

STATE OF KANSAS
OFFICE OF THE ATTORNEY GENERAL
Through the KANSAS BUREAU OF INVESTIGATION

Firearm Permit Renewal Application

1. Name: _____
(Print Last name, first name, middle name or initial)

Agency you are with or DBA (doing business as) name: _____

Business mailing address: _____

Residential address: _____

Telephone numbers: _____ / _____ / _____ / _____
Work Home Cell Phone Fax

2. Explain the need to carry a firearm in your work as a private detective. _____

Is it necessary for you to carry a firearm in order to protect your life or property, or to protect the life or the property of your clients? Yes No

3. Within each of the past 2 years, have you:

(a) satisfactorily completed a minimum of 2 clock-hours of training in any of the following areas that was provided by a certified firearms trainer? Yes No

Check any area completed.

- _____ instruction in lawful use of force by a private detective, including concepts of civil liability and criminal culpability;
- _____ weapons fundamentals and safety;
- _____ marksmanship fundamentals and safety procedures;
- _____ care, cleaning and maintenance of weapons;
- _____ familiarization instruction in basic weapon retention and disarming techniques;
- _____ familiarization instruction in daylight, dim light and darkness shooting; and
- _____ instruction and shooting exercises with semi-automatic pistols or revolvers;

(b) satisfactorily completed a daylight course of fire that required you to fire 35 out of 50 rounds into the center mass portion of the National Rifle Association TQ-19 target in a static position which varied from a minimum of 3 feet to a maximum of 75 feet? Yes No

Name of certified trainer who provided training and certified satisfactory completion of course of fire:

(Certified firearms instructor's name)

Attach a 'Notice of Completion' training form to this application.

**Note: If you were a law enforcement officer within the past 24 months, attach a copy of your firearms training.
K.S.A.75-7b17(a)(2)(A)**

4. Identify **all** firearms for which you are applying for a firearm permit:

Make or Manufacturer Model Serial Number Caliber Barrel Length

- 1. _____
- 2. _____

The above information is true and correct to the best of my knowledge.

Date

Signature of applicant

Application fee for a firearm permit is \$50.00. Make money order, cashier check or personal check payable to the Kansas Bureau of Investigation. We now have the ability to charge any/all private detective licensing fee(s) on your Visa or Master Card credit card. Mail the completed firearm permit application, 'Notice of Completion' training form and application fee to Kansas Bureau of Investigation, Private Detective Licensing, 1620 SW Tyler, Topeka, Kansas 66612-1837. If you have questions please call 785-296-4436.

Date of Request

____ - ____ - 2 0 ____

Name on Credit Card

Mailing Address for Credit Card

Street: _____

City: _____

State: _____ Zip code: _____

Expiration Date

____ - ____

Visa/MC 16 digit card number

____ - ____ - ____ - ____ - ____ - ____ - ____ - ____ - ____ - ____ - ____ - ____ - ____ - ____ - ____ - ____

Phone Number:

____ - ____ - ____

Other Information Number:

What is to be billed on the credit card

Check all that apply

- PI Packet _____
- Application _____
- Firearm Permit _____
- Badge/Case _____
- Renewal _____
- Misc - explain _____

Amount to be billed on your credit card

(sample - \$250.00)

\$ _____ . _____

MANDATORY 3 digit auth. code on back of card

____ - ____ - ____

Notice of Completion Form

FIREARM PERMIT TRAINING

STATE OF KANSAS
OFFICE OF THE ATTORNEY GENERAL
Through the **KANSAS BUREAU OF INVESTIGATION**

This form is to be completed by the firearms trainer.

Name of private detective applicant: _____ License Number: _____
(Print or Type)

Name of certified training instructor: _____
(Print or Type)

Mark which training applies for this applicant:

- Initial firearms permit Renewal of firearm permit
 Re-certification (off year training) Change or addition of a firearm(s)

Education and training course:

Did applicant successfully complete the education & training course? Yes No

Applicant's written examination score: _____

Date(s) of training course: _____

Firing range proficiency: Did applicant successfully fire 35 out of 50 rounds into the center mass portion of the National Rifle Association TQ-19 target in a static position from distances which varied between a minimum of 3 feet to a maximum of 75 feet? Yes No

Range location: _____

Identify **all** firearms for which the applicant has completed a training course for the applicant's firearm permit:

	<u>Manufacture</u>	<u>Model Number</u>	<u>Serial #</u>	<u>Caliber</u>	<u>Barrel Length</u>
1.	_____				
2.	_____				

I hereby certify that the above-named applicant has successfully completed the firearms and lawful use of force class. This is in accordance with the training plan on file at the Kansas Bureau of Investigation. The above information is true and correct to the best of my knowledge.

Date

Signature of certified firearm instructor

Firearm trainers shall furnish notice to the Attorney General through the Kansas Bureau of Investigation when an applicant for a firearm permit, an applicant for renewal of a firearm permit or re-certification for the firearm permit has completed a firearm-training course within 10 days of the date the training course. A copy of this notice shall be given to the applicant and the firearm trainer shall retain a copy.

Please note your firearms trainer may have his/her own 'Notice of Completion Form'. If it contains all pertinent information, it is acceptable.

CERTIFIED FIREARMS TRAINERS
FOR KANSAS PRIVATE DETECTIVES

Perry Chad **Clayton**
Apollo Consulting Group
5921 N.W. Hidden Valley Drive
Lee's Summit, Missouri 64064
(816)560-8353

John **Ellis**
PMO Security Service
5104 Edgehill Drive
Kansas City, Kansas 66106
816-830-1177

Robert 'RJ' **Hope**
Clarence M Kelley & Associates, Inc.
3217 Broadway, 4th Floor
Kansas City, Missouri 64111
816-756-2458 x 342
816-931-0795 - fax

William Jesse **Harrison**
Bank Midwest, N.A.
3500 Rainbow Blvd.
Kansas City, Kansas 66103
816-215-5206
913-384-9366 - fax

Calvin **Johnson**
Professional Services, Inc.
Post Office Box 2512
Salina, Kansas 67402-2512
785-452-9770
785-452-9025 - fax

Gene **McAdam**
Wolf Investigations
Post Office Box 1089
Wichita, Kansas 67201
316-265-2102
316-269-0554 - fax

Robert **McCaslin**
Associated Investigators
Post Office Box 48572
Wichita, Kansas 6720
316-312-6631
316-652-9196 - fax

Douglas D. **Peterson**
Bulls Eye Investigations
PO Box 49152
Wichita, Kansas 67201
316-942-0393
316-267-5100 - fax

William 'Dusty' **Rhodes**
American Paladin Investigation
Suite 274
5427 Johnson Drive
Mission, Kansas 66205
913-940-1203

Charles **Stephenson**
The Orion Group
5750 West 95th Street, Suite 320
Overland Park, Kansas 66207
913-385-5657
913-385-5740 - fax

Madison **Webb**
Executive Solutions, Inc.
6906 W 78th Terrace
Overland Park, Kansas 66204
(816)985-4792

Samuel **Burroughs**
Clarence M. Kelley & Associates, Inc.
7945 Flint
Lenexa, KS 66214
913-647-7709
913-647-7710 - fax

