



NORTH CAROLINA ALARM SYSTEMS LICENSING BOARD

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PERSONAL REFERENCE QUESTIONNAIRE

TO APPLICANT: *Print your name, the date and phone number below and have each of your character references complete the personal reference questionnaire. This form will be uploaded during your application process. Keep the original with your application confirmation page as it may be requested for review by your assigned investigator.*

Name: _____ Date: _____ License Type: _____ Ph: _____

*****YOUR APPLICATION WILL NOT BE PRESENTED TO THE BOARD UNTIL ALL REFERENCES HAVE BEEN RECEIVED*****

REFERENCE: This questionnaire is to be completed by the reference only, signature notarized and returned to Applicant.

How long have you known the applicant? _____

Do you know him/her personally or professionally? _____

Have you ever known the applicant to have alcohol or drug problems? _____

What kind of person do you think he/she is and how would you summarize his/her moral character? _____

Have you ever observed or had knowledge of the applicant doing anything you felt was illegal or questionable?

Is there anything else about the applicant that has not been asked that you feel we need to know about him/her before we grant the applicant a license? _____

Would you recommend the applicant for the license that he/she has requested? _____

Reference Name: _____

Date: _____

Signature: _____

Address: City/State/Zip _____

Telephone: _____

THE ABOVE WAS SWORN AND SUBSCRIBED BEFORE ME THIS

The _____ Day of _____, 20_____

Notary Public

My Commission Expires: _____

(SEAL)