



WORKSHEET FOR CHANGE OF LOCATION
SECURITY ALARM SYSTEM CONTRACTOR (BRANCH)
SECURITY GUARD AGENCY (BRANCH)

AUTHORITY: 1968 PA 330

Use this worksheet to update the address of the agency and/or branch license 10 days before the change becomes effective per MCL 338.1063(1). Failure to notify the department of a change in location may result in license suspension per MCL 338.1063(2).

Company Name			License Number		
Previous Company Address				Telephone Number	
City	Zip Code	County	E-mail Address		
New Company Address				Telephone Number, if different than above	
City	Zip Code	County	E-mail Address, if different than above		
APPROVAL OF COUNTY SHERIFF OR CHIEF OF POLICE WHERE NEW OFFICE IS LOCATED - Required per MCL 338.1057(3)					
Print Name			Title (Sheriff or Chief of Police)		
Signature			Date		
City			County		
APPROVAL OF COUNTY PROSECUTING ATTORNEY WHERE NEW OFFICE IS LOCATED - Required per MCL 338.1057(3)					
Print Name			Title		
Signature			Date		
City			County		
Certification: I certify that the statements in this document are true and complete. I understand that any omitted statement, misrepresentation, or fraud may be cause for denial of my application, disciplinary action, or may be punishable by law.					
_____ Signature/Print Name			_____ Date		
FOR OFFICE USE ONLY					
License Number		Approved By		Date Approved	