

State of Rhode Island Department of Business Regulation Division of Commercial Licensing Certified Constables Section 1511 Pontiac Ave, Bldg. 69-1 Cranston, RI 02920

INSTRUCTIONS FOR CERTIFIED CONSTABLE APPLICANTS

All applicants must be at least twenty-one (21) years of age, per RI Gen. Laws § 9-5-10.1

The following documents must be submitted for consideration:

- A completed <u>Certified Constable Application</u>
- Resume
- A <u>Criminal History Record</u> (CHR) from the Rhode Island Department of the Attorney General located at 4 Howard Avenue, Cranston, RI 02920. Hours of operation are 8:30 am to 4:30 pm. For further questions about this process, you may contact the DAG at (401) 274-4400.
- <u>Letters from two (2) licensed attorneys</u> certifying that you are a proper candidate for certification as a constable; **AND** they intend to utilize you to serve process in the state.
- A <u>Letter from a Training Constable</u>, who is in good standing for a minimum of ten (10) years and is approved by the Chief Judge of the District Court to train perspective constables.

Once the above documentation has been received, the following will occur:

- 1. The Department will refer the application to the Certified Constables' Board for approval or denial;
- 2. The Board will determine whether the applicant should be recommended for training by a board approved constable. Training consists of a minimum of ninety (90) hours that must be completed within ninety (90) days from the date of the board referral;
- 3. The Training Constable must submit a training log, found on the Department's website, to the board that reflects the dates and times of training and comments on the aptitude of the trainee, within thirty (30) days from the conclusion of training.
- 4. An appointment will then be scheduled for you to appear before the Board to complete an oral and written examination. Based on the exam results, the Board will forward their approval or denial recommendation to the Department.
- 5. Once the Department has made its final review and approval, a swearing in date will be scheduled. At such time, you will be required to provide the following:
 - Two (2) front view, full face color photos (Passport style).
 - A Bond issued to the State of Rhode Island, in the amount of \$10,000, signed and witnessed prior to submission to the Department.
 - A check or money order in the amount of \$400.00, made payable to the "RI General Treasurer".

Should you have any questions regarding this process, you may contact: Lee-Ann Desilets by email at leeann.desilets@dbr.ri.gov or at (401) 462-9544. Kimberly Precious by email at kimberly.precious@dbr.ri.gov or at (401) 462-9650.

Tel: 401-462-9650 TDD: 711 Web Site: <u>www.dbr.ri.gov</u>



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CERTIFIED CONSTABLE APPLICATION

APPLICANT INFORMATION			
Name:			Date of Birth:
SSN:	Curre	Current Occupation:	
Residential Address:			
City:	State:		Zip Code:
Mailing Address: (if different from residence)			
City:	State:		Zip Code:
Phone Number:	Email Address: (Mandatory)		
Is it acceptable for the DBR to make available to the public the phone number and email listed above? Yes No			
AFFIDAVIT & SIGNATURE			
Pursuant to R.I. Gen. Laws, Chapter 5-79, as amended, any person applying for or renewing any license, permit, or other authority to conduct a business or occupation within Rhode Island must have filed all required state tax returns and paid all taxes due to the state, or must have entered into a written agreement to pay delinquent state taxes that is satisfactory to the Tax Administrator. Have you filed all required Rhode Island State tax returns, and have you paid all taxes owed? No Affidavit of Application I swear, under penalty of perjury that the information provided in connection with this application is true to the best of my knowledge, with the understanding that any omissions, inaccuracies or failure to make full disclosures may be deemed sufficient reason to deny licensure by the Rhode Island Department of Business Regulation. Signature of Applicant Date of Signature (MM/DD/YY)			
Signature of Applicant Date of Signature (MM/DD/11)			
OFFICE USE ONLY			
Date application received:			Bond:
Resume:	Photos:		
CHR:			
Letters from Licensed Attorneys:			
Letter from Training Constable:			

Rev. 3/21/19 Tel: 401-462-9544 TTY: 711 Web Site: www.dbr.ri.gov