RENEWAL OF SECURITY GUARD AGENCY
APPLICATION ACCEPTANCE CHECKLIST

Please use this list to ensure you have enclosed the proper documentation.

AGENCY NAME

#.	Documents to be enclosed	✓	FOR DPS USE ONLY
1.	**AGENCY APPLICATION** – Complete sections A, B, D, E, and F on the application. The application must be signed and dated.		
2.	**AGENCY RENEWAL FEE OF $500.00** Money order, Cashier's check, Agency's business check or Cash		
3.	**COMPLETED QUALIFYING PARTY RESPONSIBILITIES LIST** **This form must be initialed, signed, and notarized.**		
4.	**EIGHT HOUR UNARMED TRAINING PROGRAM** **This form must be completely filled, signed and notarized.**		
5.	**AGENCY STRUCTURE PAPERS** - (*If applicable*) Include only if there have been any changes to the agency structure or corporate officers.		
6.	**COLOR PHOTOGRAPHS OF UNIFORMS, JACKETS, PANTS, AND HATS** All photographs must be in focus with colors written on back.		
7.	**COLOR PHOTOGRAPHS OF BADGES AND PATCHES** Submit close-up focused color photographs of any badge and patch used on uniforms.		
8.	**COLOR PHOTOGRAPHS OF MARKINGS, EMBLEMS, INSIGNIA, AND LIGHTING ON VEHICLES** - (*If applicable*) Photographs must show views of all sides of vehicle and be in focus.		
9.	**RESIDENT MANAGER RENEWAL APPLICATION & FEE $50.00** - (*If applicable*) Money order, Cashier's check, Agency's check or Cash - Complete sections A, B, D, E, and F		
10.	**ASSOCIATE RENEWAL APPLICATION & FEE $50.00** - (*If applicable*) Money order, Cashier's check, Agency's business check or Cash		
11.	**LIABILITY & WORKERS COMPENSATION INSURANCE CERTIFICATE** *(Minimum of $100,000 per person, $300,000 aggregate total)* The Certificate Holder block must read, Arizona Department of Public Safety, Licensing Unit. P.O. Box 6328, MD 3140, Phoenix, AZ. 85009. If the address in the Producer block or the Insured block is not in Arizona, then add "*Coverage extends to operations in Arizona*" to the Descriptions of Operations block.		
12.	**CLASSIFIABLE FINGERPRINT CARD & FEE OF $22.00** – *(For each person)* Money order, Cashier's check, Agency's business check or Cash		
13.	**ONE PASSPORT-SIZED COLOR FACIAL PHOTOGRAPH** – *(For each person)* Facial Photographs must be in focus		
14.	**IS YOUR AGENCY ARMED?** **YES** ☐ **NO** ☐ Armed agencies complete Section F on application. Name of Instructor(s) _____ License Number of Instructor(s) _____		

Note to applicant: ***<u>If items # 1, #2, #4 and #15 are missing or incomplete, your application packet will be returned without processing.</u>***

The applicant's fingerprints will be used to check the criminal history records of the FBI. The procedures for obtaining a change, correction, or updating of your criminal history record are set forth in Title 28, Code of Federal Regulations (CFR), Section 16.34

Revised 04/18/18