



Private Investigation Advisory Board

Private Patrol Company

Application User Guide

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Private Patrol Company Application

1. In the **Pre-Screening**, read through the application requirements to obtain a Private Investigation Company License. If you meet the requirements, click the **“Start Application”** button to proceed.

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Pre-Screening

Private Patrol Company Application Requirements

The Regulation and Licensing Department may issue a license to an applicant who submits a completed application and meets the following requirements:

- Business physical address and mailing address.
- Full name, phone number, email and DOB for each Owner, Director and Officer.
- Uniform description and photographs of uniform.
- Registered agent if company is an out of state business.
- License number of the qualifying person's New Mexico Private Patrol Operator License if they are the owner or a Private Patrol Operations Manager License if they are not the owner.
- Each Owner, Director and Officer must submit a completed and signed Attachment A: see the Regulation and Licensing Department website under the Boards and Commissions - Private Investigations: Applications and Forms webpage (www.rld.nm.gov).
- Receipt with registration number for fingerprint criminal history report.
 - For additional information and instructions to submit your fingerprints to request an FBI and NM State criminal history report see the Regulation and Licensing Department website under the Boards and Commissions - Private Investigations: Applications and Forms webpage (www.rld.nm.gov).
- Copy of a million dollar (\$1,000,000) General Liability Certificate of Insurance.
- Payment of application fee - all fees are non-refundable;

IMPORTANT NOTE: All information provided in this application, unless exempt under the Inspection of Public Records Act, Sections 14-2-1 et Seq., NMSA 1978, may be subject to public inspection.

[Save for later](#)
[Start Application](#)

2. In the **Introduction** step, read the information carefully, then click **“Next”**.

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Introduction

Thank you for starting your application for a license with the New Mexico Regulation and Licensing Department. This licensing portal will guide you through the licensing requirements and allow you to save your work and return to your application if you do not complete it all at one time.

This application will confirm that each individual applying meets all requirements for licensure set by either state statute or regulations governing the profession. These licensing requirements, along with continuing education, regular renewals, and compliance monitoring assist to safeguard the profession and certify that licensees meet minimum education, training, and health and safety standards to ensure public trust.

If you have further questions regarding licensure or the Regulation and Licensing Department Boards and Commissions Division, please visit the website at www.rld.nm.gov/boards-and-commissions/. Each Board and Commission have their own webpage with specific requirements for licensure, continuing education, renewals, public meeting information, and a direct phone number and email to their respective administrator and other support staff who can be reached for help.

IMPORTANT NOTE: A Company application for initial licensure or renewal must be completed and submitted by an Owner, Director or Officer of the Company. You will be required to identify as an Owner, Director or Officer on the "Company Information 2" page. If you are not the Owner, Director or Officer of the applicant or licensee, you will not be authorized to submit this application for initial licensure or renewal.

If you are ready to apply, please click the Next button to begin your application.

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3. On the **Basic Information** page, verify that all information is valid and up to date.

Basic Information

Carefully verify that all contact information is current and correct.

Communication regarding licensing and renewals may be sent through email, and any official legal communication regarding complaints and discipline will be sent to the mailing address on file. It is required that every applicant and licensee maintain a current email and mailing address with the board where mail is checked regularly.

Name changes or other updates to your personal information cannot be processed on this page. Any such changes must be made by clicking on the 'My Profile' button below.

Note: If you change any profile information, you will need to restart your application, so that your application reflects your updates.

[My Profile](#)

▼ **Applicant Information**

* First Name Middle Name * Last Name

Any other name(s)

* Phone Number * Email Address

▼ **Mailing Address**

* Mailing Street

* Mailing City * Mailing State

Mailing County (If In New Mexico) * Mailing Zip

* Mailing Country

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- a. If your information is **Not Up to Date**, select the “**My Profile**” button at the top left to update your information.

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Basic Information

Carefully verify that all contact information is current and correct.

Communication regarding licensing and renewals may be sent through email, and any official legal communication regarding complaints and discipline will be sent to the mailing address on file. It is required that every applicant and licensee maintain a current email and mailing address with the board where mail is checked regularly.

Name changes or other updates to your personal information cannot be processed on this page. Any such changes must be made by clicking on the 'My Profile' button below.

Note: If you change any profile information, you will need to restart your application, so that your application reflects your updates.

[My Profile](#)

▼ **Applicant Information**

* First Name Middle Name * Last Name

- i. Select the **“Edit”** button at the bottom right of the page.

My Profile

Person Information

*First Name Middle Name *Last Name

Have you ever used another name under which records relating to your application, education, training or experience may be filed?

Race Ethnicity Preferred Language Are you a New Mexico Resident ?

Date of Birth Gender

Primary Phone No Business Phone No

Identifier Type Identifier Number

SSN

Mailing Address

Mailing Street

City State/Province

Country Zip Code County (If In New Mexico)

Edit

- ii. Enter in all relevant updated data and select **“Save”** at the bottom right when completed, then return to your application and click **“Next”**.

My Profile

Person Information

*First Name Middle Name *Last Name

Have you ever used another name under which records relating to your application, education, training or experience may be filed?

*Race *Ethnicity *Preferred Language *Are you a New Mexico Resident ?

*Date of Birth *Gender

*Primary Phone No Business Phone No

*Identifier Type *Identifier Number

SSN

Mailing Address

*Mailing Street

*City State/Province

Country *Zip Code County (If In New Mexico)

Cancel **Save**

- b. If your information is **Up to Date**, select the “**Next**” button at the bottom right of the page.

* Mailing Street

* Mailing City

* Mailing State

Mailing County (if in New Mexico)

* Mailing Zip

* Mailing Country

Save for later

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4. In the **Company Information** sections, you will be able to provide your company, personnel, and qualifying person information.

- a. Use the text boxes to enter your **Company Name** and **DBA** exactly as they should appear on your printed license. Then use the **Company Type** dropdown to select your company’s structure.

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Company Information

Please entry/update the company name as it should appear on printed license.

* Company Name

* Type Of Company

DBA (if applicable)

Pursuant to 61-27B-11 NMSA 1978, a Private Patrol Company must maintain a physical location in New Mexico where records are maintained and made available for department inspection.

Physical Address

- b. Enter your business's **Physical Address Street, City, and Zip** into the relevant fields. Your company must be located within New Mexico to be licensed by the **Private Investigation Advisory Board**.

Pursuant to 61-27B-11 NMSA 1978, a Private Patrol Company must maintain a physical location in New Mexico where records are maintained and made available for department inspection.

▼ **Physical Address**

* Street

* City

* State

* Zip

* Country

* Is Company mailing address same as physical address mentioned above?

Yes



Save for later

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- c. If your **Mailing Address** is not the same as the **Physical Address**, select “No” from the dropdown. Then repeat step b. in the **Mailing Address** portion. The **Mailing Address** can be located outside of New Mexico, and so the **State** and **Country** fields are unlocked.

▼ **Mailing Address**

* Street

* City

* State

* Zip

* Country

Save for later

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- d. Once all sections of the **Company Information 1** page are complete and correct, click “**Next**” to proceed.

5. On the **Company Information 2** page, start by selecting if you are an **Owner, Director,** or **Officer** of your company by clicking the radio button next to your answer.

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Company Information 2

* Please select that apply:

☒ I certify that I am an Owner of the Company seeking initial licensure or renewal and have legal authority to complete and submit this application.
 ☐ I certify that I am a Director of the Company seeking initial licensure or renewal and have legal authority to complete and submit this application.
 ☐ I certify that I am an Officer of the Company seeking initial licensure or renewal and have legal authority to complete and submit this application.

Add information for all additional owners, directors and officers below.
If you need to view, edit or delete any records, click the down arrow under action for that specific record.

- a. Next, use the “**Add New**” button to begin entering the **Personnel Information** of each of your company’s owners, directors, and officers.

Add information for all additional owners, directors and officers below.

If you need to view, edit or delete any records, click the down arrow under action for that specific record.

Add New

Name	DOB	Email	Action
------	-----	-------	--------

Pursuant to Section 61-27B-11 NMSA 1978, a Private Patrol Company must have a qualifying person who will be present in the office on a daily basis and will maintain the daily operations and records of the Private Patrol Company. A qualifying person is either an owner who is licensed as a Private Patrol Operator or a licensed Private Patrol Operations Manager.

- b. Enter the **First Name, Last Name, Phone,** and **Email** into the corresponding text boxes. Then use the dropdown to select the **Title** of your personnel entry. Finally, enter the **Date of Birth** in **MM/DD/YYYY** format, or use the **Calendar** icon to choose the date in the full calendar view. Click “**Save**” to complete the entry and return to the **Company Information 2** section of your application.

Add information for all additional owners, directors and officers below.
If you need to view, edit or delete any records, click the down arrow under action for that specific record.

Personnel Information

* First name

* Last name

* Title

Select title ▼

Phone

* Email

* DOB

📅

Cancel

Save

- c. Repeat steps f. and g. as needed to provide all your company's owners, directors, and officers. You can use the **Action** dropdown to **View**, **Edit**, or **Delete** your **Personnel Information Entry**.

Add information for all additional owners, directors and officers below.

If you need to view, edit or delete any records, click the down arrow under action for that specific record.

Name	DOB	Email	Action
			Add New View Edit Delete

Pursuant to Section 61-27B-11 NMSA 1978, a Private Patrol Company must have a qualifying person who will be present in the office on a daily basis and will maintain the daily operations and records of the Private Patrol Company. A qualifying person is either an owner who is licensed as a Private Patrol Operator or a licensed Private Patrol Operations Manager.

- d. Use the dropdown to select the **Type of Qualifying Party**. Then enter the license number into the **Search Box** and select the correct number from the list generated beneath the search field. Your **Qualifying Party Name** and **Qualifying Person License Number** will populate in the fields below the **Search Box**.

* Identify the current type of qualifying party for this company

▼

Search by entering an active Private Patrol Operator license number.

✎

Qualifying Party Name

Qualifying Person License Number

→

→

If the qualifying person's name and license number are not provided, application will be placed on hold until a name and current license number are provided.

- e. If you indicated that the main headquarters/parent company is located outside of New Mexico, selecting “**Yes**” will display new fields for you to enter your company’s **Registered Agent** information.
- f. Use the **Registered Agent Type** dropdown to select your response. Enter the **Resident Agent Name**, **Phone**, and **Email** into the text box. Then enter their **Physical Address Street**, **City**, and **Zip**.

* Is the main headquarters, or parent company, of the applicant company located outside of New Mexico?

☒ Yes
☐ No

Pursuant to 61-27B-11 NMSA 1978, a Private Patrol Company located outside of New Mexico must maintain a New Mexico registered agent. If the applicant company is located outside NM list below the name and contact information of the registered agent who will oversee daily operations of the New Mexico location

* Registered Agent Type

* Registered Agent Phone

* Registered Agent Email

▼ Registered Agent Physical Address

* Street

* City

* State

* Zip

* Country

[Save for later](#)

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[Next](#)

- g. Once all sections of the **Company Information 2** page are complete and correct, click “**Next**” to proceed.

6. In the **Questions** section, you will answer questions about your licensure and background. Please complete each section of this page, as they are all required to proceed.
- a. Read each question carefully and then select your response by clicking “**Yes**”, “**No**”, or “**N/A**” if applicable in the radio button next to the response you are choosing. If you select “**Yes**” to the first three questions, an additional text field will populate for you to **Provide Any Relevant Details** into the new field. You will have an opportunity to upload **Supporting Documents** in a later section of the application.

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Questions

* Has the company ever had an application or license in this profession denied, suspended, revoked, surrendered, or had any other form of discipline or disciplinary action by a licensing board in another state or jurisdiction?

☐ Yes
☒ No

* Has an Owner, Director or Officer been convicted of a felony offense in any jurisdiction related to work in the profession or otherwise considered a potential dis-qualifying felony involving dishonesty or an offense involving an intentional violent act or the illegal use or possession of a deadly weapon?

☐ Yes
☒ No

* Has an Owner, Director or Officer of the company currently more than thirty days in arrears in payment of amounts required to be paid pursuant to an outstanding judgment and order for child support in New Mexico or any other state?

☒ Yes
☐ No
☐ N/A

A company which submits an application for an initial license or renewal of a license is not eligible for issuance of the license if any owner, director or officer of the company is not in compliance with a judgment and order for support or subpoenas or warrants relating to paternity or child support proceedings.

* Provide any relevant details below. It is also recommended that you upload any supporting documentation on the document upload page, later in this application

- b. Answer the remaining question by selecting “**Yes**” after reading it carefully. Questions with only one response are a licensure requirement set by your Board/Commission. If you are unable to answer the question truthfully, you may need to contact your Board to inquire about meeting this license type’s requirements.

* Do you certify that each Owner, Director and Officer has completed the required fingerprinting process to request an FBI and State criminal history report?

☒ Yes

Each Owner, Director, and Officer must complete the required fingerprint process prior to proceeding with this application. You may save this application and continue once each Owner, Director and Officer has completed this process. NOTE: Applicant must upload a copy of the receipt with registration number for background report for each Owner, Director and Officer on the documents upload page of this application.

Save for later

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- c. Once all sections of the **Question** page are complete and correct, click “**Next**” to proceed.

7. In the **Uploaded Documents** section, click the blue **“Upload”** icon to begin selecting the document to upload. All fields marked with a red asterisk (*) are mandatory for your application.

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Upload Documents

Document Name	Document Description	Upload a New File	Uploaded Files	Delete
* Copy of \$1M USD General Liability Certificate of Insurance				
* Fingerprint Background for each owner, officer, and director	Copy of the receipt with registration number for background report (good for 90 days) for each business owner, officer, partner or member of the business entity. Receipt must specify the name of the individual(s) to allow Private Investigations staff to look them up on the website. Background for already licensed private patrol operator owner is not required.			
* Attachment A for each owner, director and officer of the applicant Company.				
* Uniform Description	Complete description of the uniform and full length color photographs of the front and each side view of the uniform. All photographs must be clear and legible and accurately depict the uniform.			
Other Supporting Documents	Any supporting documents that could assist in review of the application.			

Save for later

Previous

Next

- a. Select the **“Upload Files”** button to open the file directory of your computer.

Upload

Please attach a copy of the required document.

Note that:

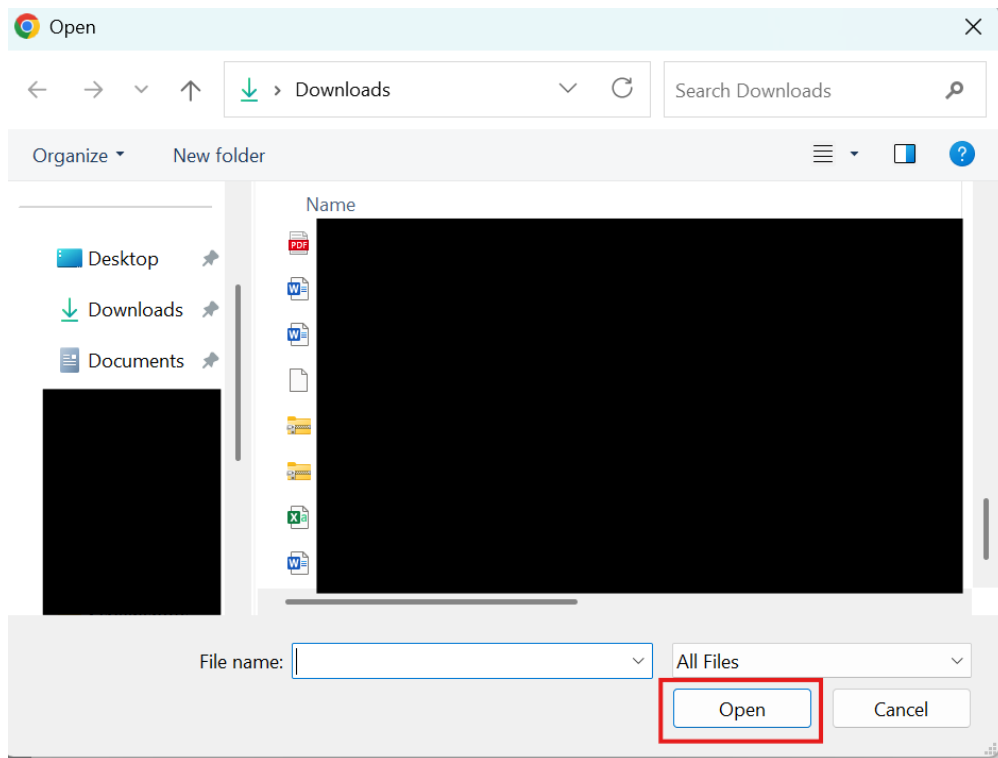
1. File size should not exceed 10MB.
2. File extensions will be accepted only of type doc, docx, pdf, png, tiff, jpg, jpeg, txt, csv.
3. Documents may be uploaded as individual files or as a single merged file on the next page.

 Upload Files

or drop files

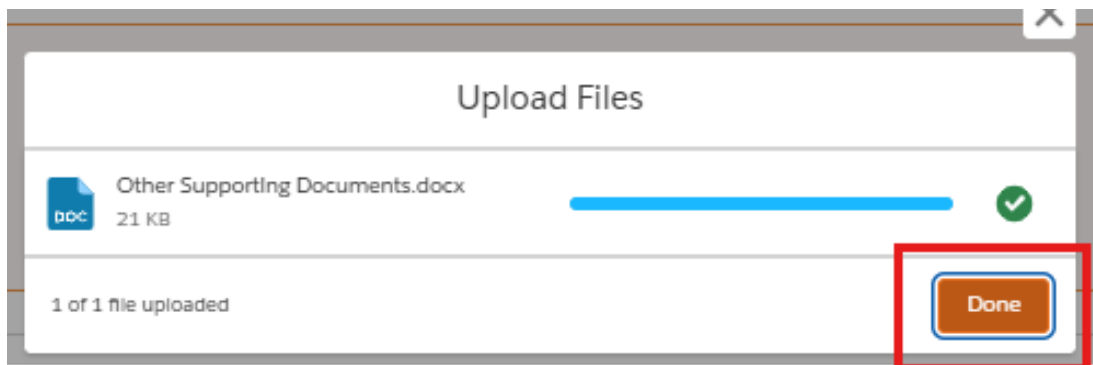
Close

- b. Select the appropriate document requested by your Board from your files, and then select **“Open”** to upload it to your application.



Note: The document must be under 10MB, and of a supported file type (.doc, .docx, .pdf, .png, .tiff, .jpg, jpeg, txt, csv). If you experience issues, we recommend clearing your cache and cookies for the site and then trying to upload the documents again. If the secondary window does not appear when you click the upload button, you may need to enable pop-ups in your web browser as well.

- c. The file will notify you when it has finished uploading with a green check mark to the right of the document name. Select the **“Done”** button when it’s completed to finish your upload.



- d. You will be able to see your document added and can then select the **“Close”** option.

Upload

Please attach a copy of the required document.

Note that:

1. File size should not exceed 10MB
2. File extensions will be accepted only of type doc, docx, pdf, png, tiff, jpg, jpeg, tcl, csi
3. Documents may be uploaded as individual files or as a single merged file on the next page.

Or drag files

Other Supporting Documents.docx

Close

- e. You will be able to see the documents in each section once you have completed an upload. If you would like to remove any uploaded documents, you can click the red **“Trash Can”** icon to delete it from your application.

★ Attachment A for each owner, director and officer of the applicant Company.		Upload	Your Document Name Trash Can
★ Uniform Description	Complete description of the uniform and full length color photographs of the front and each side view of the uniform. All photographs must be clear and legible and accurately depict the uniform.	Upload	Your Document Name Trash Can
Other Supporting Documents	Any supporting documents that could assist in review of the application.	Upload	

Save for later

- f. Repeat step 7 of this guide until all required documents (*) have been uploaded. Then click the **“Next”** button to proceed.

8. On the **Attestation** page, review the statement on the screen. Then select the **checkbox** to certify your agreement. After, **enter your name** and select the **“Next”** button at the bottom right.

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Attestation

Application Attestation

Under penalty of perjury, I hereby depose and state that I am the person identified in this application and the information given by me is true and complete to the best of my knowledge and belief. I understand that any information contained in this application may be investigated and any false or dishonest answer to any question in this application may be grounds for denial or revocation of my license.

☒

* Applicant Name Date

Enter Full Name Here 12/02/2025

Save for later Previous **Next**

9. On the **Payment** page, review the notice before making any selections.

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Payment

Select your mode of payment and click "Pay and Submit" to input your payment information. Payments made with a Visa or Mastercard will be charged a 2.5% transaction fee. This is a fee imposed directly by the bank, and no portion of the fee is paid to or collected by the RLD. Payments made by e-check will not result in any transaction fee.

Note: Only select 'Operating Transfer' if your fee will be paid by another New Mexico state agency and you have received formal confirmation from the agency that it is transferring the funds to RLD through an operating transfer. Renewals will not be approved until an operating transfer is confirmed by RLD. If this option is selected, users can bypass the fee payment.

* Mode of Payment

The amount to be paid is \$

Please click the **Pay & Submit** button to proceed with the payment.

Save for later Previous **Pay and Submit**

*Note: **Military Applications DO NOT** require payment.*

- a. Select a **Mode of Payment** then the **“Pay and Submit”** button. When selecting either **Credit Card (Visa or Mastercard)** or **E-Check** as your payment method, a new tab will open directing you to the **CyberSource Payment Gateway** screen. Please disable any pop-up blockers to ensure the page opens correctly in the new tab.

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Payment

Select your mode of payment and click “Pay and Submit” to input your payment information. Payments made with a Visa or Mastercard will be charged a 2.5% transaction fee. This is a fee imposed directly by the bank, and no portion of the fee is paid to or collected by the RLD. Payments made by e-check will not result in any transaction fee.

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* Mode of Payment

The amount to be paid is \$

Please click the **Pay & Submit** button to proceed with the payment.

[Save for later](#) [Previous](#) [Pay and Submit](#)

Note: Payments are processed through a separate system, and your credit card info is not stored or saved by RLD. Cybersource is a SoNM billing platform, and this is not phishing or other malware. Upon payment completion, you will receive a payment receipt to the email address you have entered in the Payment Gateway.

- b. Fill out all fields in the **Billing Information** and **Payment Information** portions, then **Review** the transaction information before paying. Click the **“Next”** button to proceed through the entire payment process. Once your payment is completed, you may close your tab with Cybersource where you processed your payment.

Billing Payment Review Receipt

Billing Information

* Required field

First Name *

Last Name *

Company Name

Address Line 1

City

Country/Region
United States of America

State/Province
New Mexico

Zip/Postal Code

Phone Number *

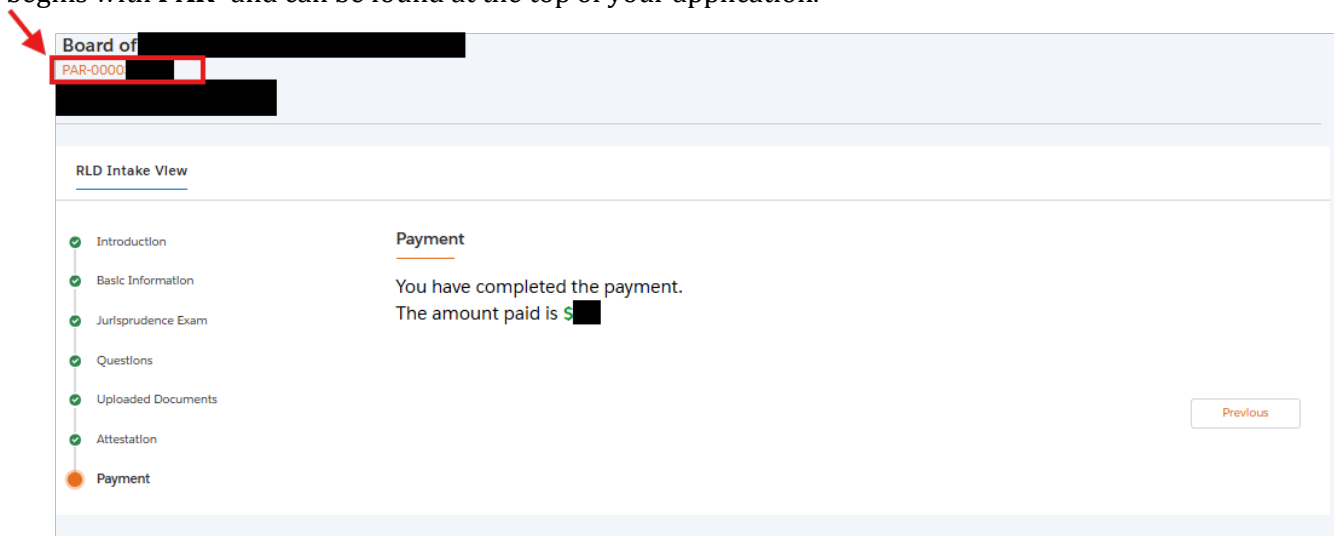
Email *

[Cancel Order](#) [Next](#)

Your Order

Total amount \$

10. Your application is now complete and will be submitted for approval. To check the status of your application, please contact your board or division directly. Please be sure to reference your application number, which begins with **PAR-** and can be found at the top of your application.



Board of [redacted]
PAR-0000 [redacted]

RLD Intake View

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Payment

You have completed the payment.
The amount paid is \$ [redacted]

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11. On the **Home Page**, the application will appear under **My Applications** with **Submitted** status.

Licenses & Applications

My Applications

Application ID	License Type	Application Type	Applied Date	Status	Action
PAR-0000 [redacted]	[redacted]	New	10/7/2025	Draft	
PAR-0000 [redacted]	[redacted]	New	7/29/2025	Draft	
PAR-0000 [redacted]	[redacted]	New	7/28/2025	Submitted	View Review Checklist

[View All](#)