Application for Individual Licence RENEWALPrivate Investigator/Private Guard/Armed Guard



Important

- Applicants must complete both sides of form. Print (Do Not Use Black Ink) or Type Only.
- Incomplete applications will be returned. Ensure you have completed all sections correctly and attached any supporting documents. Contact office if you need assistance.
- You cannot work as a private investigator, private guard, or armed guard unless you hold a licence under the Private Investigators and Private Guard Act.

Part 1 - To be Completed by BUSINESS REPRESENTATIVE										Shaded areas are for Office use only		
Name of business (in full)					Application for (check all that apply): ☐ Private Investigator ☐ Private Guard					Business no.		
Address of business					☐ Private Investigator and Private Guard					Person no.		
Address of Business					 □ Private Guard – armed guard endorsement □ Private Guard – guard dog handler endorsement □ Private Guard – uniform exemption 					Receipt no.		
					(restricted only for a retail store environment)□ Baton endorsement□ Restraining device endorsement					Licence no.		
P	art 2 - To be Completed by F	PPLICANT. Ensu	ıre all appli	cable field	ds are c	omplet	ed.					
Legal last or family name of applicant Legal first na			(s)	Legal second name(s)			Legal for	egal former name, maiden name, aliases, tc.				
Str	eet no. and street name or lot					Apt. no.		Email (If you do i	If you do not have an email put N/A)			
City, town, village, R.R.				Postal code				Contact no.				
1.	Armed Guard Endorsement (armoured vehicle companies only)											
	Authorization to Carry Number	·			Possession and Acquisition Licence Number Expi			Expiry	Province of Issue			
	Тапібеі Ехрії у			Number		-Aprily				Jouc		
	Attach copy of Authorization to Ca	rry (ATC).										
2.	Were you born outside of Canada? 2a. If yes, and you have a work or s 2b. If yes, and you've obtained perr	tudy permit, attach a	current copy. anadian citizer	nship in the p	oast 12 m	onths, att	ach a co	py of your current	docum	ent.		
3.	Do you currently hold peace office state or country?				cer, or go	vernmen	t enforce	ement officer) in I	Nova Sc	cotia or any other	province,	
The	e information in items 4 to 5 is requ	ired for a police reco	rds and backg	round checl	k.							
4.	☐ Male Date of Birth ☐ Female year month da			Distinguishing marks Height			Height	Weight		Eye colour	Hair colo	ıur
5.	(a) Have you been convicted of a	offence under any fe	ederal, provincial or territorial statutes in the past 12 months?						Yes 🗆 No			
(b) Are you currently under a probation or parole order, conditional sentence, or peace bond? — Yes — No												
(c) Have you pled guilty or been found guilty of any offence for which you have been absolutely discharged or conditionally discharged in the past 12 months?												
(d) Have you been charged with any offence in the past 12 months?									□ Yes □ No			
Δn	(e) Do you have any outstanding to answer of "yes" may require further	rily affect th	no arantii	na of a lic	ranca		u	Yes 🖵 No				
lf y	you answered "yes" to any of the ab ovide Summary of Incident/Offence	ove, GIVE ALL details	. (If space is in					et and attach.)				
	Offence Date F		Place	lace Police D			epartment		Outcome of Proceedings			

Declaration and Authority for Release of InformationIt is important that you read and understand this before signing. By signing this application:

- I consent to a police records check and a criminal and court records background check being done by authorized staff of the Security Programs Office.
- I understand that these checks may include information about me such as involvement with any police agency, information regarding convictions, findings of guilt, records of outstanding warrants, charges (provincial/federal) and unpaid fines in default.
- I consent to providing my application form to any police service for additional information that may be required in relation to my police records check and my criminal and court records background check.
- I authorize the release of any documents in the custody of any police service or the courts relating to these checks to authorized staff of the Security Programs Office.
- I understand that all information about me that is obtained during the police records check and the criminal and court records background
 check is used by the Registrar and authorized staff, for the purpose of determining eligibility for the issuance of a licence under the Private
 Investigators and Private Guard Act.
- I consent to the sharing of my information with other provinces, for the purpose of licence eligibility.
- I certify I have read and understand all parts of this application form, and the information provided by me in this application and all attachments I have submitted to be true and correct to the best of my knowledge and belief.
- I agree I will promptly (within 3 days) report to the Security Programs Office and any security business I am employed with, any charge or conviction for a provincial and/or federal offence that occurs on or after the date that I sign this authorization.
- I understand that if the application is incomplete and/or missing information, a licence will not be issued until this information is submitted to the Security Programs Office. I also understand that the application fee is non-refundable.
- I understand that no person shall act as a private investigator, private guard or armed guard, unless the person is the holder of a valid licence issued under the Private Investigators and Private Guards Act.
- I understand that if a licence 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 licence is valid.

I understand that if I knowingly or recklessly provide false information in this application, or to authorized staff of the Security Programs Office,

it may lead to my application being refused, or any resulting licence being suspended or revoked, and/or prosecution.

Signature of applicant (original signature required)

Date of signature

Print name							
Part 3 - To be Completed by BUSINESS REPRESENTATIVE							
The following fee and supporting documents must be submitted with this app	olication:						
applicable licensing fee (non-refundable) 1 current full-face photograph of the applicant taken within 6 months (if ap copy of valid government issued photo identification with date of birth and work permit, study permit, permanent resident or Canadian citizenship doc copy of Authorization to Carry (ATC) (for armed guard endorsement) proof of training certificate for baton/restraining device endorsement (if ap	signature (e.g. driver's licence, passport) ument (if applicable)						
Employer's Statement (to be completed and signed by the business rep	resentative)						
I have reviewed this completed application and confirm the information pro I certify that this applicant is considered a suitable person for the license a							
Signature of authorized business representative	Date of signature						
Print name	Position in company or partnership						

Any questions relating to this application may be directed to:

Department of Justice Public Safety and Security Division, Security Programs PO Box 7 Halifax, NS B3J 2L6 Telephone: (902) 424-2905 Email: secprog@novascotia.ca

www.novascotia.ca/just/public_safety/private_security.asp