



New Mexico Regulation and Licensing Department  
BOARDS AND COMMISSIONS DIVISION

Private Investigations Advisory Board

2550 Cerrillos Road ▪ P.O. Box 25101 ▪ Santa Fe, New Mexico 87504  
(505) 476-4622 ▪ Fax (505) 476-4620 ▪ www.rld.state.nm.us/boards

**PRIVATE INVESTIGATOR  
COMPANY APPLICATION**

**DEPARTMENT USE ONLY:**

Check or MO # \_\_\_\_\_

Receipt # \_\_\_\_\_

Check one Box:

- Sole Proprietor                      Complete Box A below
- Partnership                              Complete Box B below
- Limited Liability Company      Complete Box C below
- Corp    Complete Box C below

**Initial License Application Fee: \$300.00**

**Branch Fee: \$100.00 (out of state companies)**

- Surety Bond
- Liability Insurance (if body guard)
- PI/PI Manager License
- Attachment A(s)
- Release(s) of Information
- Background(s) Approved
- Cogent receipt(s)

**Complete the appropriate business information:**

**A – Sole Proprietor**

Business Name: \_\_\_\_\_

Business Mailing Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Business Physical Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Phone: ( ) \_\_\_\_\_ EMAIL Address: \_\_\_\_\_

**Owner Information:**

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Social Security # or Individual Taxpayer Identification: \_\_\_\_\_

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Sex: \_\_\_\_ Height: \_\_\_\_ Weight: \_\_\_\_ Eye Color: \_\_\_\_ Hair Color: \_\_\_\_

**B – Partnership**

Business Name: \_\_\_\_\_

Business Mailing Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Business Physical Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Phone: ( ) \_\_\_\_\_ EMAIL Address: \_\_\_\_\_

# PRIVATE INVESTIGATION COMPANY LICENSE APPLICATION

## Partner Information:

#1)

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Social Security # or Individual Taxpayer Identification #: \_\_\_\_\_

Sex: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Eye Color: \_\_\_\_\_ Hair Color: \_\_\_\_\_

#2)

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Social Security # or Individual Taxpayer Identification #: \_\_\_\_\_

Sex: \_\_\_\_\_ 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 Address: \_\_\_\_\_

### Owner, Officers or Directors Information:

#1

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Social Security # or Individual Taxpayer Identification #: \_\_\_\_\_

Sex: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Eye Color: \_\_\_\_\_ Hair Color: \_\_\_\_\_

#2)

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Social Security # or Individual Taxpayer Identification #: \_\_\_\_\_

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

# PRIVATE INVESTIGATION COMPANY LICENSE APPLICATION

Sex: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Eye Color: \_\_\_\_\_ Hair Color: \_\_\_\_\_

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

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

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

Private Investigator License #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Private Investigations Manager License (required if not an owner) \_\_\_\_\_ Exp. Date \_\_\_\_\_

Pursuant to 61-27B-11 NMSA 1978, a Private Investigations 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 Address: \_\_\_\_\_

Pursuant to 61-27B-11 NMSA 1978, a Private Investigations 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 Address: \_\_\_\_\_

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.

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 \_\_\_\_\_

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# PRIVATE INVESTIGATION COMPANY LICENSE APPLICATION

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 INVESTIGATION COMPANY LICENSE APPLICATION

## 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: \_\_\_\_\_

EMAIL Address: \_\_\_\_\_

Company Name: \_\_\_\_\_

<b>A.</b> 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>B.</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
<b>C.</b> Have you ever been arrested for a felony or misdemeanor?	YES	NO
<b>D.</b> Have you ever applied to or been licensed as a private investigator in any state, foreign country, territory, or institution?	YES	NO
<b>E.</b> 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
<b>F.</b> 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
<b>G.</b> Are you currently engaged in the illegal use of dangerous or narcotic drugs?	YES	NO
<b>H.</b> 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
<b>I.</b> Have you ever been licensed or registered by the New Mexico Private Investigations Advisory Board? If yes, list your number: _____	YES	NO

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# PRIVATE INVESTIGATION COMPANY LICENSE APPLICATION

I (*PRINT APPLICANTS NAME*) \_\_\_\_\_, 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 \_\_\_\_\_

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**PRIVATE INVESTIGATION COMPANY 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 registration 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 will 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: \_\_\_\_\_

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# PRIVATE INVESTIGATION COMPANY LICENSE APPLICATION

## INSTRUCTIONS FOR PRIVATE INVESTIGATION (PI) COMPANY LICENSE

### Application for PI Company License must include the following information:

1. Complete the PI Company Application and Attachment A
2. Any "Yes" answers for questions A through J on Attachment A 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. Email address.

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

1. License fee payable to the Private Investigations Advisory Board. All fees are non-refundable.
2. Branch office application fee for each location (**only** if the PI Company is located outside of New Mexico) payable to the Private Investigations Advisory Board. This is in addition to the application fee. All fees are non-refundable.
3. Copy of the qualifying person's New Mexico Private Investigator License or PI Manager License.
4. Each Owner, Officer and Director must submit the following:
  - a. Attachment A
  - b. RLD Release of Information form signed before a Notary Public.
  - c. Fingerprints for Background check (receipt from Cogent with Registration number.)
5. Ten thousand dollar (\$10,000) Surety Bond or if the company provides personal protection or bodyguard services a million dollar (\$1,000,000) General Liability Certificate of Insurance.
6. Mail the application, fee and all other required documentation (except \$44 fingerprint fee) to: Private Investigations Advisory Board, P.O. Box 25101, Santa Fe, NM 87504.

**>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 a FBI and State criminal history background report:

- New and renewal applicants will need to register at [https://www.aps.gemalto.com/nm/index\\_NM.htm](https://www.aps.gemalto.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 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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