COMMONWEALTH OF VIRGINIA
Department of Criminal Justice Services
P.O. Box 1300 • Richmond, VA 23218
Phone: (804) 786-4700 • Fax: (804) 786-6344 www.dcjs.virginia.gov/pss

Status Hotline
(804) 786-1132
1-877-9STATUS

Private Security Services – RENEWAL REGISTRATION APPLICATION 2-YEAR REGISTRATION – FEE $20.00

IMPORTANT INFORMATION

- If you are going to carry or have access to a firearm you must also maintain a Firearms Endorsement and complete all required firearms training. For additional information and forms, please access the Firearms Endorsement link on the Virginia Department of Criminal Justice Services (DCJS) website.
- Application and In-service Training must be completed prior to expiration date for issuances of registration.
- If your current registration is expired, you may reinstate your registration providing all renewal requirements are met; and an additional, non-refundable reinstatement fee of **$10.00** is submitted to the department within **60 days** following the expiration date of your registration. After 60 days, this application cannot be processed and all initial registration requirements will need to be met. For additional information, access the Reinstatement link on the DCJS website.

Applicant Information

SSN or DCJS ID Number:	Last Name:	First Name:	MI:
Mailing Address (Street/Apt.#):		City, State, Zip:	
Physical Address (if different that mailing address):		City, State, Zip:	
Email Address:			
Home Phone: ( )	Business Phone: ( )	Fax: ( )	

Registration Category(s) Requested *(check each that apply)*

- ☐ Private Investigator
- ☐ Armored Car Personnel
- ☐ Alarm Respondent
- ☐ Unarmed Security Officer/Courier
- ☐ Armed Security Officer/Courier
- ☐ Central Station Dispatcher
- ☐ Electronic Security Technician
- ☐ Electronic Security Technician Assistant
- ☐ Electronic Security Sales Representative
- ☐ Locksmith
- ☐ Security Canine Handler
- ☐ Detector Canine Handler
- ☐ Armed Personal Protection Specialist
- ☐ Unarmed Personal Protection Specialist

Criminal History

Have you **been convicted** or **found guilty of a felony or misdemeanor** (not including minor traffic violations) in Virginia or any other jurisdiction to include military court martial or currently under protective orders within the **past two years**?

☐ Yes * ☐ No

*** If Yes,** please attach a Private Security Criminal History Supplement Form and all requested criminal history documentation.

Affirmation

I, the undersigned, certify that all information contained on this application is true and correct to the best of my knowledge and I have not omitted any pertinent information. I understand that any misrepresentation, falsification or omission of pertinent information may be cause for denial and may result in criminal charges. I understand that I am responsible for maintaining full compliance with *Virginia Code* Sections 9.1-138 through 9.1-150 and the Regulations Relating to Private Security Services 6 VAC 20-171.

Signature Required: _____ Date: _____ mm/dd/yy

All fees are non-refundable. Applications received without payment will be returned.

Submit a check or money order payable to the TREASURER OF VIRGINIA,
or pay by credit card using the Credit Card form available at www.dcjs.virginia.gov/forms/privatesecurity/pss_cc.pdf
— this form must be included with your application package when paying by credit card.