

PRIVATE DETECTIVE APPLICATION/RENEWAL PROCEDURE
(effective May 1, 2021)

- Initial Filing Fee - \$28.00 (\$23.00 plus \$5.00 automation fee)
- Renewal Filing Fee - \$28.00 (\$23.00 plus \$5.00 automation fee)

In addition to the filing fee, a license fee is due upon the approval

- Initial Individual License - \$200 (issued for 2 yrs)
- Initial Partnerships & Corporations - \$300 (issued for 2 yrs)
- Renewal Individual License - \$100/yr. (for a period of up to 5 yrs)
- Renewal Partnerships & Corporations - \$150/yr. (for a period of up to 5 yrs)

Application of a Private Detective License Requires the Following:

- Complete application (see 22 P.S. §11 et seq., “The Private Detective Act of 1953” (current through Act 1992-132)
- One fingerprint card for each individual/officer of the corporation included with the application
- One fingerprint card and a check in the amount of \$17.50 made payable to “Commonwealth of PA” for PA State Police processing
- Two photographs in passport size
- Surety bond in the amount of \$10,000.00
- A surety bond for new applications may not be filed until the license is approved by the Court.
- It is necessary the Court approve the surety bonds before licenses are issued.

Private Detective badges are issued by appointment only.

Renewal of a Private Detective License Requires the Following:

- Complete Individual or Partnership & Corporation Renewal Form (AOPC 2023 or AOPC 2235)
- Complete Request for Criminal Record Check Form (SP 4-164) and attach certified check/money order in the amount of \$22.00 payable to: *Commonwealth of PA* for applicant or officer(s)
- Surety bond in the amount of \$10,000.00
- It is necessary the Court approve the surety bonds before licenses are issued

NOTE: Fees related to this process are not refundable.

**INDIVIDUAL PRIVATE DETECTIVE LICENSE
RENEWAL FORM**

County of Butler

Applicant's Name: _____
Last First Middle Initial

Date of Birth: _____ / _____ / _____ Social Security Number: _____ - _____ - _____
Month Day Year

Date current license issued: _____ / _____ / _____ Date of Expiration: _____ / _____ / _____
Month Day Year Month Day Year

Residence Address: _____

Business Address: _____

Branch Office(s) Address(es): _____

Have you ever been arrested or convicted of a criminal offense in this or any other state ?
_____ No _____ Yes (If yes, give details on separate sheet)

The undersigned hereby affirms that the foregoing information is true and correct to the best of said person's knowledge, information and belief; said affirmation being made subject to penalties prescribed by 18 Pa.C.S.A. Sec. 4904, unsworn falsifications to authorities. By signing this affirmation the undersigned further certifies that they are familiar with the Private Detective Act of August 21, 1953, P.L. 1273, Sec. 1, as amended, and warrant this application is in compliance with the provisions of the Act.

Signature: _____ Date: _____

For use by County _____

<p>Criminal records check:</p> <p><input type="checkbox"/> County</p> <p><input type="checkbox"/> State</p> <p><input type="checkbox"/> NCIC</p> <p><input type="checkbox"/> Check if conviction found</p> <p><input type="checkbox"/> Fee Paid</p>	<p><input type="checkbox"/> License Renewal Approved</p> <p>Date License Renewed _____</p> <p>New License Expiration Date _____</p> <p><input type="checkbox"/> License Renewal Not Approved</p> <p>Date submitted to Court for hearing _____</p> <p>Signature _____</p> <p style="text-align: right;">Clerk of Courts</p>
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Partnership, Association or Corporation Private Detective License Renewal Form

County of Butler

Name of Partnership, Association or Corporation: _____

Federal Identification No: _____

Address of Principal Place of Business:

Branch Office(s) Address(es): (Attach a separate sheet for additional offices.)

On a separate sheet state the Name, Address, Date of Birth and Social Security Number of each individual composing the partnership, association or corporation.

Has any member of the partnership, association or corporation ever been arrested or convicted of a criminal offense in this state or any other state? No Yes (if yes, give details on a separate sheet)

Date current license issued: _____ / _____ / _____ Date of Expiration: _____ / _____ / _____
Month Day Year Month Day Year

The undersigned hereby affirms that the foregoing information is true and correct to the best of said persons' knowledge, information, and belief; said affirmation being made subject to penalties prescribed by 18 Pa.C.S.A. Sec. 4904, unsworn falsifications to authorities. By signing this affirmation the undersigned further certifies that they are familiar with the Private Detective Act of August 21, 1953, P.L. 1273, Sec. 1, as amended, and warrant that this application is in compliance with the provisions of the Act.
(Attach separate sheet for additional signatures.)

Signature Date

Signature Date

Signature Date

Signature Date

For use by County

<input type="checkbox"/> Criminal records check: <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> NCIC	<input type="checkbox"/> License Renewal Approved Date License Renewed _____ New License Expiration Date _____
<input type="checkbox"/> Check if conviction found	<input type="checkbox"/> License Renewal Not Approved Date submitted to Court for hearing _____
<input type="checkbox"/> Fee Paid _____	Signature _____ Clerk of Courts

**PENNSYLVANIA STATE POLICE
REQUEST FOR CRIMINAL RECORD CHECK
1-888-QUERYPA (1-888-783-7972)**

This form is to be completed in ink by the requester – (information will be mailed to the requester only). If this form is not legible or not properly completed, it will be returned unprocessed to the requester.

**TRY OUR WEBSITE FOR A QUICKER RESPONSE
<https://epatch.state.pa.us>**

REQUESTER NAME	
ADDRESS	<i>Butler County Clerk of Courts PO Box 1208</i>
CITY/STATE/ ZIP CODE	<i>Butler, PA 16003</i>
TELEPHONE NO. (AREA CODE)	<i>724-284-5238</i>

FOR CENTRAL REPOSITORY USE ONLY CONTROL NUMBER
AFTER COMPLETION MAIL TO: PENNSYLVANIA STATE POLICE CENTRAL REPOSITORY – 164 1800 ELMERTON AVENUE HARRISBURG, PA 17110-9758
DO NOT SEND CASH OR PERSONAL CHECK
CHECK ONE BLOCK
<input type="radio"/> INDIVIDUAL/NONCRIMINAL JUSTICE AGENCY – ENCLOSE A CERTIFIED CHECK/MONEY ORDER IN THE AMOUNT OF \$22.00, PAYABLE TO: <u>"COMMONWEALTH OF PENNSYLVANIA"</u> THE FEE IS NONREFUNDABLE
<input type="radio"/> NOTARIZED INDIVIDUAL/NONCRIMINAL JUSTICE AGENCY – ENCLOSE A CERTIFIED CHECK/MONEY ORDER IN THE AMOUNT OF \$27.00, PAYABLE TO: <u>"COMMONWEALTH OF PENNSYLVANIA"</u> THE FEE IS NONREFUNDABLE
<input type="radio"/> FEE EXEMPT-NONCRIMINAL JUSTICE AGENCY – NO FEE

SUBJECT OF RECORD CHECK				
(FIRST)	(MIDDLE)	(LAST)		
MAIDEN NAME AND/OR ALIASES	SOCIAL SECURITY NUMBER	DATE OF BIRTH (MM/DD/YYYY)	SEX Select	RACE Select

The Pennsylvania State Police response will be based on the comparison of the data provided by the requester against the information contained in the files of the Pennsylvania State Police Central Repository only.

**FEEES FOR REQUESTS - \$22.00. NOTARIZED FEE REQUESTS - \$27.00.
MAKE ALL MONEY ORDERS PAYABLE TO: COMMONWEALTH OF PENNSYLVANIA **

REASON FOR REQUEST	
◀◀◀◀◀CHECK THE BOX THAT MOST APPLIES TO THE PURPOSE OF THIS REQUEST▶▶▶▶▶	
<input type="radio"/> INTERNATIONAL ADOPTION - INTERNATIONAL ADOPTION MUST BE NOTARIZED AND MAILED IN. (\$27.00 FOR REQUEST)	
<input type="radio"/> ADOPTION (DOMESTIC)	<input type="radio"/> EMPLOYMENT
<input type="radio"/> VISA	<input type="radio"/> OTHER

WARNING: 18 Pa.C.S. 4904(b) UNDER PENALTY OF LAW - MISIDENTIFICATION OR FALSE STATEMENTS OF IDENTITY TO OBTAIN CRIMINAL HISTORY INFORMATION OF ANOTHER IS PUNISHABLE AS AUTHORIZED BY LAW.