No Staples Please
Paper Clips Only

2027 / 2028
Company License Application
Alabama Electronic Security Board of Licensure

7956 Vaughn Rd., PMB 392 Montgomery, Alabama 36116
phone # 334-557-0983~ fax # 334-557-0978~ e-mail administrative@aesbl.alabama.gov
~website www.aesbl.alabama.gov~

Company Name:_____AESBL #:_____

Company Physical Address:_____
(Please advise AESBL if there is a privacy issue with publishing this address.)
City/State/Zip Code:_____

What Alabama county is your company physically located in? _____

Company Mailing Address:_____

City/State/Zip Code:_____

Company Phone #:_____Company Fax #:_____

Company Contact Person:_____ Direct Phone Number:_____

Company E-mail Address:_____

SEE 2027/2028 AESBL LICENSING FEE SCHEDULE (Page# 11)

___ First Time Admin Fee or Name Change Fee $150.00
PLUS
___ Company (Incorporated, LLC, or LP) . . . . . License Fee $400.00
OR
___ Company (Sole Proprietorship/non-incorporated partnership) . . License Fee $300.00
OR
___ Company Branch Office Annual Fee (No Administrative Fee Required) $400.00

If you did not obtain a license in 2025/2026 please enter the date (month, day, year) that the company was started_____

Provide AESBL a copy of the company's most recent business license issued by an Alabama city or county.

Have you ever had any business license revoked? ___yes ___no **(If yes, explain why and attach to application.)**

Company Type: Burglar Alarm __, Monitoring __, CCTV __, Access Control __, Electronic **L**ocksmith __
Check all that apply.

Following items must be enclosed for application to be considered complete:

_____ Certificate of Insurance? **(This must show expiration dates.)**
_____ Copy of Alabama business license?
_____ Check or Money Order in Proper Amount Made Out to AESBL?
_____ Employees' Applications, Copies of current Training Certificates or CEU's, current Pictures and Fees?
_____ ALEA Criminal History Information Release Forms, FBI fingerprint cards, and processing fees?

Qualifying Agent's Name (Print)_____
I certify the information provided on this application and enclosed materials are true and correct to the best of my knowledge.

Date_____Authorized Official's Signature_____
Authorized Official's Social Security Number _____
(Required by Code of Alabama 1975 Section 30-3-194 (a))