Application for Business License RENEWAL - Private Investigators and/or Private Guards

Business no.
Receipt no.
License no.

Instructions: HAND PRINT in Black or Blue Ink or TYPE ONLY. SHADED AREAS FOR OFFICE USE ONLY.

Legal name of business		Business operating name
Physical address of business in Nova Scotia (number and street, city, town, village, 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:
(check all that apply)

- ☐ Private Investigators
- ☐ Private Guards
- ☐ Private Investigators and Private Guards
- ☐ Guard Dogs For Hire
- ☐ Armoured Vehicle Service (armed guards)

Endorsements

Armoured Vehicle Service endorsement

1. Provide Firearms Business License no. and expiry date

Guard Dog For Hire endorsement

2 Attach a completed Form 5 - Application for License - Guard Dog for Hire for each dog to be used.

3. Has there been a change in ownership of business? ☐ yes ☐ no If yes, please contact the Security Programs Office)

4. Has there been a change in the markings on the business' vehicle(s)? ☐ yes ☐ no (If yes, attach a coloured photograph or written description of the changes to the vehicle(s) for approval)

5. Has there been a change in the business' uniforms? ☐ yes ☐ no (If yes, attach a coloured photograph or written description of the changes to the uniform for approval)

6. If this business is a partnership or corporation, have there been any changes in partners, directors or officers? ☐ yes ☐ no
If yes, please have each of those individuals complete and sign Part 2 and the Affidavit of Form 1 - Application for Business License - Private Investigators and/or Private Guards, and submit along with this completed application.

7. Has any partner, director or officer obtained a position with Peace Officer status in Nova Scotia or any other province, state or country? ❑ Yes ❑ No If yes, contact the Security Programs Office

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 shall remain in force for the duration of the period for which the license is issued.
- I will promptly report to the Department of Justice, Public Safety and Security Division, Security Programs, any charge or conviction for a provincial or federal offence that occurs after the date that I sign this authorization, and

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 is the holder of a license therefor 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 list of supporting documents must be submitted with this application:

- ☐ applicable licensing fee
- ☐ certificate of liability insurance
- ☐ certificate of registration under the *Partnerships and Business Names Registration Act* or certificate of incorporation under the *Companies Act*
- ☐ the name of each partner, director and/or officer of the business and a copy of their valid government photo identification with date of birth and signature on it
- ☐ coloured photographs or written description of the changes to the vehicle(s) for approval (include side and rear of vehicle)
- ☐ coloured photographs or written description of the changes to the uniform for approval (include the front, side and back of uniform)
- ☐ completed Form 5 - Application for License - Guard Dog for Hire (for guard dog for hire endorsement)
- ☐ copy of Firearms Business License (for armoured vehicle services endorsement)

Any questions relating to this application may be directed to:

Department of Justice
Public Safety & Security Division - Security Programs
P.O. Box 7
Halifax, Nova Scotia B3J 2L6
Telephone: (902) 424-2905
Fax: (902) 424-4308

AFFIDAVIT

Province of Nova Scotia

I, _____ of _____,
legal name address

in the County of _____, Province of _____,
county province

Country of_____. .

MAKE OATH AND SAY:

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

applicant _____for a license to
legal and operating business name

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 this_____ day of_____ , 20_____

_____ _____
Signature of a Barrister of the Supreme Court of Signature of applicant
_____, Commissioner of Oaths in
and for the Province of_____ , Notary Public