

Application for Business License - Private Investigators and/or Private Guards		Business no.
		Receipt no.
		License no.
Instructions: HAND PRINT in Black or Blue Ink or TYPE ONLY		
PART 1 To be completed by applicant		
Legal name of business (name must be approved before license issued)		Business operating name
Physical address of business in Nova Scotia (number and street or lot, city/town/village, R.R., postal code)	Mailing Address (if different from physical address)	If the business is operating branch offices in other parts of the Province, provide an address for each location and the name of the branch manager.
Business phone no.	Business fax no.	E-mail address
Application to supply: <input type="checkbox"/> Private Investigators <input type="checkbox"/> Guard Dogs For Hire <input type="checkbox"/> Private Guards <input type="checkbox"/> Armoured Vehicle Service (armed guards) <input type="checkbox"/> Private Investigators <u>and</u> Private Guards		
Endorsements		
Armoured Vehicle Service endorsement : 1. (a) Have you applied for your Firearms Business License <input type="checkbox"/> yes <input type="checkbox"/> no (b) Attach coloured photographs or written description of an example of each type of armoured vehicle and the armed private guard uniform to be used.		Guard Dog For Hire endorsement 2. Attach a completed Form 5 - Application for License - Guard Dog for Hire for each dog to be used.
Firearms Business License no. and expiry date		
3. Is this an office building or similar business premises? <input type="checkbox"/> yes <input type="checkbox"/> no 4. Is this a private residence? <input type="checkbox"/> yes <input type="checkbox"/> no If so, (a) is office set apart from dwelling? <input type="checkbox"/> yes <input type="checkbox"/> no (b) is office readily accessible to the general public by means of a separate entrance? <input type="checkbox"/> yes <input type="checkbox"/> no (if no, give details) 5. List proposed business activities:		
6. Has the business ever been registered or licensed to engage in the business of providing security under any name other than the name in which this application is submitted? If yes, give details. <input type="checkbox"/> yes <input type="checkbox"/> no		
7. Have you ever had a security industry license refused, revoked or suspended in any province, state or country? If yes, give details. <input type="checkbox"/> yes <input type="checkbox"/> no		
8. Are you currently, or have you previously been licensed in the security industry in any province, state or country? If yes, give details. <input type="checkbox"/> yes <input type="checkbox"/> no		
9. Has the business even been charged, indicted or convicted of any offence under any law of any province, state or country? If yes, give details. <input type="checkbox"/> yes <input type="checkbox"/> no		

10. Type of ownership (check one):

- sole proprietorship** (complete Part 2 and Affidavit)
- partnership** (each partner must separately complete Part 2 and Affidavit)
- corporation** (each director and officer must separately complete Part 2 and Affidavit)

11. Name(s) of partners, corporate officers (include applicable titles):

Name: _____ Title: _____
 Name: _____ Title: _____
 Name: _____ Title: _____

PART 2

To be completed by an applicant who is a sole proprietor (individual), a partnership (each partner to complete a separate Part 2 and affidavit), or a corporation (each director and officer to complete a separate Part 2 and affidavit).

14. Last or family name of applicant First name(s) Second name(s) Former name, maiden name, aliases, etc.

15. Street no. and street name or lot Apt. no.

16. City, town, village, R.R. Postal code Residence phone no. Business phone no.

17. Occupation/Profession E-mail address Business fax no.

18. Do you presently hold a position with Peace Officer status in Nova Scotia or any other province, state or country? yes no
 If yes, give details. Note: restrictions for employment may apply.

THE FOLLOWING INFORMATION IS REQUIRED FOR A POLICE RECORDS BACKGROUND CHECK

19. Male Date of birth (y/m/d) Place of birth Distinguishing marks Height Weight Eye colour Hair colour
 Female

20. Driver's license no. Province/State of issue Or government issued photo identification and type

21. If you were born outside of Canada, in what year were you admitted to Canada?

22. List place of residence for past 5 years. **Exclude present address. (If space insufficient, complete on separate sheet and attach.)** (Street no. and name or lot, apt. no., city, town, village, R.R., postal code) From (m/y) To (m/y)

23. Current and previous record of employment for the past 5 years.	Employer's Name/Address/Phone number	Type of Work	Period Employed		Reason for Leaving
			From (m/y)	To (m/y)	

24. Summary of experience and training in investigation and/or security. Give details. (If space insufficient, complete on separate sheet and attach.)

25. (a) Have you been convicted of an offence under any federal, provincial or territorial statutes for which you have not received a pardon?
(Example: Criminal Code of Canada, Controlled Drugs and Substances Act, Liquor Control Act, Youth Criminal Justice Act) yes no
- (b) Are you currently under a probation or parole order or conditional sentence? yes no
- (c) Have you pled guilty or been found guilty of any offence for which you have been absolutely discharged or conditionally discharged? yes no
- (d) Have you been charged with any offence which is still pending? yes no
- (e) Do you have any outstanding fines in default? yes no
- (f) Have you been charged with any Criminal Code offence in the past 3 years? yes no

An answer of "yes" may require further information but does not necessarily affect the granting of a license.
If you answered "yes" to any of the above, GIVE ALL details. (If space insufficient, complete on separate sheet and attach.)

Offence	Date	Place	Police Department	Outcome of Proceedings

Declaration and Authority for Release of Information

By signing this application:

- I consent to a police records and background check.
- I consent to the disclosure of the results of a police records and background check, and authorize any police service that is requested to perform such a check to disclose any or all information obtained by the police records and background check, to the appropriate authority or any person authorized by them.
- I consent to the sharing of this information in other provinces, states or countries for uses consistent with this application.
- I agree that if a license is granted pursuant to this application, this authorization and consent by me remains in force for the duration of the period for which the license is issued.
- I will promptly report to the Department of Justice, Policing and Victim Services Division-Security Programs any charge or conviction for a provincial and/or federal offence that occurs after the date I sign this authorization

I certify that

- I have read and understand all parts of this application form, and
- the information provided by me in this application is true and correct to the best of my knowledge and belief.

I further acknowledge that

- Section 4 of the *Private Investigators and Private Guards Act* states that no person shall act as a private investigator or private guard, unless the person holds a valid license issued under this Act.

Caution

It is an offence to knowingly furnish false information in any application under the Act. In addition, the license may be refused.

Signature of applicant

Date of signature

Print name

The following supporting documents must be submitted with this application:

- applicable licensing fee
- documentation confirming applicant can obtain necessary liability insurance (once application approved, certificate of liability insurance must be submitted before license issued)
- certificate of registration under the *Partnerships and Business Names Registration Act* or certificate of incorporation under the *Companies Act*
- coloured photographs or written description of an example of each type of vehicle (include side and rear of vehicle) to be used for security patrol by the private guard business for approval (for providing private guard services)
- coloured photographs or written description of the uniform (include front, side and back of uniform) to be used by the private guard business for approval (for providing private guard services)
- coloured photographs or written description of an example of each type of armoured vehicle (include side and rear of vehicle) to be used by the armoured vehicle service for approval (for armoured vehicle services endorsements)
- coloured photographs or written description of the uniform (include front, side and back of uniform) to be used by the armoured vehicle service for approval (for armoured vehicle service endorsement)
- completed Form 5 - Application for License - Guard Dog for Hire for each dog to be used (for guard dog for hire endorsement)

Any questions relating to this application may be directed to:

Department of Justice
Policing & Victim Services Division-Security Programs
P.O. Box 7
Halifax, Nova Scotia B3J 2L6
Telephone: (902) 424-6166
Fax: (902) 424-4308

AFFIDAVIT

Province of Nova Scotia

I, _____ of _____,
name place
in the County of _____, Province of _____,
county province

MAKE OATH AND SAY:

1. I am _____ of the applicant
state position: sole proprietor, partner or director or officer of corporation

for a license to engage in the business of providing private investigators and/or private guards.

2. To the best of my knowledge and belief, the information given in the application is true.

Sworn or affirmed before me at _____)
in the County of _____)
Province of _____)
on _____, 20____)
_____)
_____)
_____)

A Barrister of the Supreme Court of Nova Scotia,
Commissioner of Oaths in and for the Province
of Nova Scotia, Notary Public in and for the Province
of Nova Scotia

Signature of applicant

