

New York State Division of Criminal Justice Services  
**SECURITY GUARD PROGRAM – ARMORED CAR GUARD TRAINING WAIVER APPLICATION**  
(General Business Law §89-sss)

---

THIS FORM IS USED TO APPLY FOR A WAIVER OF REQUIRED INITIAL FIREARMS TRAINING FOR ARMORED CAR GUARDS. FORMS PRESENTED FOR FILING MUST CONTAIN ORIGINAL SIGNATURES. ALTHOUGH THE BLANK FORM MAY BE DUPLICATED, PHOTOCOPIES OF COMPLETED FORMS, OR FORMS WITH PHOTOCOPIED SIGNATURES WILL NOT BE ACCEPTED. OMISSIONS OR LACK OF INFORMATION WILL **STOP** THE APPROVAL PROCESS.

---

Pursuant to General Business Law §89-sss(4) and (5), the Division of Criminal Justice Services (DCJS) shall waive the training requirements specified with respect to applicants employed by armored car carriers, if the applicant provides appropriate documentation to demonstrate that he or she was or is subject to training requirements which meet or exceed the requirements established pursuant to General Business Law §89-sss(1).

Applicants for an Armored Car Guard Training Waiver must possess a **valid pistol license** pursuant to New York State Penal Law (PL) §400.00, or be exempted from such license pursuant to PL §265.20.

**Armed Security Guards** who have completed an approved 47 Hour Firearms Training Course for Armed Security Guards may apply for this waiver.

Upon filing this form, **Peace Officers** who have been employed for eighteen months or more and who possess a valid certificate of completion which includes an initial course in firearms and deadly physical force training approved by the Municipal Police Training Council (MPTC) as part of their basic training, and **Police Officers** as defined in Criminal Procedure Law section 1.20(34) shall be **exempt** from the requirements of General Business Law §89-sss(1).

#### **SECTION I: APPLICANT INFORMATION**

This section must be completed by the applicant. Only individuals who have completed training listed in Section III of this form may apply for a waiver.

Type or print legibly, the applicant's last name, first name, middle initial, date of birth, Social Security Number, sex, telephone number, address information, and pistol license information. Enter the complete home mailing address, home street address if different, and county of home residence. If the applicant is temporarily living away from home (e.g. enrolled at a college or university, on military assignment, etc.) **DO NOT** list the temporary address. Incomplete submissions will not be processed.

#### **SECTION II - EMPLOYMENT EXPERIENCE**

Check the appropriate box(es) and enter the number of years and months worked for any categories being claimed as work experience. **The applicant is required to submit an original letter from the employer verifying employment dates and experience** (sample letter attached). Verification of law enforcement employment will be confirmed through the Police/Peace Officer Registry within the Division of Criminal Justice Services.

If it has been more than 1 year since the completion of initial firearms training, former police or peace officers must submit proof of successful completion of annual firearms training course (completed within twelve months of date of application) which meets or exceeds the standards established by the MPTC or successful completion of the 8 Hour Annual In-Service Training Course for Armed Security Guards.

#### **SECTION III – ARMED SECURITY GUARD FIREARMS TRAINING COURSE**

This section is for armed security guard applicants who have completed the 47 Hour Firearms Training Course for Armed Security Guards. Police and peace officer applicants may proceed to section IV.

Enter the dates of firearms training as well as the entity that conducted the training. Enclose a copy of your 47 Hour Firearms Training Course for Armed Security Guards certificate. Training will be confirmed through DCJS training records.

If it has been more than 1 year since the completion of the 47 Hour Firearms Training Course for Armed Security Guards, proof of successful completion of the Eight Hour Annual Firearms Training Course for Armed Security Guards (completed within twelve months of date of application) must be submitted with the waiver application.

New York State Division of Criminal Justice Services  
**SECURITY GUARD PROGRAM – ARMORED CAR GUARD TRAINING WAIVER APPLICATION**  
(General Business Law §89-sss)

**SECTION IV – ATTESTATION**

This is an attestation to the accuracy of information supplied on the application. **This must be signed and sworn to by the applicant before a notary public.** Failure to complete this section will **STOP** the training waiver process.

**MAIL APPLICATION TO:**

Where applicable, include the following:

- Original letter from employer verifying employment experience and employment dates (see sample letter).
- Course completion certificate or documentation verifying satisfactory completion with dates of course(s) (armed guard applicants).
- Photocopy of valid NYS pistol permit (pursuant to NYS Penal Law §400.00) or peace officer identification card (if applicable).
- Other than this application, **do not submit original documentation** unless specifically requested to do so. Submitted documents will not be returned.

**NYS Division of Criminal Justice Services  
Office of Public Safety - Security Guard Program  
80 South Swan Street  
Albany, NY 12210**

**QUESTIONS**

If you have any questions regarding this form, call (518) 457-2667 for assistance.

New York State Division of Criminal Justice Services  
**SECURITY GUARD PROGRAM – ARMORED CAR GUARD TRAINING WAIVER APPLICATION**  
(General Business Law §89-sss)

Sample employment verification letter, to be submitted **on agency/company letterhead**.

Date

NYS Division of Criminal Justice Services  
Office of Public Safety - Security Guard Program  
80 South Swan Street, Albany, NY 12210

**(Applicant Name)** has been continuously employed as **(position)** with the **(department/agency name)** from **(start date)** to **(end date)**. They **(are/are not)** authorized to carry a firearm in the performance of their official duties and has been since **(date armed)**.

Our records indicate **(he/she)** has completed annual training in firearms as of **(date of completion)**.

Sincerely,

Agency/Company CEO  
Title

New York State Division of Criminal Justice Services  
**SECURITY GUARD PROGRAM – ARMORED CAR GUARD TRAINING WAIVER APPLICATION**



(General Business Law §89-sss)

**SECTION I – APPLICANT INFORMATION**

Last Name	First Name	MI	Date of Birth	Social Security Number*
Home Residence Mailing Address		City, State, Postal Code		
Home Residence Mailing Address (if Different)	City, State, Postal Code		Apt./Suite#	County of Home Residence
Home Telephone Number (Area Code First)	Alternate Telephone Number (Area Code First)		Cellular Telephone Number (Area Code First)	

\*Pursuant to the New York State Personal Privacy Protection Law, DCJS is authorized to collect personal identifying information as part of a public safety agency record. Personal identifying information on this form shall not be revealed, released, transferred, disseminated or otherwise communicated orally, in writing, or by electronic means other than to the registrant. Disclosure of personal identifying information is voluntary. Refusal to provide personal identifying information shall not result in the denial of any right, benefit, or privilege.

**SECTION II – EMPLOYMENT EXPERIENCE**

<input type="checkbox"/> Security Guard	Years/mos	<input type="checkbox"/> Peace Officer (trained and authorized to carry a firearm in the line of duty)	Years/mos	<input type="checkbox"/> Police Officer	Years/mos
<b>An original copy of the letter from the employer verifying dates and type of employment must be included.</b>					

**SECTION III – ARMED SECURITY GUARD FIREARMS TRAINING COURSE** (armed security guard applicants only)

47 Hour Firearms Training Course for Armed Security Guards	From(mm/dd/yyyy)	To (mm/dd/yyyy)	Conducted by:
<b>A copy of the firearms training course completion certificate must accompany the application.</b>			

**ATTENTION ALL APPLICANTS**

**If it has been more than one year since completion of an initial firearms training course, include documentation of completion of an Annual Firearms Training Course or 8 Hour Annual In-service Training Course for Armed Security Guards.**

**A copy of a valid pistol permit issued in New York State or police or peace officer (as defined in NYS CPL) identification must accompany the application.**

**SECTION IV – ATTESTATION**

**Applicant Attestation:** This affidavit must be signed and sworn to by the Applicant before a Notary Public. I hereby attest that the information provided in this application is true to the best of my knowledge and belief. I understand that any omission or inaccuracy may be deemed sufficient reason to deny approval. I understand that the Division of Criminal Justice Services may ask for additional information/documentation.

Notary Stamp

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

**FOR DCJS USE ONLY**

**FOR DCJS USE ONLY**

Reviewed By:

Date:

Sworn and subscribed before me  
 this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_

\_\_\_\_\_  
Notary Signature