CITY OF NEWPORT, RHODE ISLAND

APPLICATION FOR PRIVATE DETECTIVE LICENSE

NAME:	d/b/a			
ADDRESS (residence):		F	Phone:	
ADDRESS (local business):]	Phone:	
Location/Address of Principal Place of Private Detective Business:				
US CITIZEN? (circle one): YES NO				
Present Occupation:				_
Previous Occupation: (use separate sheet if necessary) _				
Length of Time a Resident of Rhode Island:		Of	Newp	ort:
Degrees in Criminal Justice Received from Accredited C	Colleges or U	Jniversitie	es (and	where)?
Length of Time & Description of Previous Experience/T or Municipal Police Department/Investigative Agency of (use separate sheet if necessary)				
Years & Description of Experience as a Private Detective	e:			
Have you ever been convicted of a felony in any jurisdic community? NO YES If Yes, please explain:	tion or any o	offense ag	gainst ti	he decency and morals of the
Have you ever had a private detective/investigator's lice licensing authority? NO YES If Yes, provide details		or any ap	plicati	on for the same denied by any
Signa	ature of Appl	licant:		
Sworn and subscribed to before me this day of	, 20	·		
	My C	ommissio	n Expi	res
SIGNED BY CHIEF OF POLICE: :			D	ATE:
(circle one) APPROVED DENIED Reason Deni	ied:			
Action by Council D	ate:			-
License Fee: \$ Date Paid: Application Fee: \$ 50 Date Paid: For internal use only-*Attach copy of driver's license	License	Issued by	y:	Date Issued: