is true, complete, and correct.**

Signature of Company Representative _____ Date _____

<<For Office Use Only>>

Date this application was received by the Police Department _____

Record's Clerk: _____ Date Fee Paid: _____

Recommend Approval: Yes No _____
Investigator _____ Date _____

Application: Approved Denied _____
Representative from Chief's Office _____ Date _____

If Denied

Company Notified _____
Date _____

Topeka Police Department Legal Advisor Notified _____
Date _____