Reset

Access Nova Scotia
Nova Scotia Business Registry

Submit Online at: www.nsbr.ca

Or by Mail to: PO Box 1529
Halifax, NS B3J 2Y4

Business Applicant Profile Information:

Business Name:

_____
Legal Entity including Operating Name

Canada Revenue Agency BN #: _____

N.S. Registry of Joint Stock Companies #: _____

Business Civic Address *(Not PO Box)*:

_____
Street # Street Name Unit/Suite/Apt #

_____
City/Town/County Province Country Postal Code

Business Mailing Address *(If Different)*:

_____
Street, P.O. Box, RR #, Site #, etc.

_____
City/Town/County Province Country Postal Code

Business Address in Nova Scotia:

_____
Street, P.O. Box, RR #, Site #, etc.

_____
City/Town/County Province Country Postal Code

Business Contact Information:

_____ _____
Name Title

_____
Primary Phone #

Please Note: The submission of an application with payment does not guarantee application approval

P.O. Box 1529
Halifax, NS
B3J 2Y4

NOVA SCOTIA

Transportation and Infrastructure Renewal

Questions:
Call: 902-424-5851 Or
1-800-898-7668

Road Safety Program

Application for Driver Training School Licence

Initial Application Fee: $132.60 (1 year)

Please make cheque payable to Minister of Finance

NOTE: If your school will be operating branch offices each branch must complete an application form (providing the physical location information) and pay the applicable fees.

Is this a Branch Application? Yes ☐ No ☐

Owner Information

_____
Owner/Operator Name

Address *(If different from Business Applicant Profile Information):*

_____
Street, P.O. Box, RR #, Site #, etc.

_____
City/Town/County Province Country

_____
Postal Code

_____
Primary Phone #

Rev June 2025

Enclosures

Application must be accompanied by the following documentation. For each, please indicate if enclosed (yes/no).

Name of Instructor(s) providing theory in your classroom.

Instructor Name(s):

Instructor(s) Number:

Proof that the driver training school is registered in good standing with the Registry of Joint Stock Companies	☐ Yes	☐ No
Canadian Police Information Center (CPIC) Criminal Records Background Clearance for the applicant and all members of the partnership or of the corporation **(Class 5 and 6 require Vulnerable Sector Check with the Criminal Record Check)**	☐ Yes	☐ No
Details of the driver training program including syllabus, texts and other materials to be used in the delivery of the program	☐ Yes	☐ No
Details of the training aids and the facility to be used for theory instruction, including any lease or rental agreement	☐ Yes	☐ No
A list of the instructors for the driver training school	☐ Yes	☐ No
A list of the vehicles, including registration numbers, to be used by the driver training school to conduct driver training	☐ Yes	☐ No
Proof of insurance with a driver training school endorsement	☐ Yes	☐ No

Has the applicant or any member of the partnership or of the corporation ever been convicted of any crime or previously had a Driver Training School Licence cancelled as per Driving School Regulations made under Section 63 of the Motor Vehicle Act? Yes ☐ No ☐

If YES, briefly explain

_____

_____

I, the undersigned, do solemnly declare that the above-mentioned statements and answers are true and I make this declaration conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath and by virtue of the Canada Evidence Act.

NOTE: Making a false statement on any application form may result in automatic rejection and a penalty fee. No licence will be issued until all required documents have been received.

_____ _____

Name of Authorized Official (*Please Print*) Title

_____ _____

Signature Date (D/M/Y)