

North Carolina Locksmith Licensing Board

P.O. Box 10972
Raleigh, NC 27605

phone: 919-838-8782 | fax: 919-833-5743

www.nclocksmithboard.org

Obligations of Licensees

By submitting your application and accepting the license issued by the Board, you become obligated to abide all the provisions of the Statute and by the Rules established by the Board, including the Ethical Standards.

Here is a basic list of those obligations. Please keep this list for future reference.

1. You must make your license available for inspection at all job sites.

Generally, the Board recommends wearing it as an ID badge at all times while performing locksmith services.

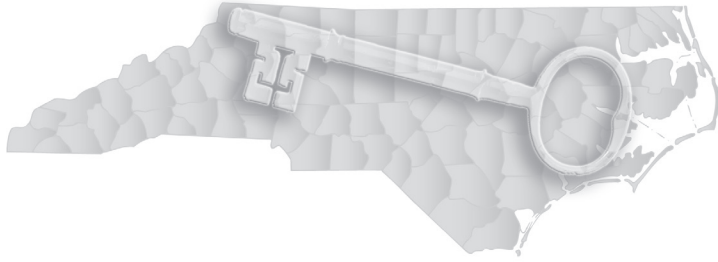
2. If you have any unlicensed employees, you must see to it that they never perform locksmith services requiring a license unless a licensed locksmith is present to provide direct supervision of their work. You must see to it that your employees have a valid license before allowing them to perform locksmith services without direct supervision by a licensed locksmith.

3. If you have any employees, licensed or not, you are required to provide the Board with a list of those employees if they have access to any locksmith tools, customer keys, or key records. You must notify the Board within 30 days of any changes to this list of employees.

4. You are obligated to uphold the Ethical Standards imposed by the Board. This is section .0500 of the Rules. Read it carefully. Violations of the Ethical Standards can result in disciplinary action by the Board, including revocation of your license.

5. The Statute and Rules spell out standards for verifying and recording the identity and authority of persons requesting entry into properties (vehicles, buildings, safes, etc.) with the assistance of a locksmith. You are obligated to comply with these standards.

6. It will be your responsibility to comply with any continuing education requirements the Board establishes and to apply for license renewal before your license expires.



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Application Checklist for Locksmith License

All required supporting documents must be included with your application. Applications submitted without required documents will not be processed until all required materials are submitted. Make sure that all the following documents are enclosed with your completed application form:

	A copy of your legal resident alien documents, if you are not a US Citizen.
	A copy of any relevant license you hold from another state, if applicable.
	A copy of any Certifications you have earned, if applicable.
	Complete and accurate explanations of any affirmative answers on questions 13–16.
	A photograph taken within the 3 months preceding application (printed or .jpg).
	A certified criminal history report from your county of residence, and from the county in which your business is based (if different).
	A copy of your last military discharge papers (DD-214 or equivalent), if applicable.
	Notarized <u>Authorization for release of records</u> form.
	Completed and signed <u>Authority for Release of Information</u> for state and federal record check.
	A check or money order for \$438 (\$200 license fee + \$38 for SBI/FBI record check, + \$200 examination fee), payable to NC Locksmith Licensing Board. Returned checks are subject to a \$25 fee. In the event that the check accompanying your application is returned unpaid, the processing of your application will be halted until both the check amount and the returned check fee are paid in full.
	A completed test registration form.
	Make a copy of your application and all supporting documents for your records.



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Application for Locksmith License
(in accordance with G.S. 74-F)

1.	Name:		
	(first)	(middle)	(last)
2.	Place of Birth:	Date of Birth:	
	(county, if US)	(state or country)	
3.	Are you a US Citizen?	Resident Alien?	Other?(indicate):
	<i>(Note: if not a US citizen, you must provide copies of documentation verifying legal resident alien status.)</i>		
4.	Current Residential Address (must be a physical address, not a P.O. Box):		
a)			
	(street number and name)		
b)			
	(city)	(county)	(state) (zip)
5.	Mailing Address (P.O. Box acceptable): This address will appear on your photo ID card.		
a)			
	(street number and name)		
b)			
	(city)	(county)	(state) (zip)
6.	Telephone contact:	Home:	Business:
7.	Additional contact information:	Fax:	e-mail:



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APPLICANT: (first) / (middle) / (last)

8.	Out-of-State Licenses or Locksmith Certifications held:	
	For licenses: list the name of the license, along with the state of issue and expiration date. Include a copy of the license. List licenses below:	For certifications: list certification, the issuing organization, and the date of issuance. Include a copy of the certificate. List certifications below:

9.	List the name, address and phone number of the company in which you are currently employed and your status there:			
	Legal (corporate) name	dba, if different		
a)				
	(street number and name)			
b)				
	(city)	(county)	(state)	(zip)



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10. **List all residences** during the past 5 years, beginning with your current home address. Use additional sheets if needed.

From (month/year)	To (month/year)	Address	County / State	Zip

11. **Character references.** You must supply a complete address and telephone number for 2 unrelated and disinterested individuals:

Name:	Phone:
Home address:	
Business address:	
Nature and length of relationship:	
Name:	Phone:
Home address:	
Business address:	
Nature and length of relationship:	



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APPLICANT: (first) / (middle) / (last)

12.	Do you possess a valid motor vehicle operator’s license?	Yes	No
	License number:	State:	

If you answer any of the following questions “YES,” you must provide a complete details on a separate page. Please read carefully. False information can lead to denial of license.

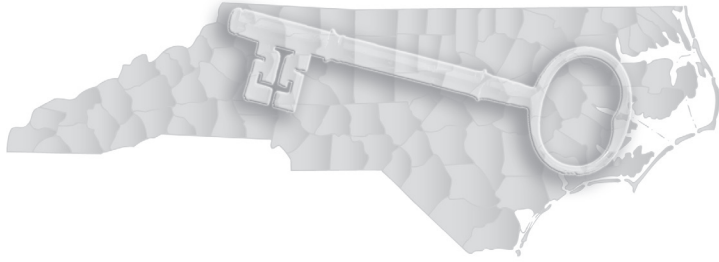
	YES	NO	
13.			Have you ever been involuntarily dismissed, fired, or allowed to resign in lieu of firing as a result of theft, embezzlement, or any alleged act that could have resulted in criminal prosecution? (Including discharge from military service)
14.			Have you ever been convicted or pled guilty to a criminal offense other than a minor traffic violation in any state ? (Including convictions for DWI)
15.			Have you ever been convicted or pled guilty at a court-martial while a member of the Armed or Reserved Forces?
16.			Have you ever been denied any license or had any license revoked in any state, including North Carolina? (Including your driver’s license)
17.			Have you ever served in any branch of the US Military Services? If yes, enclose a copy of your last DD-214 or equivalent.

I hereby certify that all answers and statements in this application and the supporting documents provided are true and accurate to the best of my knowledge. I am aware that should an investigation disclose any misrepresentation or falsification, my application for licensure may be denied or my license revoked.

I have read and fully understand the obligations of licensees. I agree to abide by the Locksmith Licensing Act and the Rules established by the North Carolina Locksmith Licensing Board, including the Code of Ethics.

Signature:	Date:
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Important notice: Pursuant to G.S. 25-3-506, a \$25.00 processing fee will be charged for any check submitted to the NC Locksmith Licensing Board on which payment has been refused due to insufficient funds or the closure of the account.



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Authorization for release of records

I, _____, hereby request that all military organizations, professional associations, educational institutions, government agencies, and my present and former employers release and furnish to the North Carolina Department of Justice and/or the Locksmith Licensing Board all records and other information concerning me. The above mentioned agencies are currently conducting a personal background investigation to determine my suitability for a Locksmith License. Your assistance and cooperation will be greatly appreciated. A copy of this signed and notarized authorization shall be as effective and valid as the original.

This the _____ day of _____, 20_____.

Applicant

Sworn and subscribed before me, this
the _____ day of _____, 20_____.

Notary Public

My commission expires _____



ROY COOPER
ATTORNEY GENERAL

NORTH CAROLINA
STATE BUREAU OF INVESTIGATION
DEPARTMENT OF JUSTICE

3320 GARNER ROAD
PO Box 29500
RALEIGH, NC 27626-0500
(919) 662-4500
FAX: (919) 662-4523



GREGORY S. MCLEOD
DIRECTOR

**ELECTRONIC FINGERPRINT
SUBMISSION RELEASE OF INFORMATION**

I authorize the North Carolina Department of Justice through the State Bureau of Investigation, Criminal Information and Identification Section, to perform a national criminal history record check in connection with my application for licensure with the North Carolina Locksmith Licensing Board pursuant to §§NCGS 74F-18.

I understand that the North Carolina State Bureau of Investigation, Criminal Information and Identification Section, the Federal Bureau of Investigation, and its officials and employees shall not be held legally accountable in any way for providing this information to the above named agency, and I hereby release said agency and persons from any and all liability which may be incurred as a result of furnishing such information. I understand that the above named agency cannot provide a hard copy of the results of this criminal history record check to me.

Applicant/Licensee's Signature

Date

I authorize the above named subject to be fingerprinted and have the fingerprints submitted to the SBI electronically.

Barden Culbreth

Agency Authorized Official's Signature

4/25/2014

Date

Barden Culbreth

Authorized Official's Printed Name

PO Box 10972, Raleigh, NC 27605

Agency Address

919-838-8782

Agency Phone Number

I certify that I have taken the fingerprints of the above named subject and forwarded them electronically to the State Bureau of Investigation.

Signature of Official Taking Fingerprints

Date



A Nationally Accredited State Agency

An ASCLD/LAB Accredited Laboratory Since 1986



APPLICANT INFORMATION

Last Name: _____

Date of Birth: _____

First Name: _____

Place of Birth _____

Middle Name: _____

Residence: _____

Maiden Name: _____

Aliases: _____

Employer and Address:
North Carolina Locksmith Licensing Board

Sex: Male _____ Female _____

Reason Fingerprinted:
Locksmith Licensee
State and Federal Search §74F-18

Race: _____

(write the appropriate letter in the space provided)

W – White, B – Black, I – American Indian,
A – Asian or Pacific Islander, U - Unknown

Social Security Number: _____
(*Optional)

Your Case No. (OCA): **LOCKSM000**

Height: _____

Type of Transaction: **NFUF**
Non fed-User Fee

Weight: _____

NC FP Card Type: **OTH**
OTHER

Eye Color: _____

(write the appropriate letters in the space provided)

BLK – Black GRY – Gray MAR – Maroon
BLU – Blue BRO – Brown GRN – Green
HAZ – Hazel PNK – Pink XXX – Unknown

Hair Color: _____

(write the appropriate letters in the space provided)

BAL – Bald BLK – Black BLN – Blonde or Strawberry
BRO – Brown GRY – Gray or partially
RED – Red or Auburn SDY - Sandy

*Disclosure of social security number is entirely voluntary and not required. If disclosed, the social security number will be utilized to assist with accurate identification/exclusion of possible criminal history records.