

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.

Checklist of Supporting Documents

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 fingerprint card completed by your County law enforcement office (be sure to complete all fields as shown in the sample).
- ____ 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 Authorization for release of records form.
- ____ Completed and signed Authority for Release of Information for state and federal record check.
- ____ A check or money order for \$338 (\$100 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.
- ____ Read “Obligations of Licensees.” File this for your records.

Raleigh, NC 27605
ph: 919-838-8782
fax: 919-833-5743
www.nclocksmithboard.org

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) _____
(Note: if not a US citizen, you must provide copies of documentation verifying legal resident alien status.)

4. Current Residential Address (must be a physical address, not a P.O. Box)

(street number and name) (city) (county) (state) (zip)

5. Mailing Address (P.O. Box acceptable) *This address will appear on your photo ID card.*

(Box # or street address) (city) (county) (state) (zip)

6. Telephone: Home () _____ Business () _____

7. Additional contact information: Fax () _____ e-mail _____

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.

For certifications: list certification, the issuing organization, and the date of issuance. Include a copy of the certificate.

Name _____
(first) (middle) (last)

9. List the name, address and phone number of the company in which you are currently employed and your status there:

Phone number () _____ Are you an owner/partner/officer? _____
Employee? _____

10. Address History:

*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 CountyState 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:

Name _____
(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.

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? (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? Yes _____
No _____

If yes, enclose a copy of your last Form 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:** _____

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.

North Carolina Locksmith Licensing Board

P.O. Box 10972
Raleigh, NC 27605
ph: 919-838-8782
fax: 919-833-5743
www.nclocksmithboard.org

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 _____

North Carolina Locksmith Licensing Board

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Examination Registration

1. Name _____
(first) (middle) (last)

2. Date of Birth _____
(month/day/year)

3. Address (as it appears on your Driver's License or Photo ID):

_____ (street or P.O. Box) _____ City _____ State _____ Zip _____

4. Please provide reliable contact information. *The Board's staff will use this to confirm your reservation for a specific examination session.*

Telephone: Home () _____ Business () _____

Fax: () _____ e-mail: _____ Cell: () _____

Which is the BEST way to contact you? _____

5. Preferred examination session, if known. Date _____ Location _____
(Leave blank if you are not sure if you will need to take the examination or if you aren't sure of the locations and dates available. The Board or its staff will contact you with your options.)

Office use only: Reg. # _____ Fee _____ Result _____

AUTHORITY FOR RELEASE OF INFORMATION
State and Federal Record Check

I authorize the North Carolina Department of Justice through the State Bureau of Investigation, Division of Criminal Information to perform a fingerprint search of the State's criminal history record file and a fingerprint search of the Federal Bureau of Investigation's files for a national criminal history record check with the NC Locksmith Licensing Board for licensure as registered locksmiths pursuant to N.C.G.S. 74F-18.

(Print or Type)

Last Name First Middle Maiden

Social Security Number Date of Birth Sex Race

I understand that the North Carolina State Bureau of Investigation, Division of Criminal Information, and its officials and employees shall not be held legally accountable in any way for providing this information to the NC Locksmith Licensing Board, 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 further understand that the NC Locksmith Licensing Board cannot provide a **hard copy** of the results of this criminal history record check to me.

Applicant's Signature

Date

This request form must be kept on file for one (1) year from the date the fingerprints were submitted to the SBI. Please mail the transmittal letter and the fingerprint card to:

State Bureau of Investigation
Identification Section/Applicant Unit
Post Office Box 29500
Raleigh, North Carolina 27626-0500

**ORI # LOCKSM000 - NC LOCKSMITH LICENSING
BOARD**

Locksmith Board
September 2003

SBI FINGERPRINT CARD CHECK - \$14.00 _____
FBI FINGERPRINT CARD CHECK - \$24.00 _____

APPLICANT

LEAVE BLANK

TYPE OR PRINT ALL INFORMATION IN BLACK
LAST NAME NAM FIRST NAME MIDDLE NAME

FBI

LEAVE BLANK

SIGNATURE OF PERSON FINGERPRINTED

ALIASES AKA

O

R

NCBC10000
ST BU OF IN
RALEIGH, NC

DATE OF BIRTH DOB
Month Day Year

RESIDENCE OF PERSON FINGERPRINTED

CITIZENSHIP CIT

SEX

DATE

AGE

YES

NO

PLACE OF BIRTH POB

DATE SIGNATURE OF OFFICIAL TAKING FINGERPRINTS

LE NO PCA

LOCKSM000

FE NO FBI

LEAVE BLANK

EMPLOYER AND ADDRESS
NC Locksmith Licensing Board

ARMED FORCES NO MNU

CLASS

REASON FINGERPRINTED
Locksmith licensees
NCGS 74F-18
State + federal

SOCIAL SECURITY NO SOC

REF

MISCELLANEOUS NO MNU

Sample Card

Fill out all ✓ fields

and copy what is
written in.

State + federal

1. R. THUMB

2. R. INDEX

3. R. MIDDLE

4. R. RING

5. R. LITTLE

6. L. THUMB

7. L. INDEX

8. L. MIDDLE

9. L. RING

10. L. LITTLE

LEFT FOUR FINGERS TAKEN SIMULTANEOUSLY

L. THUMB

R. THUMB

RIGHT FOUR FINGERS TAKEN SIMULTANEOUSLY