



New Mexico Regulation and Licensing Department
BOARDS AND COMMISSIONS DIVISION
Private Investigations Advisory Board
P.O. Box 25101 ▪ Santa Fe, New Mexico 87504
(505) 476-4650 ▪ Fax (505) 476-4545 ▪ www.rld.state.nm.us

INSTRUCTIONS FOR PRIVATE PATROL (PP) COMPANY RENEWAL APPLICATION

Application for renewal must include the following information and documentation:

1. Complete the PP Company Renewal Application and a Release of Information and Attachment A for each officer of the company.
2. Any “Yes” answers for questions A through J on Attachment A of the renewal application require further information.
3. A “Yes” answer on **question B** requires a **Judgment and Sentence** document from the court showing the disposition of all charges; and official documents showing terms of any probation.
4. Renewal Fee of \$200.00, and Branch office fee for each location (if PP Company is located outside of New Mexico) payable to the Private Investigations Advisory Board. All fees are non-refundable.
5. Name and license number of the qualifying person’s New Mexico Private Patrol Operator License or Private Patrol Operations Manager License.
6. Name and contact information for a New Mexico registered agent if the Private Patrol Company is located outside of New Mexico.
7. One million dollar (\$1,000,000) General Liability Certificate of Insurance.
8. Background check for all owners/officers and a completed Release of Information form.
9. A Cogent receipt with Registration number for each owner/officer of the company

>All incomplete renewal applications will be returned to the registrant, which may result in an expired license and cannot operate until the license has been renewed.

>Applications returned to the applicant for being incomplete will be charged a late fee if resubmitted to the Board or post marked after the expiration date.

>If applications are not complete within 90 days, they will be withdrawn and a new application with fee will be required for licensure

All applicants must use the following fingerprint process to request a FBI and State criminal history background check

- Renewal applicants will need to **register** at https://www.cogentid.3m.com/nm/index_NM.htm prior to going to an electronic fingerprinting location. ORI Lookup - **NM920250Z**
- Applicants may complete their fingerprinting at any 3M Cogent fingerprint location in the state of NM (map of locations are on Cogent web site). Appointments are not required.
- When the applicant arrives at the electronic fingerprinting location, they will need to provide the electronic fingerprinting technician with a registration number they received after registering online.
- The fee is \$44.00, which can be paid at the time of registration by credit card or at the fingerprinting site by cashier’s check or money order.
- Background check results will be sent directly to the Private Investigations Board electronically.

Out-of-state applicants unable to complete the Livescan in New Mexico, may register online and mail inked fingerprint cards and the required \$44 fee to:

3M Cogent, New Mexico CardScan
639 N. Rosemead
Pasadena, CA 91107

New Mexico Regulation and Licensing Department

BOARDS AND COMMISSIONS DIVISION

Private Investigations Advisory Board

P.O. Box 25101 ▪ Santa Fe, New Mexico 87504

(505) 476-4622 ▪ Fax (505) 476-4615 ▪ www.rld.state.nm.us

B – Partnership

Business Name: _____

Business Mailing Address: _____
(Street) (City) (State) (Zip)

Business Physical Address: _____
(Street) (City) (State) (Zip)

Phone: () _____ EMAIL Address: _____

Partner Information:

#1)

Last Name: _____ First: _____ Middle: _____

Date of Birth: ____ / ____ / ____ SSN: ____ - ____ - ____

Height: _____ Weight: _____ Eye Color: _____ Hair Color: _____

#2)

Last Name: _____ First: _____ Middle: _____

Date of Birth: ____ / ____ / ____ SSN: ____ - ____ - ____

Height: _____ Weight: _____ Eye Color: _____ Hair Color: _____

Include any additional partners on a separate paper.

C – Limited Liability Company or Corporation

Business Name: _____

Business Mailing Address: _____
(Street) (City) (State) (Zip)

Business Physical Address: _____
(Street) (City) (State) (Zip)

Phone: () _____ EMAIL: _____

Owner, Officers or Directors Information:

#1

Last Name: _____ First: _____ Middle: _____

Date of Birth: ____ / ____ / ____ SSN: ____ - ____ - ____

Height: _____ Weight: _____ Eye Color: _____ Hair Color: _____

#2)

Last Name: _____ First: _____ Middle: _____

Date of Birth: ____ / ____ / ____ SSN: ____ - ____ - ____

Height: _____ Weight: _____ Eye Color: _____ Hair Color: _____

Include any additional owners, officers or directors on a separate paper.

***All registration information is subject to the Inspection of Public Records Act.**

New Mexico Regulation and Licensing Department

BOARDS AND COMMISSIONS DIVISION

Private Investigations Advisory Board

P.O. Box 25101 • Santa Fe, New Mexico 87504
(505) 476-4622 • Fax (505) 476-4615 • www.rld.state.nm.us

Pursuant to 61-27B-11 NMSA 1978, a private patrol company must have an owner or licensed private patrol operations manager who is licensed as a private patrol operator and will maintain the daily operations of the private patrol company. List the qualifying person:

Last Name: _____ First: _____ Middle: _____

Private Patrol Operator License #: _____ Expiration Date: _____

Pursuant to 61-27B-11 NMSA 1978, a Private Patrol Company must maintain a physical location in New Mexico where records are maintained and made available for department inspection.

Physical Address: _____

P.O. Box is not acceptable (Street) (City) (State) (Zip)

Phone: () EMAIL: _____

Pursuant to 61-27B-11 NMSA 1978, a Private Patrol Company located outside of New Mexico must maintain a New Mexico registered agent. If the applicant company is located outside NM list below the name and contact information of the registered agent:

Last Name: _____ First: _____ Middle: _____

Mailing Address: _____

(Street) (City) (State) (Zip)

Physical Address: _____

P.O. Box is not acceptable (Street) (City) (State) (Zip)

Phone: () EMAIL: _____

I _____, as (title) _____

being first duly sworn upon oath deposes and states: that he/she is the applicant or is authorized to make this application; that he/she has read the same and knows the contents therein contained are true to the best of his/her knowledge and belief. I understand that any information contained in this application may be investigated and any false or dishonest answer to any question in this application may be grounds for denial or revocation of licensure.

Applicant's Signature _____ Date _____

The following documents must be submitted with the renewal application for registration:

- Renewal Fee and Branch office renewal fee(s) payable to the Private Investigations Advisory Board if the company is located outside of New Mexico. All fees are non-refundable.
- Copy of the companies one million dollar (\$1,000,000) General Liability Certificate of Insurance.
- Release of Information form and Attachment A for owners, officers or directors.

***All registration information is subject to the Inspection of Public Records Act.**

New Mexico Regulation and Licensing Department
BOARDS AND COMMISSIONS DIVISION
Private Investigations Advisory Board
P.O. Box 25101 ▪ Santa Fe, New Mexico 87504
(505) 476-4622 ▪ Fax (505) 476-4615 ▪ www.rld.state.nm.us

ATTACHMENT A

EACH OWNER, OFFICER AND DIRECTOR MUST COMPLETE AND ANSWER THE FOLLOWING QUESTIONS: Explain any yes answers on a separate page. If you answer **YES** to **Question B** you **MUST** submit a copy of **Judgment & Sentence or Judgment & Order** documents and all other pertinent court documents and records, the date of conviction, the city/county/state of the action and terms of probation. The Department may request additional information. Failure to provide these documents will result in your application being returned as incomplete.

Last Name: _____ First: _____ Middle: _____

A. Have you ever used a name other than the name shown above? If yes, list name(s) used and give all details on a separate page.	YES	NO
B. Have you ever been convicted of a felony or misdemeanor? This includes deferred prosecution, judgment, pleas of guilty or nolo contendere in any state territory, district of the United States or a foreign country.	YES	NO
C. Have you ever been arrested for a felony or misdemeanor?	YES	NO
D. Have you ever applied to or been licensed as a private investigator in any state, foreign country, territory, or institution?	YES	NO
E. Have you ever had any disciplinary action taken against a private investigator license or any other professional/occupational license held by you or by any partnership or corporation of which you were a partner or officer, in any state, territory, district of the United States or a foreign country? Disciplinary action includes, but is not limited to, suspension, probation, practice limitations, reprimand, letter or admonition, censure, and any allegations currently pending.	YES	NO
F. Do you use alcohol or chemical substances in any way that impairs or limits your ability to work with reasonable skill and safety?	YES	NO
G. Are you currently engaged in the illegal use of dangerous or narcotic drugs?	YES	NO
H. Have you ever been found to have violated the requirements of a state or federal labor, tax or employee benefit law or rule?	YES	NO

***All registration information is subject to the Inspection of Public Records Act.**

New Mexico Regulation and Licensing Department

BOARDS AND COMMISSIONS DIVISION

Private Investigations Advisory Board

P.O. Box 25101 ▪ Santa Fe, New Mexico 87504

(505) 476-4622 ▪ Fax (505) 476-4615 ▪ www.rld.state.nm.us

I. Have you ever been licensed or registered by the New Mexico Private Investigations Advisory Board? If yes, list your number: _____	YES	NO
--	-----	----

I, _____, under penalty of perjury, HEREBY DEPOSE AND STATE, that I am the person described and identified in this application and attachment and the information given by me is true and complete to the best of my knowledge and belief. I understand that any information contained in the application or attachment may be investigated and any false or dishonest answer to any question in this application or attachment may be grounds for denial or revocation of a Private Investigation Company license.

I further understand I cannot operate a private investigation company until I have received a license issued by the Regulation and Licensing Department.

Applicant's Signature _____ Date _____

STATE OF _____ COUNTY OF _____

BEFORE ME on this _____ day of _____, 20____, personally appeared the above-named applicant who, being duly sworn upon oath, states that all statements and answers contained in this application are true and correct.

Notary Public My Commission Expires: _____

New Mexico Regulation and Licensing Department
BOARDS AND COMMISSIONS DIVISION
Private Investigations Advisory Board
P.O. Box 25101 ▪ Santa Fe, New Mexico 87504
(505) 476-4622 ▪ Fax (505) 476-4615 ▪ www.rld.state.nm.us

RELEASE OF INFORMATION
Print or Type Clearly

I, _____
Last Name First Name Middle
Social Security # _____, Date of Birth ____ / ____ / ____
currently residing at _____
Street City State Zip Code

Having made application with the Regulation and Licensing Department for licensure under the Private Investigations Act [Chapter 61, Article 27B NMSA 1978] and rules [Title 16, Chapter 48 NMAC] understand that a comprehensive investigation of my background may be conducted in connection with this application.

I do hereby give the officials of the Regulation and Licensing Department and the Private Investigations Advisory Board the authority to conduct any such investigation; and do hereby authorize the release of any and all such information that pertains to my work history, any arrest information, and/or any other information on general qualifications for fitness to practice as a licensee/registrant as requested by this state agency.

I have read, understand, and shall retain a copy of this document for my records.

Applicant's Signature: _____ **Date:** _____
(sign only before a Notary Public)

Notary: Ensure that this document is signed by the applicants in your presence, and that the applicant's name, social security number, and date of birth are verified by a valid form of identification.

Subscribed and sworn to before me this _____ day of _____ 20____

STATE OF _____
Notary Public

COUNTY OF _____ My Commission Expires: _____