

INSTRUCTIONS FOR MAKING APPLICATION FOR A PERMANENT EMPLOYEE REGISTRATION CARD (PERC)

NOTICE: The PERC shall expire on May 31, 2012 and every 3 years thereafter. You will automatically receive your renewal application in the mail approximately 90 days prior to the expiration date of your PERC. If you possess a valid Illinois detective, security contractor, alarm contractor, or locksmith license, then a PERC is not required to work for a licensed agency.

Before completing the application package, read each of the steps below and follow them as they apply to you. This will aid you in accurately completing your application and eliminate any delay in processing. The application which you submit is valid for three years from the date of receipt.

EXEMPTIONS: A peace officer as defined in the Private Detective, Private Alarm, Private Security, Fingerprint Vendor and Locksmith Act is exempt from the requirements relating to the possession of a permanent employee registration card (PERC). The employing agency shall remain responsible for any peace officer employed under this exemption.

A person employed as an unarmed security guard at a nuclear energy, storage, weapons, or development site or facility regulated by the Nuclear Regulatory Commission who has completed the background screening and training mandated by the rules and regulations of the Nuclear Regulatory Commission is exempt from registration for a Permanent Employee Registration Card.

NOTE: If you have been issued a Permanent Employee Registration Card in the past, you may not apply for an additional card. If your original PERC has expired, contact the Department's Springfield office at 217/782-0458 and request a renewal application. Please indicate any change of address on your renewal application.

If your PERC has been lost, a written request for a reprint of your card and a \$20.00 reprint fee must be sent to the address in #7 below.

If you have applied for a Permanent Employee Registration Card within the past 3 years but did not complete the application process, DO NOT submit another application. Contact the Department at 217-782-8556 and request the status of your application.

APPLICATION INSTRUCTIONS

1. Complete the application in its entirety. An incomplete or illegible application will be returned.
2. Applicant must be at least 18 years of age to apply for a PERC in an unarmed capacity.
3. Disclosure of your U.S. social security number, if you have one, is mandatory, in accordance with 5 Illinois Compiled Statutes 100/10-65 to obtain a license. The social security number may be provided to the Illinois Department of Public Aid to identify persons who are more than 30 days delinquent in complying with a child support order, or to the Illinois Department of Revenue to identify persons who have failed to file a tax return, pay tax, penalty or interest shown in a filed return, or to pay any final assessment or tax penalty or interest, as required by any tax Act administered by the Illinois Department of Revenue, or to other entities for verification of identification.
4. Submit a non-refundable registration fee of \$55.00, made payable to the Department of Financial and Professional Regulation.
5. Submit the appropriate security clearance documents (See Security Clearance below).
6. Attach one photograph to the application in the space provided.
7. Forward application (with photo attached), copy of the electronic fingerprint receipt, and fee payment to:

Illinois Department of Financial and Professional Regulation
ATTN: Division of Professional Regulation
P.O. Box 7007
Springfield, Illinois 62791

SECURITY CLEARANCE

Permanent Employee Registration Cards will not be issued until security clearance is completed. Reference the page entitled **Important Notice / Criminal Background Check Information** for details on fingerprinting.

The security clearance requirement is waived for those applicants who submit supporting document **VE-PEC**, verifying their retirement from a peace officer position within one year of application. To order the **VE-PEC** form call 217-782-8556.

Additional application forms can be downloaded from the IDFPD Web site at www.idfpr.com.

IMPORTANT NOTICE

CRIMINAL BACKGROUND CHECK INFORMATION

Individuals applying for licensure for professions that require fingerprints must submit to a criminal background check and provide evidence of fingerprint processing from the Illinois State Police (ISP), or a fingerprint vendor approved by ISP or the Department. **Fingerprints must be taken within 60 days from the date that the application is submitted to the Department or the Department's testing vendor.**

Certifying Statement of Fingerprint Submission Form (FP), or a receipt issued by an approved fingerprint vendor must be submitted with the application and fee. The receipt shall be issued by the vendor at the time that fingerprints are obtained.

- Applicants may contact an approved fingerprint vendor to schedule an appointment for fingerprinting. The ISP will transmit electronic results of fingerprint processing to the Department.
- Out-of-State applicants who are unable to schedule an appointment for fingerprinting through an approved fingerprint vendor must obtain one (1) Illinois State Police (ISP) fingerprint card for processing by the ISP. The ISP will transmit electronic results of fingerprint processing to the Department. To obtain a fingerprint card, please contact the Department at 217-782-8556 or send an email request on your profession page of the Department website at www.idfpr.com. The fingerprint card may be taken to a police department in another state to obtain classifiable prints. The fingerprint card and processing fee shall then be mailed to ISP as follows:

**Illinois State Police
Bureau of Identification
260 North Chicago Street
Joliet, Illinois 60432-4075**

For fingerprint processing fees, please contact ISP at
<http://www.isp.state.il.us/docs/5-727.pdf>
or at the following email address:
BOI_Customer_Support@isp.state.il.us

Livescan Fingerprint Vendors

Certified by the Illinois State Police

Approved by the Department of Financial and Professional Regulation

Information regarding fees may be obtained from the respective vendor.

A-D Background Resources	847/767-7402
St. Charles, IL	www.a-dbackgroundresources.com
A Fingerprinting US Photo	312/782-8144
Chicago, IL	www.fingerprintingchicago.com
Accurate Biometrics	866/361-9944
Chicago, IL	www.accuratebiometrics.com
AGB Investigative Services, Inc.	773/445-4300
Chicago, IL	www.agbinvestigative.com
American Heritage Protective Services	708/388-7900
Alsip, IL	www.apservices.com
American Security Svcs	708/383-7635
Forest Park, IL	www.americansecurityservices.com
Andy Frain Services, Inc.	630/820-3820, Ext. 13
Aurora, IL	www.andyfrain.com
Anthony's Mobile Fingerprinting, Inc.	312/474-6394
Chicago, IL	www.thefingerprintman.com
AP Private Detective Agency, Ltd.	708/922-3500
Hazel Crest, IL	apprivatedetective@yahoo.com
Argus Services, Inc.	312/377-9441
Chicago, IL	http://argus-services.com
Background Resources, Inc.	630/873-2270
Warrenville, IL	www.backgroundresources.com
Big River Investigations, Inc.	217/228-9114
Quincy, IL	www.bigriversinvestigations.com
Biometric Impressions	630/715-2760
Elmhurst, IL	www.biometricimpressions.com
Browder's Maximum Security Services, Inc.	312/225-7900
Chicago, IL	maxsec@sbcglobal.net
Bushue Human Resources, Inc.	217/342-3042
Effingham, IL	www.bushuehr.com
CLS Background Investigations	815/836-0236
Homer Glen, IL	www.cls-ent.com
DeKalb Police Department	815/748-8400
DeKalb, IL	www.cityofdekalb.com
Digby's Detective and Security Agency, Inc.	312/326-1100, Ext. 1045
Chicago, IL	www.digbysecurity.com
Fact Finders Group, Inc.	708/283-4200
Matteson, IL	www.factfindersgroup.com
Futures in Rehab Management, Inc. (FIRM)	217/753-1190
Springfield, IL	www.verifyinc.com

Livescan Fingerprint Vendors (cont'd)

Gideon's 300 Security Services	708/335-4380
Hazel Crest, IL	www.g300security.com
Guardian Security Services, Inc	708/385-3300
Blue Island, IL	www.guardiansecurityinc.com
InfoTrack	847/444-1177
Deerfield, IL	www.infotracking.com
iTouch Biometrics	847/706-6789
Schaumburg, IL	www.iTouchBiometrics.com
Kates Detective Agency	773/436-3788
Chicago, IL	www.securitybgk.com
Kellerman Investigations	618/288-6662
Glen Carbon, IL	www.kellermaninvestigations.com
Kevin W. McClain Inv., LTD	618/532-1152
Central City, IL	www.mcclaininvestigations.com
Meador Investigations	217/732-1585
Lincoln, IL	www.pi-pro.com
Metro Detective Agency	815/230-7970
DeKalb, IL	www.illinoisfingerprinting.net
Metro Enforcement	815/964-9900
Rockford, IL	www.metroenforcement.com
Midwest Professional Investigations	217/224-0757
Quincy, IL	www.mpinv@adams.net
Morpho Trust USA	800-377-2080
Springfield, IL	www.morphotrust.com
Official Fingerprint Provider	312-942-1200
Chicago, IL	www.official1.us
Per Mar Security	563/326-2511
Davenport, IA	www.permarsecurity.com
Peter Lasacco	773/858-7257
Chicago, IL	
Rich Wooten & Associates	773/651-3826
Chicago, IL	rawooten@msn.com
Rockford Detective Agency, Inc.	815/282-2822
Loves Park, IL	rockforddetective.com
Securitas Security Services USA	618/257-2815
O'Fallon, IL	www.securitasinc.com
Security Management Group of America	773/254-1824
Chicago, IL	www.smgamerica.com
The Security Professionals, Inc.	773/581-8181
Chicago, IL	www.secprosinc.com
Trace Identity Services, Inc.	708/754-2900
Chicago Heights, IL	www.traceidentitysi.com
United Security Services, Inc.	312/922-8558
Chicago, IL	www.usesecurity.com
USA Fingerprint Service LLC	708/478-6157
Mokena, IL	www.usafingerprintservice.com

If you possess a valid Illinois Detective, Security Contractor, Alarm Contractor or Locksmith license, then a PERC is NOT required to work for a licensed agency.

FOR OFFICIAL USE ONLY

APPLICATION FOR PERMANENT EMPLOYEE REGISTRATION CARD

IMPORTANT NOTICE: Submit a non-refundable registration fee of \$55.00 made payable to IDFP. Completion of this form is necessary to accomplish the requirements outlined in 225 ILCS 447/1 et. seq. (Illinois Compiled Statutes). Disclosure of this information is REQUIRED. Failure to provide any information will result in this form not being processed.

1. NAME (Last Name, First Name, Middle Initial)		2. UNITED STATES SOCIAL SECURITY NUMBER: (See Box # 17 Below.)		
3. HOME STREET ADDRESS (No P.O. Boxes)	4. CITY	5. STATE	6. ZIP CODE	7. COUNTY
8. PLACE OF BIRTH (City and State)	9. DATE OF BIRTH (M/D/Y)	10. AGE (18 yrs min.)	11. TELEPHONE NUMBER (_ _ _ _) _ _ _ _ - _ _ _ _	

12. Have you ever been licensed as Private Detective, Private Security Contractor, Private Alarm Contractor, or Locksmith in Illinois or another State? Yes No *If yes, complete the following.*

List state(s) in which you have ever been licensed.	License Number	Dates of Licensure		Is license current?	Has license ever been revoked, or otherwise disciplined?
		From	To		

13. Have you ever been convicted of ANY criminal offense, including a misdemeanor or a felony?
If yes, include a detailed explanation of the nature of the offense and the final disposition of the case. Yes No

14. Have you ever been dishonorably discharged from the armed services or from a city, county, state, or federal position? *If yes, attach explanation.* Yes No

15. Do you suffer from habitual drunkenness or from narcotic addiction or dependence? *If yes, attach explanation.* Yes No

16. Have you ever been declared by any court incompetent by reason of mental or physical defect or disease? *If yes, attach explanation.* Yes No

17. In accordance with 5 Illinois Compiled Statutes 100/10-65(c), applications for renewal of a license or a new license shall include the applicant's Social Security number, and the licensee shall certify, under penalty of perjury, that he or she is not more than 30 days delinquent in complying with a child support order. **Failure to certify shall result in disciplinary action, and making a false statement may subject the licensee to contempt of court.**

Are you more than 30 days delinquent in complying with a child support order? Yes No
(NOTE: If you are not subject to a child support order, answer "no.")

<p>18. In accordance with 20 Illinois Compiled Statutes 2105/2105-(5), "The Department shall deny any license or renewal authorized by the Civil Administrative Code of Illinois to any person who has defaulted on an educational loan or scholarship provided by or guaranteed by the Illinois Student Assistance Commission or any governmental agency of this State; however, the Department may issue a license or renewal if the aforementioned persons have established a satisfactory repayment record as determined by the Illinois Student Assistance Commission or other appropriate governmental agency of this State." (Proof of a satisfactory repayment record must be submitted.)</p> <p>Are you in default on an educational loan or scholarship provided/ guaranteed by the Illinois Student Assistance Commission or other governmental agency of this State? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>ATTACH RECENT PHOTOGRAPH HERE.</p> <p>DO NOT STAPLE</p>
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I hereby certify that I personally completed this application, that the answers appearing hereon are true and correct to the best of my knowledge and belief and that I am legally authorized to sign this application.

_____ Date _____
Signature (in full-use no initials)

I UNDERSTAND THAT FEES ARE NOT REFUNDABLE. My signature above authorizes the Department of Financial and Professional Regulation to reduce the amount of this check if the amount submitted is not correct. I understand this will be done only if the amount submitted is greater than the required fee hereunder, but in no event shall such reduction be made in an amount greater than \$50.

USE TRANSPARENT TAPE ON ALL SIDES OF PHOTO

**RETURN TO: ILLINOIS DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION
ATTN: DIVISION OF PROFESSIONAL REGULATION, P.O. BOX 7007, SPRINGFIELD, ILLINOIS 62791**

<p>IMPORTANT NOTICE: Completion of this form is necessary to accomplish the requirements outlined in 225 ILCS 446/1 et. seq. (Illinois Compiled Statutes). Disclosure of this information is REQUIRED. Failure to provide any information will result in this form not being processed.</p>	<p>EMPLOYEE'S STATEMENT</p> <p>To be retained in employee's personnel file by the employing agency.</p>	<p>EMPLOYEE NUMBER</p> <hr/> <p>DATE OF EMPLOYMENT</p>
<p>NAME AND ADDRESS OF EMPLOYING AGENCY</p>	<p>NAME OF EMPLOYEE</p>	<p>SOCIAL SECURITY NUMBER</p>
	<p>ADDRESS OF EMPLOYEE (Include Street, City, State, and ZIP Code)</p> <p>_____</p>	
	<p>DATE OF BIRTH (Month/Day/Year)</p>	<p>PLACE OF BIRTH</p>
<p>Have you ever been dishonorably discharged from the armed services? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>		
<p>Have you ever been convicted of ANY criminal offense, including a misdemeanor or a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, include a detailed explanation of the nature of the offense and the final disposition of the case.</i></p>		
<p>Have you been declared by any court incompetent by reason of mental or physical defect or disease? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain. _____</p>		
<p>Have you suffered from habitual drunkenness or from narcotic addiction or dependence? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain. _____</p>		
<p>Have you ever had a certificate denied, suspended or revoked under the Illinois Private Detective, Private Alarm, and Private Security, and Locksmith Act? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain. _____</p>		
<p>Please state business or occupation engaged in for the five (5) years immediately preceding the date of execution of this statement, the location of such business or occupation, and the names of employers, if any.</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>		
<p>Date: _____ Signature of Employee: _____</p>		

IMPORTANT NOTICE: Completion of this form is necessary for consideration for licensure under 225 ILCS 446/1 et.seq. of (Illinois Compiled Statutes). Disclosure of this information is VOLUNTARY. However, failure to comply may result in this form not being processed.

CERTIFYING STATEMENT OF FINGERPRINT SUBMISSION

SUPPORTING DOCUMENT

FP-DET

APPLICANT: This form must be completed by out-of-state residents unable to utilize the live scan process for fingerprinting in the State of Illinois. Attach this certifying statement with the Application for Licensure and/or Examination or with the Application for Permanent Employee Registration Card as proof of having submitted the required fingerprint cards to the proper authorities.

1. NAME LAST FIRST MIDDLE	2. DATE OF BIRTH ____ / ____ / ____ Month Day Year	3. SOCIAL SECURITY NUMBER - - - - -
4. ADDRESS STREET, CITY, STATE, ZIP CODE	5. Three digit profession code and profession name (Check one.) <input type="checkbox"/> 129 - Permanent Employee Registration <input type="checkbox"/> 115 - Private Detective <input type="checkbox"/> 119 - Private Security Contractor <input type="checkbox"/> 124 - Private Alarm Contractor <input type="checkbox"/> 191 - Locksmith	
6. MAIDEN OR GIVEN SURNAME		

CERTIFYING STATEMENT

Under penalties of perjury, I declare that I, _____, have submitted the required fingerprints pursuant to the Private Detective, Private Alarm, Private Security, Fingerprint Vendor, and Locksmith Act and the Rules for the Administration of the Act to the designated agent of the Illinois State Police for processing.

Date: _____

Signature: _____