

CITY OF RAPID CITY

RAPID CITY, SOUTH DAKOTA 57701-5035

Finance Office

300 Sixth Street Telephone: (605) 394-4143 FAX: (605) 394-2232 Web: www.rcgov.org

SECURITY BUSINESS/GUARD AND TAXI BUSINESS/DRIVER PROCEDURE APPLICATION FEES ARE NON-REFUNDABLE

| Fees: | Business License Security | Individual License Security | Combined Security Business | Combined Individual Security | |
|--------------------|------------------------------|--------------------------------|-------------------------------|---------------------------------|--|
| Credit/Debit cards | <u>or</u> | <u>or</u> | and | and | |
| NOT accepted | Taxicab | Taxicab | Security Individual | Taxicab | |
| | * | * | | . | |
| Initial Fee | \$250.00 | \$75.00 | \$250.00 | \$75.00 | |
| Combined License | | | \$75.00 | \$20.00 | |
| DCI Investigation | \$26.75 | \$26.75 | \$26.75 | \$26.75 | |
| Fingerprint | \$20.00 | \$20.00 | \$20.00 | \$20.00 | |
| Total Initial Fee | \$296.75 | \$121.75 | \$371.75 | \$141.75 | |
| Renewal Fee* | \$200.00 | \$50.00 | \$200.00 | \$50.00 | |
| Combined License | | ****** | \$50.00 | \$20.00 | |
| DCI Investigation | \$26.75 | \$26.75 | \$26.75 | \$26.75 | |
| Fingerprint | \$20.00 | \$20.00 | \$20.00 | \$20.00 | |
| Total Renewal Fee | \$246.75 | \$96.75 | \$296.75 | \$116.75 | |

CONTACT THE FINANCE OFFICE IF YOU WOULD LIKE INFORMATION ABOUT HAVING YOUR FINGERPRINTS DONE ELSEWHERE, AS IT AFFECTS THE FEE AND PROCESSING TIME.

- A completed application is submitted to the City Finance Office. Application forms are available from the City Finance Office, 300 Sixth Street, Rapid City, SD or online at https://www.rcgov.org/index.php?option=com_docman&view=download&alias=295-finance-security-license&category_slug=finance-department&Itemid=149
- 2. The application must be signed in front of a Notary Public and Government issued photographic identification (driver's license) must be provided. Notary Public services are available at the City Finance Office at no charge or you may use a Notary Public of your choosing.
- 3. The completed application and appropriate fees are submitted to the City Finance Office. The Finance Office will only accept payment by money order, check or cash for license applications; no debit or credit cards will be accepted. The Finance Office completes the "payment" information section of the application form.
- 4. The applicant contacts the Police Department at (605) 394-6612 to schedule the fingerprinting appointment, walk-ins are not accepted. The applicant will deliver the completed application and receipt of payment to the Police Department for fingerprint processing and background check. The fingerprinting location is in the Evidence Building.

Rapid City Police Department Evidence Division 625 First Street – Rapid City SD

PLEASE CALL AND SCHEDULE YOUR APPOINTMENT, WALK-INS ARE NOT ALLOWED

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- 5. Please allow 10-14 business days from the time of fingerprinting for the license to be issued. Calling / emailing the Police Department or Finance Office does not speed up the process, if after 14 business days, you have not been contacted by either office, please contact PD at 394-6612 or the Finance Office at 394-4143.
- 6. Application Approved The Finance Office will call the applicant for pickup or mail the approved license to the applicant's home address provided on the application form. If special arrangements are needed, please discuss with the Finance Office at the time payment is made.
- 7. Application Denied The applicant will be notified of the denial by the Police Department. At that time the applicant will be provided the opportunity to contact the Chief of Police to schedule a meeting or may contact the Finance Office in writing and request an appeal of the denial; if the latter is chosen, the application will be placed on the next available City Council meeting agenda where the applicant will be allowed to appeal the denial recommendation.
- 8. Security licenses expire two years from the date they are issued. Renewal notices are NOT mailed prior to the expiration date; it is the responsibility of the licensee to renew prior to expiration. A renewal application may be submitted up to 30 days prior to the expiration date, and should NOT be received any later than two weeks before the expiration date to avoid a lapse in licensing. Renewal applications received after the expiration date will be charged the initial rate, not the renewal rate. (See fee chart at top of form)
- 9. The fingerprint processing and background check is required bi-annually regardless if the application is new or being renewed.
- 10. Per Rapid City Municipal Code Section 5.52.020, working without a security license is a Class 2 misdemeanor punishable by up to 30 days imprisonment and up to \$500 in fines, or both.

Further information regarding the City regulations and fees for Security Guards is available in the following Chapters of the Rapid City Municipal Code:

Chapter 5.04 – Business Licenses Generally

Chapter 5.52 - Security Guards

Chapter 2.20.030 – Fees for Criminal Background Investigation

The following web link is provided for your use in researching the above Chapters:

http://www.rcgov.org/ - click on Municipal Codes

11. If there are any questions regarding this procedure, please contact the Finance Office at (605) 394-4143.

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APPLICATION FOR CITY LICENSE SECURITY GUARDS - TAXICABS

APPLICATION FEES ARE NON-REFUNDABLE

License is valid for 24 months from the date of issuance

| Check type of License applied SECURITY GUARDS Individual Security Security Business (1)(2) | ed for: | | TAXICABS ☐ Driver ☐ Taxi Cab Business (3) | | | |
|--|---|--|--|--|--|--|
| Name of corporation or comp | pany by whom you will be [| ☐ employed; ☐own | er | | | |
| BUSINESS NAME | | | | | | |
| BUSINESS ADDRESS | | | | | | |
| BUSINESS CITY/STATE/ZIF | | | | | | |
| BUSINESS PHONE | | | | | | |
| BUSINESS EMAIL (OPTION | IAL) | | | | | |
| Is this a | License No | | Payment Cash Check # Receipt # | | | |
| Fees - Credit/Debit cards N | | <u>Initial</u> | <u>Renewal</u> | | | |
| Business Security or Taxical |) | \$296.75 | \$246.75 | | | |
| Individual Security or Taxi Combined Security Business | ·/Individual | \$121.75 \$371.75 | \$96.75 \$296.75 | | | |
| Combined Individual Security | | \$141.75 | \$290.75 \$116.75 | | | |
| (1) Security Business must (2) Security Business must | provide the number of ve provide the following for Make | ehicles to be operate all vehicles: | d | | | |
| | | | | | | |
| | | | | | | |
| (3) Taxicab Business must | provide the number of ta | xicabs to be operate | d | | | |
| Personal History and Identification: NAME OF: □ APPLICANT; □ EMPLOYEE | | | | | | |
| (last) | | (first) | (middle) | | | |
| List all AKA and Alias nar | nes: | | | | | |
| | | | | | | |
| CURRENT PHYSICAL ADD | RESS | | | | | |
| (Street) | | | | | | |
| | (City/State/Zip) | | | | | |
| PHONE (PRIMARY) | | | | | | |
| EMAIL (OPTIONAL) | | | | | | |
| Are you legally authorized | I to bold one to the control of the | Literatura (Control | s: N-YES N-NO | | | |

| PLACE OF BIRTH | | | | | | | | | | | |
|--|---------------------------|---------------------|--|---------|-----------|----------------|-----------------|-------|----------|----------------------------|--------------------|
| | l pop | 1.00# | | | | T | OTATE (D | | | | |
| AGE | DOB | | SS# | | | | STATE/DL# | | | | |
| HEIGHT | WEIGHT | HAIR | | | EYES | | RACE | | SEX | | |
| Please list the | local telephone nu | ımber(s) at v | which y | ou can | be cont | acted and th | ne hours you d | can b | e conta | acted: | |
| Phone | () | | | Hours | | | - | | | | |
| Phone | _() | | | Hours | | | | - | | | |
| the dates of e | | space is re | urrent employment, please list all jobs y pace is required, please provide informat Street Address | | | information | | | | | r |
| Compa | arry rearrie | Oti | cci Au | uicss | | Oit | yrolale | | Daics L | <u>-111pio</u> | ycu |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| LEGAL If you have ev | er been arrested c | or convicted | for any | / crime | (excludi | ng traffic cit | ations), please | e pro | vide de | tails b | elow. |
| | | | | | | | | | | e Y =Yes or each | |
| Approximate Date | Agency and | State | | Cii | rcumsta | nces & Disp | osition | | Arrested | Convicted | Charges Pending |
| | <u> </u> | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| Have you ever been on court probation <u>or</u> parole as an adult? Yes No If "Yes", please give details (including when, where, why). | | | | | | | | | | | |
| | | | | | | | | | | | |
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| | | | | | | | | | | | |
| <u>TRAFFIC</u> - If operation of a motor vehicle is an integral part of the position you are being licensed for, an investigation of your driving history will be made through a records check. To expedite this procedure, please supply the following information. | | | | | | | | | | | |
| | Name | | | Dr | iver's Li | cense # | State | | Expira | tion D | ate |
| | | | | | | | | | | | |
| | | | | 1 | | | 1 | | | | |

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| Please list all | other states where you ha | ve been licensed | to operate | e a motor vehicle | |
|-----------------|------------------------------|--------------------|-------------|--------------------------|--|
| Please list all | traffic citations (excluding | parking citations) |) you have | received within the last | five years. |
| Natur | e of Violation | Location (City/ | State) | Date | Disposition |
| | | | | | |
| | | | | | |
| | | | | | |
| If Yes: Where | | iously licensed a | | | |
| If Yes: Cause |) | | | | |
| Have you bee | n involved as a driver in a | motor vehicle ac | cident with | nin the last five years? | ☐ Yes ☐ No |
| Date | Location (City/State) | Agend | | Citation | Disposition |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| If there is any | additional information you | wish to explain, | please inc | licate below. | |
| | | | | | |
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| | | | | | |
| | | | | | |
| | | | | | |
| \\/ \\ I\ | VER TO PERMIT BACKG | DOLIND INVEST | | ACKNOWLEDOMEN | T OF DENALTY |
| VVAI | | Must be signed | | | TOPPENALIT |
| | | | | - | Danartmant to |
| ı,(prir | nt name) | , nereb | y authoriz | e the Rapid City Police | рерапінені іо |
| conduct an in | vestigation into my com | | | | ogether with any and all |
| | | | | | I hereby release any law formation concerning me |
| | | | | | submit to a polygraph |
| | n order to verify aspects of | | | | licence in a Class 2 |
| | r punishable by up to 30 | | | | license is a Class 2 both. |
| | , | | | ., | |
| | | Signat | ure of App | licant | |
| | | Date | | | |
| Seal | | Notary | Public | | |
| | | My Co | mmission | Expires | |

NOTICE: FAILURE TO DISCLOSE ANY CRIMINAL OR TRAFFIC OFFENSES MAY RESULT IN THE DENIAL OF THIS LICENSE BY THE RAPID CITY COMMON COUNCIL

| SYSTEMS CHECKED: (For Depar | tment Use ONLY) | | |
|-------------------------------------|-------------------|-------|-------------|
| ☐ Driver's License ☐ CJIS | ☐ RCPD/PCSC |) | ☐ DCI |
| Sex Offender Othe | er | | |
| Information Summary: | | | |
| · | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| INVESTIGATOR | | | ☐ YES ☐ NO |
| SUPERVISOR | | _ | RECOMMENDED |
| - | | _ | |
| DEPARTMENT: ☐ APPROVAL | ☐ DISAPPROVAL | Date: | |
| DEL ALL MENT. MALLOVAL | _ DIO/II I NO VAL | Date | |
| Chief of | f Polico | - | |
| Uniter of | FUIICE | | |

FINGERPRINTING SERVICES

Fingerprinting Service Hours: Monday through Friday; 8:00 a.m. to 3:00 p.m.

Appointment for fingerprinting can only be made by calling the Criminal Investigation Division at (605) 394-6612 during normal business hours, as listed above. Payment to the Finance Office must be made and valid identification provided to the fingerprint operator before your fingerprints are scanned.

Identification Required:

You must bring a valid form of photo identification with you to your appointment. Valid identification includes a valid driver's license or State issued identification card, military ID, or a valid passport. No other forms of identification will be accepted for purposes of fingerprinting.

Fingerprinting Location:

The Rapid City Police Department Evidence Building, located at 625 1st Street, Rapid City, SD.

| Fees: Credit/Debit cards NOT accepted | Business License Security <u>or</u> Taxicab | Individual License Security <u>or</u> Taxicab | Combined Security Business <u>and</u> Security Individual | Combined Individual Security <u>and</u> Taxicab |
|---|--|---|---|--|
| Initial Fee Combined License DCI Investigation Fingerprint Total Initial Fee | \$250.00 \$26.75 \$20.00 \$296.75 | \$75.00 \$26.75 <u>\$20.00</u> \$121.75 | \$250.00 \$75.00 \$26.75 <u>\$20.00</u> \$371.75 | \$75.00 \$20.00 \$26.75 <u>\$20.00</u> \$141.75 |
| Renewal Fee* Combined License DCI Investigation Fingerprint Total Renewal Fee | \$200.00 \$26.75 <u>\$20.00</u> \$246.75 | \$50.00 \$26.75 <u>\$20.00</u> \$96.75 | \$200.00 \$50.00 \$26.75 <u>\$20.00</u> \$296.75 | \$50.00 \$20.00 \$26.75 <u>\$20.00</u> \$116.75 |

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