



Wage & Hour Bureau
1101 Mail Service Center
Raleigh, NC 27699-1101
(800)625-2267

Application For License

A. Business Entity Information:

1. Proposed Business Name:	2. Telephone and Fax Number:	3. Email Address:
4. Physical Location of Business: (Street, City, Zip Code)		
5. Mailing Address of Business: (If different from above)		
6. Type of Service: <input type="checkbox"/> Private Personnel Service (General or Domestic) <input type="checkbox"/> Job Listing Service		
7. Type of Ownership: <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation		
For partnerships or corporations, list the names, addresses and percentage of ownership of shareholders with 10% or more financial interest.		
Name	Address	%
8. Names and addresses of corporate officers		
Title	Name	Address
President		
Vice President		
Secretary		
Treasurer		
Directors		
Directors		
9. Name and address of person responsible for direction and operation of placement activities (i.e. manager)		
10. Has the above listed individual been employed by a job listing or private personnel service in the past? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, list the following information: Company/agency name and address, supervisor, and dates of employment.		
11. Will the service be affiliated in any way with a finance company or lending institution? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, list the institution name and address.		
12 Will the service operate under a franchise agreement? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, include the name and address of the franchisor.		

B. Licensee Information:

13. Full Name:		14. Social Security Number:		15. Date:	
16. Current Mailing Address:					
17. Previous Mailing Address : (If at current address less than 5 years)					
18. Birthdate: (MM/DD/YY)			19. Place of Birth: (City/County/State)		
20. Home Telephone:		Business Telephone:		Other Telephone/Fax:	
21. Name of Spouse:					
22. Each Name Used Since 18th Birthday:					
1. Business/Personal References (Not relative, employed by you or co-applicant)					
Name		Address		Telephone	Years Known
24. Have you ever applied for a license to operate a job listing service, private personnel service or employment agency in North Carolina or elsewhere? (Specify if other than North Carolina) <input type="checkbox"/> Yes <input type="checkbox"/> No					
25. If yes, was the application: <input type="checkbox"/> Withdrawn <input type="checkbox"/> Granted <input type="checkbox"/> Denied Name of governmental body that acted upon the application:					
26. Have you ever had the license to operate a job listing service, private personnel service or employment agency revoked, suspended, refused, or any disciplinary action taken by a government agency? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, state reason and government agency taking the action listed.					
27. Has a court or government agency ever determined that you operated a business in a deceptive, unfair, or fraudulent manner: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, describe the circumstances:					
28. Have you ever been convicted of a crime (other than misdemeanor traffic or parking offense)? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, nature of crime, date and location of conviction.					
29. Do you have additional business interests? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, list the name of business, location and type interest.					
30. Name and address of a newspaper of general circulation where your reside and the business will be operated (if different):					
31. Required Attachments: <div style="display: flex; justify-content: space-between; padding: 0 10px;"> <div> <ul style="list-style-type: none"> - Surety Bond - Copy of fee schedule/refund policy - Articles of Incorporation (North Carolina) - Copy of Assumed Name business filing </div> <div> <ul style="list-style-type: none"> - Complete employment history for 5 years preceding application - Partnership Agreement, if appropriate - Board of Directors authorization for appropriate officer to sign documents on behalf of corporation </div> <div> <ul style="list-style-type: none"> - Copies of draft contracts and forms used with applicants </div> </div>					



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APPLICATION FOR LICENSE
Release of Information Authorization

In order to determine any suitability for a license to operate a private personnel service or job listing service, the Wage and Hour Bureau of the Department of Labor, State of North Carolina, is conducting a personal background investigation.

I, _____, do hereby authorize any law enforcement agency, military organization, insurance company, governmental agency, bank and credit agency, former and present employer, business, and individual to furnish to the State of North Carolina, Department of Labor, any or all available information regarding me, I hereby release them from any civil or criminal liability whatsoever for issuing same. Furthermore, I affirm that all information in the attached application is true and complete to the best of my knowledge.

Signed: _____

Title: _____

Sworn to and subscribed before me this the _____ day of _____, 200____.

Notary Public

My commission expires: _____