

Application for Private Security Officer Permit Kansas City, Kansas Police Department

 New Application

 Transfer

 Renewal

DO NOT WRITE IN THIS BOX			
Date Received	Check Number	Employer	
Date Issued	Permit Number	Permit Issued By	
Firearm Exam Date	Exam Score	<input type="checkbox"/> Armed	<input type="checkbox"/> Unarmed
Firearm Qualification Date	Qualification Score	<input type="checkbox"/> Personal Firearm	<input type="checkbox"/> Company Firearm
<input type="checkbox"/> APPROVED		<input type="checkbox"/> DENIED	

TYPE OR PRINT LEGIBLY IN INK

Full Name (Last, First, Middle)							
Current Address					City	State	Zip
DOB	Age	Social Security No.		Height	Weight	Hair	Eyes
Home Phone ()		Business Phone ()		Are you required to have a firearm on your person while engaged in security duties?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Security Company to be Employed By							
Address					City	State	Zip
Contact Person						Phone ()	
Have you previously received a private security officer's permit?				<input type="checkbox"/> Yes	<input type="checkbox"/> No	Have you had a private security officer's permit/license revoked or suspended?	
		<input type="checkbox"/> Yes	<input type="checkbox"/> No			<input type="checkbox"/> Yes	<input type="checkbox"/> No
Revocation and/or Suspension History	Employed From (Date)	To (Date)	Name of Security Company		Reason for Inactivation		
List all names you have ever used including married, maiden, nicknames and aliases:							
Marital Status <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Single							
Are you a citizen of the United States?				<input type="checkbox"/> Yes	<input type="checkbox"/> No	Have you ever been treated or confined for a mental and/or emotional disorder?	
		<input type="checkbox"/> Yes	<input type="checkbox"/> No			<input type="checkbox"/> Yes	<input type="checkbox"/> No
Mental/Emotional Treatment History	From (Date)	To (Date)	Name of Institution		Reason for Treatment		

List all addresses you've lived at in the last ten (10) years	From (Mo/Yr)	To (Mo/Yr)	Address			City/State
List all past employers you've had in the last ten (10) years	From (Mo/Yr)	To (Mo/Yr)	Employer	Address		City/State
Have you ever served in the United States military?	<input type="checkbox"/> Yes	Branch	From (Mo/Yr)	To (Mo/Yr)	Type of Discharge	Rank upon Discharge
	<input type="checkbox"/> No					
Have you ever been convicted of any felony or misdemeanor crimes or traffic citations?					<input type="checkbox"/> Yes <input type="checkbox"/> No	If you answered yes to either question, complete the following section below....
Have you had any violations of the uniform code of military justice that would be equivalent to a felony or misdemeanor conviction in a state or local court?					<input type="checkbox"/> Yes <input type="checkbox"/> No	
Conviction History	Date (Mo/Yr)	Charge	Disposition	Jurisdiction	Misd/Felony	
Are you required to drive as part of your security duties?			<input type="checkbox"/> Yes <input type="checkbox"/> No	Do you currently have a valid driver's license?		<input type="checkbox"/> Yes <input type="checkbox"/> No
If so, complete the following section...		Driver's License Number	State of Issue	Expiration Date	Restrictions	
List the Make, Model, Caliber and Serial Number of the weapon(s) you will be carrying while employed as an armed security officer.	Make	Model	Caliber	Serial Number	Company/Personally Owned?	
					<input type="checkbox"/> Comp. <input type="checkbox"/> Personal	
					<input type="checkbox"/> Comp. <input type="checkbox"/> Personal	
					<input type="checkbox"/> Comp. <input type="checkbox"/> Personal	
					<input type="checkbox"/> Comp. <input type="checkbox"/> Personal	

STATE OF KANSAS

SS.

COUNTY OF WYANDOTTE

ACKNOWLEDGEMENT

I, _____, know and fully understand that the issuance of this permit to perform as a private security officer in Kansas City, Kansas, confers, grants or bestows absolutely no governmental relationship or police authority whatsoever. I hereby declare that I have read the "Private Security Business" and "Private Security Officers Ordinance" of the Unified Government, in its entirety, and understand all of the criteria and provisions therein. I also acknowledge that a private security officer permit confers no more authority on the permit holder than that same permit holder otherwise possesses under law.

I am aware that a private security officer has no legal power or authority to enforce ordinances, statutes or rules other than those possessed by any other citizen of this State. I am also aware that as a private security officer I can not lawfully convey in any manner, either expressed or implied, that I am a law enforcement officer; and I acknowledge and understand that I can not lawfully convey that I have any agency or other relationship with the Unified Government or the Kansas City, Kansas Police Department. I acknowledge and willingly agree that by issuing me a private security officer permit, the Unified Government accepts no responsibility or liability for my actions or conduct, and I am in all respects a private citizen.

I acknowledge and understand that any and all persons issued a private security officer permit by the Unified Government are required to immediately notify in writing the Kansas City, Kansas Chief of Police of any change or residence or change in employment as a private security officer. I also acknowledge and understand that the holder of a private security officer permit is not authorized to carry a firearm on his/her person or in any readily accessible place, unless a private security officer "firearms" permit has been issued.

I know that a private security officer "firearms" permit must be carried on the holder's person at all times that a firearm is carried. By carrying such a firearm, I acknowledge and agree to abide by the following stipulations:

- 1) I agree to carry the firearm on my person only while actively engaged as a private security officer, and then only on the actual premises where I have been employed to perform private security officer services and
- 2) I agree to transport the firearm only in the locked trunk of a vehicle, while traveling from my residence to the actual premises on which I am to perform private security officer services or while transporting the firearm from the premises where I have been employed to perform private security officer services to my residence; and
- 3) I agree to transport the firearm only in the locked trunk of a vehicle while traveling from a premise where I have been employed to perform private security officer services to another such premise where I have been employed to provide private security officer services.

I know that if I receive a private security officer firearms permit that I am required to qualify annually at a firearms range approved by the Chief of Police, and that failure to qualify shall be the basis for suspension or revocation of my firearms permit. I also know that I am required to register all firearms with the Kansas City, Kansas Police Department that I use in my capacity as a private security officer and that I am prohibited from carrying any firearms that is not so registered.

I also acknowledge and understand that the carrying of a firearm at any other time and under any other circumstances will subject me to revocation or suspension of the private security officer "firearms"

permit issued to me. Additionally, I acknowledge and understand that in the event that I should discharge my firearm, either intentionally or inadvertently, in the course of my employment as a private security officer, I am required to telephone an immediate report to the Chief of Police, or his designee, and subsequently to file an official "Discharge of Firearms Report" within twenty-four (24) hours, and forward it to the Chief of Police or his designee. I agree that I will not wear a security officer uniform that is identical to or closely resembles the official uniform of the Kansas City, Kansas Police Department, and that it is contrary to the private security officer ordinance to wear a uniform that closely resembles the uniform of the Kansas City, Kansas Police Department.

I fully acknowledge and understand that there must be in effect at all times that I am employed as a private security officer, a policy or policies of general liability insurance issued by an insurance carrier licensed to do business in this state, which has and maintains a local officer or agent in the state upon whom service or process may be held and which carries a Best's policyholder rating of B+ or better. I understand that the security company where I am employed, in which case I do not have to furnish individual insurance on my own, can provide this insurance. I further understand that my security officer's permit will be automatically suspended or revoked if I leave the employment of a licensed security officer company and am no longer covered by their policy unless I acquire and keep in effect my own approved liability insurance coverage.

I hereby acknowledge and understand that a private security officer permit is not a license to engage in the business of being a private security officer company, and that I must be employed by a company that currently holds a valid private security officer license to operate as a business in the City of Kansas City, Kansas.

I hereby willingly and of my own volition agree to discharge the Unified Government and all of its agents and employees from any and all suits, actions or causes at law, claims, demands or liability either in law or equity, which I, my successors, assigns, heirs, executors or administrators, may have now or in the future, resulting directly or indirectly from my words, deeds or actions as a private security officer.

I hereby certify that I have answered the private security officer application truthfully and accurately, to the best of my knowledge and ability and that this application does not contain any errors or misrepresentation. I realize that any discrepancies or falsehoods in this application will disqualify me from obtaining a private security officer permit, now, or in the future, in the City of Kansas City, Kansas. I also do hereby give my consent and permission for the Kansas City, Kansas Police Department to investigate and to make the inquiries deemed necessary or proper to determine the validity and/or accuracy of the information provided on this application. I hereby give my permission for former employers, doctors and other persons with knowledge about me to release any information relating to this application to the Police Department's designee.

I also affirm that I am in good physical condition and of sound mind, and am not aware of any physical or mental condition or malady that might affect the issuance of this permit.

I acknowledge that I have declared all felony, misdemeanor, and traffic violations on this application.

And therefore

I, _____, attest that I have read and completed the application for a private security officer permit, understand the requirements and obligations commensurate to holding such permit and willingly agree to all provisions contained therein.

Applicant's Signature