



ARMED SECURITY GUARD ROSTER INSTRUCTIONS

Pursuant to Arizona Revised Statute § 32-2632(D), a licensee shall provide a *monthly* report to the department identifying all armed security guards employed by the agency. This requirement applies only to armed security agencies and their armed security guards. The Security Guard / Private Investigator Unit has created a new, single form to assist agencies in meeting these reporting requirements. The following are instructions on how to complete the form accurately and where to send it when complete:

1. **Agency Name:** List the name of your agency as it appears on your wall license issued by the Arizona Department of Public Safety.
2. **Agency License Number:** List the license number as it appears on your wall license issued by the Arizona Department of Public Safety.
3. **Month/Year:** List the month and year you are completing the report for.
Rosters are due by the 10th of the month following the month being reported on.
4. **Prepared by:** List the name of the individual completing the report.
5. **Phone Number:** List the contact number of the individual responsible for maintaining the roster.
6. **Employee Last and First Names:** Please list **only** your armed employees by last name and first name. Please use full names (not initials) as listed on their Armed Security Guard registration card.
7. **Employee Armed Registration Number:** List the **armed** registration number for each respective employee as listed on their Armed Security Guard registration card. The armed registration number is not the same as their unarmed registration. Additionally, each armed registration card lists the specific agency the armed guard is employed by. Please ensure you are listing the number to your specific agency.

This form is created as a fillable PDF. Although not a requirement, the preferred method for sending the report would be electronically as an attachment to an email. The new form is available through the licensing website at <http://www.azdps.gov/Services/Licensing>.

Send your completed roster to: licensingcomplaints@azdps.gov

Mail: Arizona Department of Public Safety
Licensing Unit
P.O. Box 6328, MD 3140
Phoenix, AZ 85005-6328

Any additional questions, please call the Licensing Unit at **(602) 223-2728**.