



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

Department Use Only:

Check or MO # _____

Receipt # _____

- Experience Certification
- Age verification (Min 21)
- Firearms Certification (Opt)
- Jurisprudence Exam (PI/POLY)
- Release of Information
- Background Approved
- Cogent receipt

Non-Refundable Application Fee \$400.00

PERSONAL INFORMATION

Last Name: _____ First: _____ Middle: _____

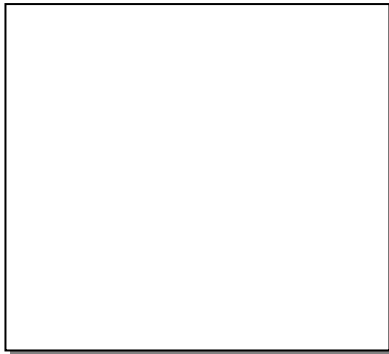
Mailing Address: _____
 (Street) (City) (State) (Zip)

Phone: () _____ Date of Birth: ____ / ____ / ____ SSN: ____ - ____ - ____

Sex: ____ Height: ____ Weight: ____ Eye Color: ____ Hair Color: ____

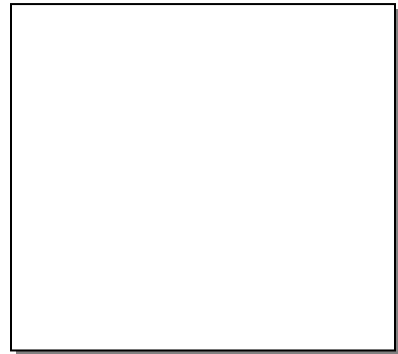
EMAIL Address: _____

ATTACH TWO 2" x 2" RECENT PHOTOGRAPHS. If you wear glasses, tinted lenses, etc. please indicate below. Dark or fuzzy pictures, side views and photos with sunglasses are unacceptable.



Staple photos to application

**DO NOT
paste or tape**



I certify that I wear _____
 (Tinted eye glasses, glasses, etc.)

PRIVATE INVESTIGATOR LICENSE APPLICATION

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.

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. Are you currently more than thirty days in arrears in payment of amounts required to be paid pursuant to an outstanding judgment and order for child support in New Mexico or any other state?		
G. 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
H. Are you currently engaged in the illegal use of dangerous or narcotic drugs?	YES	NO
I. 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
J. Have you ever been licensed or registered by the New Mexico Private Investigations Advisory Board? If yes, list your number: _____	YES	NO

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

PRIVATE INVESTIGATOR LICENSE APPLICATION

EMPLOYMENT RECORD OF APPLICANT FOR PAST 5 YEARS:

Enter most recent first, account for periods of unemployment, use additional sheets if necessary.

Dates	Employer's Name & Address	Job Duties

I _____, under penalty of perjury, **HEREBY DEPOSE AND STATE**, that I am the person described and identified in this application 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 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 my license.

I further understand I cannot work as a private investigator until I have received a license issued by the Regulation and Licensing Department.

Applicant's Signature _____ Date _____

NOTICE

CASH IS NO LONGER ACCEPTED as a form of payment for all business transactions including but not limited to licenses, permits, fees, and penalties. Payment must be made in one of the following methods:

- Check
- Cashier's check
- Money order

When you provide a check as payment, you authorize the State of New Mexico to either use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction.

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PRIVATE INVESTIGATOR LICENSE APPLICATION

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 Private Investigator 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 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: _____

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PRIVATE INVESTIGATOR LICENSE APPLICATION

CERTIFICATE IN SUPPORT OF EXPERIENCE QUALIFICATION

Note: Six thousand (6,000) hours of qualifying experience must have been acquired within the five (5) years preceding the filing of the application with the Department. Actual work must have been performed in:

- a) investigation for the purpose of obtaining information with reference to a crime or wrongs done or threatened against the United States;
- b) investigation of persons;
- c) the location, disposition or recovery of lost or stolen property;
- d) the cause or responsibility for fire, losses, motor vehicle or other accidents or damage or injury to persons or property; or
- e) securing evidence to be used before a court, administrative tribunal, board or investigating committee or for a law enforcement officer.

Applicant name	
Name of Business	
Business Address	
Business Phone Number	
Business Owner	
Supervisor Name	
Dates Employed	From: _____ To: _____
Position(s) held	
Number of hours worked	

I, _____ **present/former employer** verify that the above named applicant is or was employed with the above named company. I further understand that said person has made application to the Regulation and Licensing Department/Private Investigations Advisory Board for a Private Investigator license, and I hereby depose that I know, of my own knowledge that the applicant was employed for a period of not less than that indicated above.

Describe in detail the exact duties of employee while at said company. Attach additional pages if necessary.

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PRIVATE INVESTIGATOR LICENSE APPLICATION

This form must be signed in the presence of a notary.

The undersigned hereby certifies, under penalty of perjury, that all statements contained herein are true and correct and that this entity is authorized to provide such verification.

Employer’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: _____

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PRIVATE INVESTIGATOR LICENSE APPLICATION

INSTRUCTIONS FOR PRIVATE INVESTIGATOR LICENSE (PI)

Application for PI License must include the following information:

1. Complete the PI Application with applicant's signature.
2. Any "Yes" answers for questions A through J on page 2 of the application require further information.
3. A "Yes" answer on **question B** requires a **Judgment and Sentence** document from the court showing the disposition of any and all charges; and official documents showing terms of any probation.
4. If you have used a different name, you must explain why and when.
5. Proof of experience that has been acquired within the five (5) years preceding the filing of this application must consist of not less than 6,000 hours of actual work performed in accordance with 16.48.2.9(A)(5).

The following documents must be submitted with the application for licensure:

1. Application fee payable to the Private Investigations Advisory Board. All fees are non-refundable.
2. Two **recent 2" x 2" "Passport Type"** photos stapled to the front page of the application. No tape or paste.
3. Certification of Experience forms, to verify qualifications; signed and notarized.
4. Proof of age (, driver's license, State issued ID, or baptismal certificate). Must be at least 21 years of age.
5. RLD Release of Information form signed before a **Notary Public**.
6. Department issued jurisprudence examination for PI/POLYGRAPH.
7. Firearms Certification (optional).
8. Cogent receipt with registration number for background report (report good for 90 days).

>Failure to provide all requested documents and information will result in the application being returned to the applicant which will delay getting your license.

>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 an FBI and State background check:

- New and 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

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