



**COMMONWEALTH OF VIRGINIA**  
**Department of Criminal Justice Services**

P.O. Box 1300 • Richmond, VA 23218

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Status Hotline  
(804) 786-1132  
1-877-9STATUS

**Private Security Services – COMPLIANCE INSPECTION**

**Information**

DCJS ID Number:	Business Name:		
Audit Number:	DBA/Trade As Name:		
Mailing Address (Street/Apt.#):		City, State, Zip:	
Business Physical Address (if different than mailing address):		City, State, Zip:	
Business Phone: (    )		Fax: (    )	
Email Address:			

**PART I: General Provisions**

	Comp.	Non/Comp.	N/A
1. Maintain current business address with DCJS, 6 VAC 20-171-220.1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Notify DCJS of change in operating or fictitious names, 6 VAC 20-171-220.2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Report changes in ownership or principals to DCJS, 6 VAC 20-171-220.3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Report change in entity to DCJS, 6 VAC 20-171-220.4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Maintain current liability insurance, 6 VAC 20-171-220.5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. File Irrevocable consent for service, if applicable, 6 VAC 20-171-220.6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Employ a valid designated compliance agent, 6 VAC 20-171-220.7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Maintain required files (DOH, FP, I9, Reg., Tr., etc), 6 VAC 20-171-220.8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Notify DCJS of termination of compliance agent, 6 VAC 20-171-220.9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Timely submittal of replacement compliance agent, 6 VAC 20-171-220.10	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Display business license, 6 VAC 20-171-220.4011	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Fingerprints submitted as required by Code, 6 VAC 20-171-220.12	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Timely report guilty pleas, convictions, found guilty, 6 VAC 20-171-220.13	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Report firearm discharges, 6 VAC 20-171-220.4415	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Documentary evidence of terms of agreement, 6 VAC 20-171-220.4516	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Maintain written use of force policy if applicable, 6 VAC 20-171-220.21	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Maintain permitted intermediate weapons records, 6 VAC 20-171-220.22	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. Maintain detector canine handler team records, 6 VAC 20-171-220.23	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Employees properly reg. or certified, 6 VAC 20-171-230.4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Ensure contractors or subcontractors are licensed, 6 VAC 20-171-230.5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. License number on business advertising materials, 6 VAC 20-171-230.12	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. Only utilize vehicles with authorized flashing lights, 6 VAC 20-171-230.18	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Not use or display state seal of Virginia or DCJS seal, 6 VAC 20-171-230.19	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24. Uniforms worn in accordance with, 6VAC20-171-320.17	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## **Suggestions for Compliance Agent Files**

### **6 VAC 20-171-220 Business Administrative Requirements**

### **6 VAC 20-171-230 Business Standards of Conduct**

#### **BUSINESS FILE:**

Business Applications (Initial and Renewal)

Fingerprint information

Corporation information

Tax ID number

Insurance or Surety Bond

Compliance Agent Information (copies of applications, fingerprints and training certification)

*“Date of Hire” means the date any employee of a private security services business or training school provides services regulated or required to be regulated by the department (6 VAC 20-171-10).*

#### **EMPLOYEE FILE:**

Document date of hire

Copy of DCJS registration card or temporary letter

Copy of Firearms Endorsement application and card

Fingerprints VSP167 – if applicable Documentation of U.S. citizenship or legal resident alien status (copy of fingerprint processing application can show this)

Training Completion Forms Firearms training

Concealed weapons permit

Termination date Memoranda

Additional DCJS forms; extension requests; additional category application; address change.

#### **THINGS TO CONSIDER:**

Checklist for files and new employees Method to determine expiration dates Communications between employees and compliance agents

*If you have questions, concerns or need guidance, contact DCJS for technical assistance:*

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