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

Personal Applicant Profile Information:

Name:

_____
Title First and Middle Last Name

Civic Address *(Not P.O. Box)*:

_____
Street # Street Name Unit/Suite/Apt #

_____
City/Town/County Province Country

_____
Postal Code

Mailing Address *(If Different)*:

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

_____
City/Town/County Province Country

_____
Postal Code

Contact Information:

_____ _____
Home Phone # Work 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 Signing Authority Licence

Initial Application Fee: $66.00 **(1 year)**

Please make cheque payable to Minister of Finance

_____

Nova Scotia Driver's Licence Master Number # Years Driving Experience

_____

Nova Scotia Driver's Licence Class Expiry Date

Is your Driver's Licence endorsed for the following:

Air Brakes Yes ☐ No ☐
School Bus Yes ☐ No ☐

I hereby make application for Signing Authority to issue Certificates of Competence in classes (**check appropriate class(es)**) ☐ 1 ☐ 2 ☐ 3 ☐ School Bus 'b' Endorsement while employed by

_____
Name of Recognized Authority

I further certify that my Nova Scotia's Driver's Licence is not revoked, suspended or cancelled.

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.

_____ _____
Signature of Applicant Date (D/M/Y)

Section To Be Completed By Recognized Authority

This is to certify that the above-mentioned applicant has provided a current driving abstract and I have verified that the record is in good standing. Yes ☐ No ☐

_____ _____
Signature (Recognized Authority Official) **Title**

Rev June 2025