



# Division of Licensing Services

New York State  
Department of State  
Division of Licensing Services  
P.O. Box 22001  
Albany, NY 12201-2001  
Customer Service: (518) 474-4429  
www.dos.ny.gov

## Private Investigator, Bail Enforcement Agent, or Watch, Guard or Patrol Agency Branch Office Application

*Please take the time to read the instructions carefully before beginning the application form. Incomplete forms will be returned, delaying licensure. Any omission, inaccuracy or failure to make full disclosure in an application may be deemed sufficient reason to deny a license or could result in the suspension or revocation, if one is issued.*

### When would I file a Private Investigator, Bail Enforcement Agent, or Watch, Guard or Patrol Agency Branch Office Application?

You would file an application only if you are a licensed Private Investigator, Bail Enforcement Agent, or Watch, Guard or Patrol Agency and wish to operate a branch office in addition to your principal place of business. The use of a post office box number as a business address is prohibited.

### What address is a branch office license mailed to?

Branch office licenses are mailed to the branch office address. You must notify the local post office of your name and the exact location of your branch office.

### Do PI/BEA/WGP entities need to be bonded or have insurance?

Yes. Each private investigator and watch, guard or patrol agency branch office application must be accompanied by a surety company bond in the penal sum of \$10,000; \$500,000 for bail enforcement agent. You are responsible for maintaining the comprehensive general liability coverage that is required for your business if you employ security guards for the full term of any license that is issued by this department.

### What is the application fee?

#### Private Investigator and Bail Enforcement Agent:

- Individual – \$400
- Partnership or Corporation – \$500
- Trade Name – \$500

#### Watch, Guard or Patrol Agency:

- Individual – \$300
- Partnership or Corporation – \$400
- Trade Name – \$400

### What forms of payment do you accept?

You may pay by check or money order made payable to the Department of State or charge any fee to MasterCard or Visa, using a credit card authorization form. Do not send cash. **Application fees are nonrefundable.** A \$20 fee will be charged for any check returned by your bank.

### PRIVACY NOTIFICATION

#### Do I need to provide my Social Security and federal ID numbers on the application?

Yes, if you have a social security number or Federal ID number, you are required to provide this number. If you do not have a social security number or Federal ID number, please provide a written explanation.

The Department of State is required to collect the federal Social Security and Employer Identification numbers of all licensees. The authority to request and maintain such personal information is found in §5 of the Tax Law and §3-503 of the General Obligations Law. Disclosure by you is mandatory. The information is collected to enable the Department of Taxation and Finance to identify individuals, businesses and others who have been delinquent in filing tax returns or may have underestimated their tax liabilities and to generally identify persons affected by the taxes administered by the Commission of Taxation and Finance. It will be used for tax administration purposes and any other purpose authorized by the Tax Law and may also be used by child support enforcement agencies or their authorized representatives of this state or other states established pursuant to Title IV-D of the Social Security Act, to establish, modify or enforce an order of support, but will not be available to the public. A written explanation is required where no number is provided. This information will be maintained in the Licensing Information System by the Direction of Administration and Management, at One Commerce Plaza, 99 Washington Avenue, Albany, NY 12231-0001.



# Become an Organ and Tissue Donor



Organ donors save lives. If you would like to be an organ and tissue donor upon your death, you may enroll in the NYS Donate Life Registry online at [www.donatelife.ny.gov/register](http://www.donatelife.ny.gov/register) or complete the form below. Completed forms should be sent to the NYS Donate Life Registry by email – [Registry@donatelife.ny.gov](mailto:Registry@donatelife.ny.gov) or, mail - NYS Donate Life Registry, 185 Jordon Road, Troy, NY 12180.

Fields with an asterisk (\*) are required for enrollment. Upon receipt of your completed enrollment form, you will be sent an email or letter confirming your enrollment and providing you with information on how to limit your donation. I understand that by opting out of enrolling in the NYS Donate Life Registry, or skipping this question, will not impact or impair my ability to obtain services from the New York Department of State, Division of Licensing Services.

\*Last name \_\_\_\_\_

\*First name \_\_\_\_\_

Middle Initial \_\_\_\_\_ Suffix \_\_\_\_\_

\*Address \_\_\_\_\_

\*Apt. Number \_\_\_\_\_ \*Zip Code \_\_\_\_\_

\*City \_\_\_\_\_

\*Birth date MM / DD / YYYY \*Gender  M  F

Email address \_\_\_\_\_

DMV or IDNYC Number \_\_\_\_\_

By signing below, you certify that you are:

- 16 years of age or older;
- Consenting to donate your organs and tissues for transplantation and/or research in the event of your death;
- Authorizing the New York Department of State, Division of Licensing Services to transfer your name and identifying information to the NYS Donate Life Registry for enrollment; and
- Authorizing the Registry to give access to this information to federally regulated organ procurement organizations and NYS-licensed tissue and eye banks and others approved by the NYS Commissioner of Health in the event of your death.

--	--

\*Sign

\*Date