CONSTRUCTION INDUSTRIES BOARD 2401 NW 23rd, Suite 2F

OKLAHOMA CITY, OK 73107

TELEPHONE: (405) 521-6550 FAX: (405) 521-6525 TOLL FREE: 1-877-484-4424

Web site: http://ok.gov/cib/

ALARM ENDORSEMENT APPLICATION INFORMATION

FEES FOR LICENSE AND APPLICATION

ISSUANCE FEES: \$75.00

Return completed application with **Issuance fees to** address listed above.

*NOTE: Please make remittance payable to the CONSTRUCTION INDUSTRIES BOARD.

You must provide with Alarm Endorsement application:

- 1. A recent passport style & quality photograph
- 2. Two classifiable sets of fingerprints taken by a local, state or federal law enforcement agency
- 3. Disclosure of convictions of all crimes of applicant, both felony and misdemeanor

Note:

- It is very important for all applicants to review all of the eligibility requirements and preclusions in the law before submitting an alarm endorsement application. If it is determined during processing that an applicant has not met all of the requirements or if any of the preclusions are found to pertain to the applicant, the application will be denied and the processing fee will not be refunded.
- Some local and state law enforcement agencies charge a fee to complete the fingerprint card. This
 fee is payable to the law enforcement agency and does not reduce the amount of your fee to the
 CIB for the Alarm Endorsement.

The CIB must receive your fingerprint card to process your application. Your fingerprints will be submitted to OSBI & FBI. Fingerprint cards which are kept by the law enforcement agency for direct submission to OSBI may be lost, delayed or cause the endorsement application to go unprocessed.

Construction Industries Board 2401 N.W. 23rd, Suite 2F Oklahoma City, OK 73107 Telephone: (405) 521-6550

Fax: (405) 521-6525

Do Not M	Mark in This Section
Approved:	
Disapproved:	

APPLICATION FOR ALARM ENDORSEMENT REGISTRATION Registration Fee Must Accompany License

Type or print in ink 1. NAME _ Middle Last STREET ADDRESS _____ City Zip State TELEPHONE: (____) _____ (___) ____ BIRTHDATE: ___ /___ /___ HEIGHT: _____ WEIGHT: ____ HAIR: ____ EYES: ____ SSN: ____ 5. Disclosure of all criminal convictions, felonies & misdemeanors. (Attach additional sheets if necessary) Type of Crime **Date of Conviction** Location Court 6. I have previously performed alarm work with my existing electrical license or registration. Yes No I currently hold an alarm technician or salesperson license from the Oklahoma State Department of Health. Yes No Date: ___/____ Applicant's Signature: I certify that the information given on this application by me and on the attached certification are true and accurate to the best of my knowledge. I understand the false information could result in the revocation of my license. State of: _____ County of: ____ Before me, the undersigned, a Notary Public in and for said County and State on this _____to me known to be the identical person(s) who executed the within personally appeared _ and foregoing instrument and acknowledged to me that he / she executed the same as his / her free and voluntary act and deed for the uses and purposes therein set forth. Given under my hand and seal the day and year last above written. My Commission Expires: ____/___/____ Notary Public (Seal)

Addendum Page					

Instructions for Required Affidavit:

All natural persons fourteen (14) years of age or older and present in the United States, applying for a license with the Oklahoma Construction Industries Board are required, by the provisions of 56 O.S. Supp. 2007 § 71, to provide the Board with verification of lawful presence in the United States by executing one of the Affidavits below before a notary public or other officer authorized to notarize affidavits under State law. The Board's licensing offices are staffed with notaries who are available to provide notary service at no cost to Applicants.

AFFIDAVIT VERIFYING LAWFUL PRESENCE IN THE UNITED STATES

Option 1 - Verification of Citizenship Affidavit of STATE OF OKLAHOMA [Applicant's Full Name] COUNTY OF __ , of lawful age, being first duly sworn, upon oath states, under penalty of perjury, as follows: [Applicant's Full Name] I am a United States Citizen. [Signature of Applicant] Subscribed and sworn to or affirmed before me this _____ day of ______, 20 _____, by__ [Applicant] My Commission Expires: _____ ___ (Seal) NOTARY **Option 2 - Affidavit Verifying Qualified Alien Status** Attention: This affidavit will not be accepted without a copy of a valid immigration document which reflects the applicants "A" number or "I-94" number. Affidavit of

[Applicant's Full Name]	COUN	TY OF) ss:
[Applicant's Full Name]	, of lawful age, being as follows:	first duly sworr	n, upon oath states	s, under penalty of perjury,
I am a qualified alien under the fed States.	leral Immigration and	Naturalization A	Act, and I am law	fully present in the United
		[Signature of A	Applicant]	
Subscribed and sworn to or affirm My Commission Expires:		_ day of	, 20	, by [Applicant]
			NOTAR	RY

STATE OF OKLAHOMA

)