Company Manager Application

Alarm, Locksmith, and Fire Sprinkler Program

oklahoma.gov/labor

OKLAHOMA DEPARTMENT OF LABOR
409 NE 28th St., 3rd Floor
Oklahoma City, OK 73105
405-521-6100/888-269-5353

APPLICATION TYPE	APPLICATION FEE	FEE IS NON-REFUNDABLE
☐New	$170.00	

If Application process not completed within 120 days of submission, a new application (and fee) will need to be filed.

REQUIRED DOCUMENTATION FOR NEW APPLICANTS:

U.S. CITIZENS:

- Certificate of Completion from an Approved Examination Entity
- Affidavit of Lawful Presence, signed
- A valid, unexpired Driver's License **OR** State Issued Photo-Identification Card **OR** Military ID **AND**
- Birth Certificate **OR** Social Security Card **OR** valid, unexpired passport **OR** W-2 form/1099 form from current employer
- Two (2) completed fingerprint cards
- Certificate of Applicant's Experience

NON-U.S. CITIZENS:

- Certificate of Completion from an Approved Examination Entity
- Verification of immigration status **AND**
- Affidavit of Lawful Presence, signed
- A valid, unexpired Driver's License **OR** State Issued Photo-Identification Card **OR** Military ID **AND**
- Birth Certificate **OR** Social Security Card **OR** valid, unexpired passport **OR** W-2 form/1099 form from current employer
- Two (2) completed fingerprint cards
- Certificate of Applicant's Experience

All new applicants must appear IN PERSON at the Oklahoma Department of Labor or ODOL approved facility

CATEGORY: ☐Burglar Alarm/Residential Fire Alarm ☐Commercial Fire Alarm ☐Electronic Access Control ☐Closed Circuit Television ☐Nurse Call ☐Locksmith ☐Fire Sprinkler ☐Monitoring Facility

Name:	**Current Technician Lic #:**
Mailing Address: **City:**	**State:** **Zip Code:**
Social Security #:	**Date of Birth:**
Phone: ( )	**E-mail Address:**
Company Name & License #:	**Company Phone ( )**

MILITARY STATUS

Within the past six (6) months, have you been honorably discharged from the Armed Forces of the United States, coming off Active Duty as a member of the National Guard or Reserves, or transferred from another state to Oklahoma? ☐Yes ☐No

If yes, provide date of discharge/coming off Active Duty/transfer: _____

Are you a spouse of an active duty member of the Armed Forces of the United States? ☐Yes ☐No

I certify the information given on this application and on the attached certification is true and accurate to the best of my knowledge and belief. I understand that false information could result in revocation of my license.

Signature of Applicant / *APPLICATION CANNOT BE PROCESSED WITHOUT A SIGNATURE AND FEE* **DATE**

Be aware by completing this application you are submitting to a national Federal Bureau of Investigation background check. Your criminal history record search obtained pursuant to U.S. Department of Justice Order 556-73 may not meet employment requirements. Should this be the case, you will have the opportunity to appeal to the Alarm/Locksmith Advisory Board. If you would like additional information regarding your background check, please refer to the Federal Bureau of Investigation website at www.FBI.gov.

FOR OFFICE USE ONLY

The ODOL shall not discriminate against any person or group due to race, national origin, native language, sex, sexual orientation, gender identification, marital status, religion, age, disability, genetic information, political beliefs, or other class or characteristic recognized by law. Persons with disabilities recognized by the Americans with Disabilities Act, which require alternative means of communication, including but not limited to reading, writing, and hearing assistance, should advise the ODOL.	Date:	Lic #:	Receipt #:
	Initials:	Payment Type:	Amount:

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Certificate of Applicant's Experience
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Applicant Name:	**Current License # (if applicable):**

READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

The applicant named on this form is required to furnish one or more certificates in support of their experience. The applicant, therefore, is requesting their current and/or previous employer to certify knowledge of experience. All statements made on behalf of an applicant's experience in the classification cited on this form shall be verified by a qualified and responsible person.

Category/Required Hours	Licensed Technical Hours	Sales Hours	Total Hours
Burglar Alarm (8000 Hours)			
Fire Residential (8000 Hours)			
Fire Commercial (8000 Hours*)			
Closed Circuit Television (4000 Hours*)			
Access Control (4000 Hours*)			
Nurse Call (4000 Hours*)			
Locksmith			
Fire Sprinkler **			

* Requirements per Alarm, Locksmith, and Fire Sprinkler Industry Act 59 O.S. § 1800.7 (6).
** An applicant for **Commercial** Fire Sprinkler Manager must provide current NICET Level III or Level IV Certificate or wallet card for Water-Based System Layout or verified minimum of five years (10,000 hours) as a Commercial Fire Sprinkler Technician Level employee within the Fire Sprinkler Industry. An applicant for **Residential** Fire Sprinkler Manager must provide current NICET Level III or Level IV Certificate or wallet card for water-based System Layout or verified minimum of five years (10,000 hours) as a Technician Level employee within the Fire Sprinkler Industry or 5 years (10,000 hours) as a licensed plumber.

Describe in detail the type of work performed by applicant: _____

_____

Please identify your business relationship to the applicant_____

I certify that I have direct knowledge that said applicant was employed by _____

Company name & License # (if applicable)

from _____ to _____
date date

to perform work in accordance with the Oklahoma Alarm and Locksmith Licensing Act. I state under penalty of perjury under the laws of Oklahoma that the forgoing is true and correct and that I have read and understand this form and executed it in my own hand.

Date:_____ Signature: _____

City & State: _____ Print Name: _____

Phone Number: _____

INSTRUCTIONS FOR USE OF THE AFFIDAVIT BY PERSON MAKING APPLICATION FOR A LICENSE, PERMIT, OR CERTIFICATE

The person signing this form must read these instructions carefully.

1. In the space after the word "Date", the person executing this form should write today's date. The person executing this form should indicate the city and state where they are actually located when they sign this form.
2. Within the context of the execution of this form, the term "penalty of perjury" means the willful assertion of the fact of either United States citizenship or lawful presence in the United States as a qualified alien, and made upon one's oath or affirmation and knowing such assertion to be false. Making such willful assertion on this form, knowing it to be false, is a crime in Oklahoma and may be punishable by a term or incarceration of not more than five (5) years in prison. Additionally, one who procures another to commit perjury is guilty of the crime of subornation of perjury and may be punished in the same manner as he would be if personally guilty of the perjury so procured.

Privacy Act Statement and Applicant Notification

Authority: The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Public Law 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

Principal Purpose: Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or other responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.

Routine Uses: During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental or authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

Applicant Record Challenge

Applicant Record Challenge: Before a final decision is made, you have the opportunity to complete or challenge the accuracy of the information contained in the FBI identification record. The procedure for obtaining a change, correction, or updating an FBI identification record is set forth in Title 28, CFR 16.34. For information on updating the national criminal history record, visit www.FBI.gov or https://
www.fbi.gov/cjis/identity-history-summary-checks#challenge-of-an-identity-history-summary.
If certified documents are obtained for the purpose of updating your criminal history record, the documents should be forwarded to the FBI and to the repository in the state where the arrest occurred.

Notice Regarding Use of Criminal History

The criminal offenses of applicants for licensure under the Alarm, Locksmith & Fire Sprinkler Industry Act may be used as a basis for denial of a license. The Oklahoma Department of Labor ("ODOL") will consider all convictions and pleas of guilty or nolo contendere and all pending charges to all felony offenses for which less than five years have elapsed since the date of conviction, plea, or release from incarceration, whichever is later. ODOL will also consider convictions and pleas of guilty or nolo contendere to a felony offense when more than five years have elapsed since the date of conviction, plea, or release from incarceration: if the person has been convicted of a new crime; for an offense enumerated in 57 O.S. § 571; for a felony involving domestic assault, domestic assault and battery, or domestic abuse as defined in 21 O.S. § 644; for an offense that would require registration as a sex offender pursuant to the Sex Offenders Registration Act; or any equivalent law from another jurisdiction.

Pursuant to 59 O.S. § 4000.1(F), prospective applicants may request an initial determination of whether their criminal history record may disqualify them from obtaining a license from ODOL. The request shall be in writing and shall include either a copy of the person's criminal history record with explanation of each conviction mentioned in the criminal history record or a statement describing each criminal conviction including the date of each conviction, the court of jurisdiction and the sentence imposed. The person may include a statement with his or her request describing additional information for consideration by the licensing or certification authority. The fee for such a determination is $95.00. 59 O.S. § 4000.1(J).