

ALASKA DEPARTMENT OF PUBLIC SAFETY  
APPLICATION FOR LICENSE AS A CIVILIAN PROCESS SERVER

THIS APPLICATION MUST BE TYPED OR PRINTED IN BLACK INK

Attach a check or money order for \$25.00 payable to the State of Alaska

Attach a check or money order to fingerprint cards for \$47.00 payable to Dept. of Public Safety

For office use only:

State business license number \_\_\_\_\_ \$25.00 fee Receipt date \_\_\_\_\_ # \_\_\_\_\_

Municipal business license number \_\_\_\_\_ \$47.00 fee Receipt date \_\_\_\_\_ # \_\_\_\_\_

1. Name of person making application \_\_\_\_\_  
First Name Middle Name Last Name
2. Residence address \_\_\_\_\_  
Number, Street City Zip Code
3. Residence telephone number and/or cell phone number \_\_\_\_\_
4. Mailing address \_\_\_\_\_  
Number, Street, or Post Office Box City Zip Code
5. Name of business/agency you will be working for \_\_\_\_\_
6. Business location \_\_\_\_\_ 7. Business Telephone \_\_\_\_\_  
Fax Number \_\_\_\_\_
8. Business mail address \_\_\_\_\_  
Number, Street, or Post Office Box City Zip Code
9. Business e-mail address \_\_\_\_\_
10. Sex  M  F 11. Height ft \_\_\_ in \_\_\_ 12. Weight \_\_\_\_\_ 13. Hair color \_\_\_\_\_ 14. Eye color \_\_\_\_\_
15. Date of birth \_\_\_\_\_ 16. Social Security number \_\_\_\_\_
17. Alaska drivers license number/Identification card number \_\_\_\_\_
18. Are you a citizen of the United States of America?  Yes  No If no, Alien number on Resident Alien Card issued by U.S. Department of Justice Immigration and Naturalization Service  
Number \_\_\_\_\_ Expiration Date \_\_\_\_\_
19. Have you been convicted of a felony, a misdemeanor crime involving abuse or assault by a court of this state, the United States, another state or territory, or the military?  Yes  No.
20. Have you been convicted of a misdemeanor crime involving dishonesty or fraud as defined in AS 11.46 and AS 11.56 during the 10 years immediately preceding the date of this application, by a court of this state, the United States, another state or territory, or the military?  Yes  No  
If yes, explain charges, places, dates, and sentences imposed on a separate sheet of paper and attach to this application.
20. Have you ever been denied issuance of an Alaska Civilian Process Server license or have you ever had a license suspended or revoked?  Yes  No  
If yes, explain charges, places, dates, and decision on a separate sheet of paper and attach to this application.

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21. Have you resided in the State for at least 30 days immediately preceding the date of this application?  Yes  No

22. **\*\*EMPLOYMENT HISTORY:** List all employment for the five years immediately preceding the date of this application. Start with your present or most recent job and work back. Include full- and part-time work. Attach a separate sheet of paper if necessary.

Dates of Employment	Employer	Address
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

23. **REFERENCES:** List the names, addresses, and telephone numbers of at least three persons, at least one of whom is a resident of Alaska (not related to you) who can attest to your good character.

Name	Address	Phone Number
_____	_____	_____
_____	_____	_____
_____	_____	_____

24. List below the names and addresses of all business affiliations of you or your spouse including, but not limited to, ownership rights, stock rights, dividend rights, or other holdings of a financial nature. Attach a separate sheet of paper if necessary.

Name	Address
_____	_____
_____	_____
_____	_____

**CERTIFICATION:** I swear or affirm that the information I have entered on this application is true to the best of my knowledge. I understand that if I deliberately conceal or enter false information in this form my application may be rejected. I further understand such conduct may be punishable as a crime under Alaska Statute.

I understand that a permit eligibility investigation will be conducted as part of the application process which may involve computerized records searches, as well as the submission of my fingerprints for comparison against both State of Alaska and FBI criminal records files. I authorize this investigation.

I agree that the Department of Public Safety, or its agents, may contact former employers or other persons who know me in order to obtain additional information about my qualifications.

I am free from any mental or emotional disorder that may adversely affect my performance as a process server.

I have read and understand 13AAC 67.010--13AAC 67.990.

\_\_\_\_\_  
Signature of Applicant

Subscribed and sworn to or affirmed before me at \_\_\_\_\_, Alaska, \_\_\_\_\_  
(city) (date)

(SEAL)

\_\_\_\_\_  
(Clerk of Court, Notary Public or other person authorized to administer oaths)

My commission expires: \_\_\_\_\_