

**LOUISIANA STATE BOARD OF
PRIVATE INVESTIGATOR EXAMINERS**
2051 SILVERSIDE DRIVE, SUITE 190
BATON ROUGE, LOUISIANA 70808
TELEPHONE (225) 763-3556

DATE: _____

Re: INVESTIGATOR NAMED BELOW

LICENSE# _____

NOTICE OF CHANGE: INVESTIGATOR RE-HIRED
Please print.

As of _____, 20__, Investigator _____
has been re-hired and is now employed with _____,
a duly licensed Louisiana State Private Investigative Agency.

I understand a new License (certificate) and Registration Card will be issued our agency. Upon receipt of the new License and Registration Card, I acknowledge that under penalty of Law, _____ Private Investigator, is to immediately surrender the invalid License/Certificate and the Registration Card.

Signed by: _____ Private Investigator: _____
(Agency owner/manager) (Signature)

Agency Holder's License #: _____

Agency Name: _____

The employer of a Private Investigator shall submit this form and the transfer fee within 72 hours of employment. Failure to comply may result in assessment of a fine.