

**TOWN OF JAMESTOWN**  
Application for Private Investigator License

- New
- Renewal

Fee: \$150.00

Date: \_\_\_\_\_ Private Investigator License #: \_\_\_\_\_

Applicant(s) Name: \_\_\_\_\_

Date(s) of Birth: \_\_\_\_\_ / \_\_\_\_\_

Applicant's Home Address: \_\_\_\_\_

Race: \_\_\_\_\_ DOB: \_\_\_\_\_ Hair: \_\_\_\_\_ Eyes: \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Occupation: \_\_\_\_\_

Employer's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Employer's Address: \_\_\_\_\_

Have you ever been arrested? \_\_\_\_\_, if so, what was the offense(s), the location of the offense(s) and the final disposition of the offense(s): \_\_\_\_\_

Are you licensed to carry a revolver or pistol in the State of Rhode Island? Yes -or- No

Will a revolver or pistol be used in your capacity as a Private Investigator? Yes -or- No

A bond is required in the amount of \$5,000, please provide the following:

Bonding Company Name & Address: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Date Bond Expires: \_\_\_\_\_

*Identification card including photograph and fingerprint will be issued upon approval of this licenses.*

\_\_\_\_\_  
Signature of Applicant

For Office Use Only

Record Check:       State BCI  
                              Jamestown BCI

Date Application Cleared: \_\_\_\_\_

Date Issuance Not Recommended: \_\_\_\_\_

\_\_\_\_\_  
Thomas P. Tighe, Jamestown Chief of Police

**State of Rhode Island  
County of Newport**

The undersigned, being first duly sworn on oath, deposes and says as follows:

In accordance with Title 5, Chapter 5, Section 3 of the RI General Laws (license qualifications under the Private Detective Act), I hereby give oath that the following statements are true:

1. That I am a citizen of the United States or a resident alien;
2. That I have not been convicted in any jurisdiction of a felony;
3. That I have not had any pervious private investigator license or registration denied by the appropriate authority of any local licensing authority;
4. That I have not been declared by any court of competent jurisdiction incompetent by reason of mental defect or disease unless said court has subsequently determined that my competency has been restored;
5. That I do not suffer from habitual drunkenness or from narcotics addition or dependence;
6. That I am of good moral character;
7. That I have such experience as has been gained through (circle all that apply):
  - a. At least five (5) years experience as an investigator or as a police officer with a state, county or municipal police department or with an investigative agency of the United States of America or of any other state, county or municipality;  
or
  - b. Have received a degree in criminal justice from an accredited college or university; or
  - c. Have been employed by a private detective as an investigator for at least five (5) years; or
  - d. Have substantively equivalent training or experience. (Identify: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

Subscribed and sworn to before me in Jamestown, Rhode Island this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public

**TOWN OF JAMESTOWN**  
Private Investigator License Application

Private Investigator License #: \_\_\_\_\_

Class: \_\_\_\_\_

Fee: \$150.00

Business/Organization Name: \_\_\_\_\_

Location of Premise: \_\_\_\_\_

Renewal from : March 1, 200 to February 2 , 20

Applicant(s) Name: \_\_\_\_\_

Date(s) of Birth: \_\_\_\_\_ / \_\_\_\_\_

Home Address: \_\_\_\_\_  
\_\_\_\_\_

Daytime Telephone Number: \_\_\_\_\_



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Filing Fee: \$150.00

Paid/Date/Check Number: \_\_\_\_\_

**Approvals: Please Date & Sign**

Chief of Police: \_\_\_\_\_

Fire Chief: \_\_\_\_\_

Building/Zoning Official: \_\_\_\_\_

Tax Collector: \_\_\_\_\_

Water & Sewer Clerk: \_\_\_\_\_

Board of Canvassers: \_\_\_\_\_



This application has been **GRANTED/DENIED** by the Jamestown Town Council at a meeting held on \_\_\_\_\_ for the period of

March 1, 20 to February 2 , 20 .

Issued: \_\_\_\_\_

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Kimberly A. Turcone, Deputy Town Clerk