

KANSAS CITY MISSOURI POLICE DEPARTMENT  
PRIVATE OFFICERS LICENSING UNIT  
635 WOODLAND, SUITE 2104  
KANSAS CITY, MISSOURI 64106

**ACKNOWLEDGEMENT**

I, \_\_\_\_\_, understand that I am being licensed as a proprietary private investigator by the Board of Police Commissioners of Kansas City, Missouri on the condition and with the understanding that I may only be licensed as an employee of \_\_\_\_\_, a proprietary company.

I understand that I am exempt from the licensing requirements of Section 324.1100 et seq. of the Revised Statutes of Missouri based on Section 324.1106 which states that a person employed exclusively and regularly by one employer in connection only with the affairs of such employer and where there exists an employer-employee relationship is deemed to be exempt by state licensing.

By signing this form, I acknowledge that I will not perform any work for any other entity or individual unless I obtain a license from the State of Missouri. As a proprietary private investigator licensed by the Board of Police Commissioners of Kansas City, Missouri, I acknowledge that I am an employee of the listed company and understand that I am licensed only for the proprietary company named on the Form 5409 P.D. license card.

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Signature of Licensee

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Printed name

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Date