



## City of Cañon City Merchant Patrol/Security Guard Individual Information Form

*To be completed by each individual applicant, partner, officer, stockholder of 10% or more stock if a corporation or LLC, or manager, who is **NOT** applying for a separate Security Guard License.*

**Full Legal Name:** \_\_\_\_\_

**List any other names you have used:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ **Social Security Number:** \_\_\_\_\_

**Mailing Address (if different from residence):** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Daytime Phone:** \_\_\_\_\_

**Current Driver's License Number and State:** \_\_\_\_\_

**Merchant Patrol/Security Guard Service Company  
by whom you are to be employed:** \_\_\_\_\_

List all residence addresses below. Include current and previous addresses for the past five years.

Street Number	City, State, Zip	From	To
Current			
Previous			

List all current and former employers or businesses engaged in within the last five years. Attach a separate sheet, if necessary.

Name of Employer	Address (Street, City, State, Zip)	Position Held	From	To
Current				
Previous				

Please answer the following questions. Attach a separate sheet if more space is needed to provide complete answers.

- 1. Have you ever been convicted of any crime or ordinance violation (other than minor traffic violations) during the last 10 years? Yes No

If yes, state date and nature of offense:

Place where offense occurred:

Date of conviction: Court:

Penalty Imposed:

Date requirements of penalty satisfied:

Attachments:

- 1. Please attach two (2) letters of reference from reputable persons who have personally known you for at least five (5) years and can attest to your good character, integrity and suitability to engage in the merchant patrol or security guard service business. Letters MUST contain the name, address and daytime phone number of the person submitting the statement.
2. Fingerprint card.

OATH OF APPLICANT

I declare under penalty of perjury in the second degree that this application and all attachments are true, correct, and complete to the best of my knowledge.

Applicant Signature Printed or typed name

Title Date

For City of Cañon City Use Only:

Record Check Date: Fingerprint results received (date):

Approved: Denied: Date:
Chief of Police Chief of Police

Approved: Denied: Date:
City Clerk City Clerk