PROCEDURE FOR RENEWING PRIVATE DETECTIVE LICENSE: INDIVIDUAL LICENSE

1. There is a NON-REFUNDABLE filing fee of $28.75 payable by cash or credit card only. WE DO NOT ACCEPT PERSONAL CHECKS OR AMERICAN EXPRESS.

2. Application must be signed and verified by individual. NOTE: Individuals changing to a partnership, association or corporation must apply as a new applicant

3. Two (2) passport photos (2” x 2”) must be submitted with the renewal application form(s)

4. Upon approval of license from the County Detectives and the District Attorney’s Office, the Clerk of Courts requires the following:
   
a. Payment of $500.00 for Individuals
b. Bond in the amount of $10,000.00

If you have any questions please contact the office @ 610.278.3346
INDIVIDUAL PRIVATE DETECTIVE LICENSE
RENEWAL FORM

Applicant's Name:

Last

First

Middle Initial

Date of Birth: __/__/__
Month Day Year

Social Security Number:

Date current license issued: __/__/__
Month Day Year

Date of Expiration:

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, unwarranted 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

Criminal records check:

☐ County

☐ State

☐ NCIC

☐ Check if conviction found

☐ Fee Paid

☐ License Renewal Approved

Date License Renewed

New License Expiration Date

☐ License Renewal Not Approved

Date submitted to Court for hearing

Signature

Clerk of Courts

CPCMS 2023
Printed: 06/12/2013 1:23:20PM
VITAL STATISTICS

1. NAME

2. CURRENT ADDRESS

3. PHONE NUMBER

4. EMAIL ADDRESS

5. SOCIAL SECURITY #

6. DATE OF BIRTH

7. WEIGHT

8. HEIGHT

9. HAIR COLOR

10. EYE COLOR

11. SPECIAL PHYSICAL CHARACTERISTICS (SCARS, TATTOOS, ETC.)