



G7 Security Contractor Information Form

Please provide complete information.

Contractor's Information Section

Investigator___ Guard Supervisor___ Clerical/Administrative___ Other___

Effective Date Contracted: _____

Age: _____ Social Security Number: _____ - _____ - _____ DCJS # _____

Date of Birth: _____

Last Name: _____ First Name: _____

Middle Name: _____ Suffix: _____

Nickname: _____

Street Address: _____

City: _____

APT/Unit/PO Box: _____ State: _____ Zip: _____

County: _____

Daytime Phone: _____

Fax Number: _____

Email Address: _____



Contractor's Background Data

Answer the following questions by checking either "Yes" or "No":

1. Are you a citizen of the United States? **Y/N**

2. If answer to question 1 is "No", are you a legal permanent resident of the United States in possession of a current alien registration? **Y/N**

3. Except for minor traffic infractions, have you ever been convicted of a misdemeanor or felony in this state or elsewhere? **Y/N**

4. a) Has any Private Investigator, Bail Enforcement Agent, or Watch Guard, or Patrol Agency license issued to you or to a partnership or corporation, of which you were a member or officer, ever been revoked in this state or elsewhere? **Y/N**

- b) Has any application submitted by you for license as Private Investigator, Bail Enforcement Agent, or Watch Guard, or Patrol Agency ever been denied by this state or any other governmental or regulatory body or office in this state or elsewhere? **Y/N**

5. Has any license or permit issued to you or applied for by you ever been denied, suspended, or revoked by this state or any other governmental or regulatory body or office in this state or elsewhere? **Y/N**

6. Are you presently under indictment for any crime or offense in this state or elsewhere? **Y/N**

7. Is there any complaint against you now pending before any department, bureau, board, prosecuting officer, criminal court or any other governmental or regulatory body or office in this state or elsewhere? **Y/N**



8. If any answer 3 to 7 inclusive is "Yes", explain fully, setting forth details for each such answer:

9. Have you been dismissed from any employment for any reason other than lack of work? If "Yes", please give dates, nature, place of such employment, name and address of employer(s) and reason(s) for such dismissal.

Contractor's Residence History

Complete list of all your residence addresses for the three (3) years immediately preceding the filing of this statement.

Dates (MM/YY) Your Residence History

From: _____ To: _____ Street: _____ City: _____
State: _____ Zip: _____

From: _____ To: _____ Street: _____ City: _____
State: _____ Zip: _____



From: _____ To: _____ Street: _____ City: _____
State: _____ Zip: _____

From: _____ To: _____ Street: _____ City: _____
State: _____ Zip: _____

From: _____ To: _____ Street: _____ City: _____
State: _____ Zip: _____

Business Information Section

Private Investigator

Bail Enforcement Agent

Watch, Guard or Patrol Agency

TAX-ID# of Business: _____

DCJS#: _____

Business Name
(As it appears on Business License): _____

Business Street Address: _____

APT/Unit/PO Box: _____

City: _____ State: _____ Zip: _____

County: _____