



Application for a NEW Security Business Licence

Before applying, read, understand and be able to comply with all requirements as set out under the Security Services Act and Regulations, and as outlined on the Security Industry and Licensing website: www.pssg.gov.bc.ca/securityindustry

USE THIS FORM for a NEW security business licence, or if holding a security business licence that has expired. (Refer to website and to the guide, "Getting and Keeping Your Security Business Licence" for assistance in completing forms and other information.)

PART 1: FEE & TERM

PAYMENT IS BY: bank-issued certified cheque or money order payable to Minister of Finance credit balance credit card using Authorized Credit Card Usage Form (#SPD0509) **DO NOT SEND CASH. Personal cheques are NOT accepted.**
TERM OF LICENCE & FEE: One Year (\$500) Two Year (\$775) Three Year (\$1050)

TOTAL ENCLOSED: \$ _____

PART 2: LICENCE TYPE

Application Type: NEW licence The security business holds an **expired** licence. The number is: # _____

The business does not have to provide any documentation that the Registrar already holds on record, but the business does have to complete all the fields on this form. **The controlling members on record with the Registrar without a security worker licence must complete form SPD0518, not form SPD0510.**

Check off **only** the security licence types the business is qualified for and intends to provide:

- Security Alarm Installer
- Security Alarm Sales
- Security Alarm Monitoring
- Security Alarm Response
- Closed Circuit Television Installer
- Electronic Locking Device Installer
- Locksmith
- Private Investigation
- Security Consultant
- Security Guard
- Armoured Car Guard (as per 'Guide', you are required to attach documentation regarding the vehicle)
- Body Armour Vendor

Dogs: No Yes ... this security business requests authorization from the Registrar to use dogs for the purpose of security work.

PART 3: BUSINESS INFORMATION

Type of Business (Company): Non-Registered Sole Proprietor Registered Sole Proprietor Corporation Non-Registered Partnership Registered Partnership

Legal Business Name: _____

Trade Name or "doing business as name": _____

Yes, if registered with the B.C. Companies Registry, a copy of documentation verifying registration will be attached.

Business Address:

Suite # _____ Street Address: _____ City/Town: _____ Province: _____ Postal Code: _____

Provide business mailing address if different than address above (this is where the licence is to be mailed)

Business Manager: (Surname) _____ (Given) _____ (Middle) _____

Business Phone: (_____) _____ Fax: (_____) _____ E-Mail: _____

No Yes, send a copy of licence to this e-mail when mailing original to the business

Identify individuals employed by the business who hold(s) a valid B.C. Security Worker Licence that supports the various licence types the business wishes to be licensed for.

Name: (Surname) _____ (Given) _____ (Middle) _____ Security Worker Licence Number: _____

Name: (Surname) _____ (Given) _____ (Middle) _____ Security Worker Licence Number: _____

Name: (Surname) _____ (Given) _____ (Middle) _____ Security Worker Licence Number: _____

Insurance: Yes, attached is a copy of the security business's valid general liability insurance of not less than \$1 million coverage.

BRANCH OFFICES:

Suite/PO# _____ Street Address: _____ City/Town: _____ Province: _____ Postal Code: _____

Br. Manager Name: (Surname) _____ (Given) _____ (Middle) _____ Br. Manager Phone: (_____) _____

Suite/PO# _____ Street Address: _____ City/Town: _____ Province: _____ Postal Code: _____

Br. Manager Name: (Surname) _____ (Given) _____ (Middle) _____ Br. Manager Phone: (_____) _____

Attach separate sheet if more branch offices to list - a copy of the licence will be issued for posting in each of the branch offices recorded

PART 4: CONTROLLING MEMBERS OF THE BUSINESS OPERATION

Indicate, below, the name and position held by every individual who has control or is able to control the operation of the business. Plus, check one of the three boxes pertaining to each controlling member.

NAME	POSITION HELD IN THE SECURITY BUSINESS	<p>This individual (controlling member) must:</p> <ul style="list-style-type: none"> hold a current Security Worker Licence, OR complete the form "Authorization and Acknowledgement of Information Collection and Use AND Consent to Criminal Record Check" (#SPD0510), plus comply with other requirements as listed in the "Controlling Members of a Security Business Guide"; OR if the business holds an expired licence and the individual does not have a current worker licence but has submitted form #SPD510 previously, the individual must complete "Controlling Member of a Security Business Reporting an UPDATE" (#SPD0518)
Surname: _____ Given: _____ Middle: _____		<input type="checkbox"/> Yes, this individual holds a current security worker licence: # _____ <input type="checkbox"/> No, this individual does not hold a security worker licence so has completed the form identified above (SPD0510) and will follow all requirements listed in the controlling member guide. <input type="checkbox"/> This individual is submitting the completed and signed update form #SPD0518
Surname: _____ Given: _____ Middle: _____		<input type="checkbox"/> Yes, this individual holds a current security worker licence: # _____ <input type="checkbox"/> No, this individual does not hold a security worker licence so has completed the form identified above (SPD0510) and will follow all requirements listed in the controlling member guide. <input type="checkbox"/> This individual is submitting the completed and signed update form #SPD0518
Surname: _____ Given: _____ Middle: _____		<input type="checkbox"/> Yes, this individual holds a current security worker licence: # _____ <input type="checkbox"/> No, this individual does not hold a security worker licence so has completed the form identified above (SPD0510) and will follow all requirements listed in the controlling member guide. <input type="checkbox"/> This individual is submitting the completed and signed update form #SPD0518
Surname: _____ Given: _____ Middle: _____		<input type="checkbox"/> Yes, this individual holds a current security worker licence: # _____ <input type="checkbox"/> No, this individual does not hold a security worker licence so has completed the form identified above (SPD0510) and will follow all requirements listed in the controlling member guide. <input type="checkbox"/> This individual is submitting the completed and signed update form #SPD0518
Surname: _____ Given: _____ Middle: _____		<input type="checkbox"/> Yes, this individual holds a current security worker licence: # _____ <input type="checkbox"/> No, this individual does not hold a security worker licence so has completed the form identified above (SPD0510) and will follow all requirements listed in the controlling member guide. <input type="checkbox"/> This individual is submitting the completed and signed update form #SPD0518
Surname: _____ Given: _____ Middle: _____		<input type="checkbox"/> Yes, this individual holds a current security worker licence: # _____ <input type="checkbox"/> No, this individual does not hold a security worker licence so has completed the form identified above (SPD0510) and will follow all requirements listed in the controlling member guide. <input type="checkbox"/> This individual is submitting the completed and signed update form #SPD0518

CONSENT and ACKNOWLEDGEMENT

ON BEHALF OF the applicant business entity, I hereby consent to and acknowledge that:

- the security business licence will be kept continuously on display in a conspicuous place in every office in which I am permitted, under the licence, to carry on business.
- I will advise the Registrar *within 14 days of the occurrence* and report to the Registrar the following:
 - changes to the business address;
 - changes in the ownership or management of the security business;
 - addition of any individual who has control or the ability to control in the operation of the business.
- the security business licence will be surrendered in the event that the business ceases operation or does not have an employee(s) that holds a valid security worker licence of a type that matches the security business licence type.
- the security business's licence information (legal business name, security licence number and licence status) is to be made publicly accessible through the Security Industry and Licensing website.

I AM AUTHORIZED to sign this application on behalf of the business entity.

I HEREBY CERTIFY THAT I have read and understand all portions of this application form and information set out by me in this application is true and correct to the best of my knowledge and belief. I have read and understood the Security Services Act and Regulations and understand the conditions of the licence.

Applicant on behalf of the Business:

Name: _____ **Signature:** _____ **Date:** _____

DISCLOSURE : All information regarding this application is collected under the Security Services Act and its Regulations and will be used for that purpose. The use of this information will comply with the Freedom of Information and Privacy Act and the Federal Privacy Act. If you have any questions regarding the collection or use of this information, please contact 250 356-1501.

Authorization and Acknowledgement of Information Collection and Use AND Consent to a Criminal Record Check — under the Security Services Act

The following section **must be completed** by every individual who has control or who is able to control the operation of the security business **unless** the individual already holds a valid B.C. Security Worker Licence and that licence number is provided to the Registrar, Security Services Act, when the business applies for, updates or renews a licence. **Important:** refer to the **“Controlling Members of a Security Business Guide”** for full information on a controlling member’s responsibilities. The website is also a source for various resources such as definitions, legislation, policy, etc., and the Code of Conduct which must be followed.

Legal Name of the Security Business applying for/holding a security business licence:

Your Legal Name: (Surname) _____ (Given) _____ (Middle) _____

Other Name(s): *(alias, maiden name, etc.)*

(Surname) _____ (Given) _____ (Middle) _____

(Surname) _____ (Given) _____ (Middle) _____

Date of Birth (year/month/day): _____ **Gender:** Male Female

Residential Address:

Apt.# _____ Street Address _____ City/Town: _____

Province/State: _____ Country: _____ Postal Code/Zip: _____

Home Phone: (_____) _____ E-mail: _____

Citizenship: I am a Canadian Citizen —attached is a clear copy of my birth certificate **or** valid Canadian Passport **or** Citizenship Certification Card.

(check [✓] one) I am not a Canadian Citizen

Residence: I reside in Canada — I have indicated below the **one** piece of photo identification I will attach a copy of:

(check [✓] one)

- Drivers Licence (Canadian issued) Passport BCID Canadian Firearms Licence
- Canadian Permanent Resident Card Canadian Native Status Card (must have photo)

I do not reside in Canada — I have attached a copy of **two** pieces of current/valid identification, one of them is photo identification.

Fingerprints: Yes, I reside in Canada and Yes, the Registrar already has my fingerprints on record; **OR**

(check [✓] one)

No, the Registrar does not have my fingerprints on record, therefore, I have attached the Confirmation of Fingerprints slip (form #SPD0507) stamped by the fingerprinting agency.

No, fingerprints are not required from me as I do not reside in Canada

B.C. Security Licence History (check **ONE** of the 3 options below):

1. I am currently a controlling member of **another** licensed Security Business in B.C. *(other than the one named above)*

Legal Business Name: _____ Security Bus.Lic. # _____ Expiry date (year/month/day): _____

2. I once had financial interest in or was a controlling member of a B.C. Security Business:

Legal Business Name: _____ Security Bus.Lic. # _____ Expiry date (year/month/day): _____

3. I have never been a controlling member of a Security Business in B.C.

Has a judgement of any court order been issued against you?

No Yes ... and details are: _____

Have you had a undischarged business bankruptcy or been involved in a company that has declared bankruptcy or is in the process of declaring bankruptcy?

No Yes...The business licence number is # _____ Bankruptcy date: (year/month/day) _____

POLICE Officer Status: answer 'yes' or 'no' to the following questions and follow corresponding instructions.

No Yes, **I am currently a member of a police force as defined in the Police Act.**

... **if yes**, as indicated in the 'Controlling Members of a Security Business Guide', a controlling member **may not** be a member of a police force and if so, the business's application for a security licence will NOT be accepted.

No Yes, **I am a volunteer auxiliary or reserve constable.**

... **if yes**, attach the confirmation letter from your superior officer (see the "Pre-Requirements" in the 'Guide' for details on what must be in the letter).

No Yes, **I am retired from the police force** — listed as member for administrative purposes only

... **if yes**, attach the confirmation letter from your superior officer (see the "Pre-Requirements" in the 'Guide' for details on what must be in the letter).

PEACE Officer Status: answer 'yes' or 'no' to the following . . .

No Yes ... **I presently hold a position with Peace Officer status.**

... **if yes**, indicate *below* what position do you hold **AND** attach the confirmation letter from your superior officer (see the "Pre-Requirements" in the 'Guide' for details on what must be in the letter).

Sheriff/Deputy Sheriff Corrections Officer Court-appointed Bailiff Special Provincial or Municipal Constable

Criminal History: Do you have a criminal record? no yes

Mental Condition: Have you ever been treated for a mental condition? no yes

If yes, you must have the *Mental Condition Form* (SPD0511) completed by your physician and provided to the Registrar, Security Services. (All forms and information are on the Security Industry and Licensing website)

If you do not wish to attach the completed mental condition form to this document, you may send it to the Registrar directly, BUT YOU MUST complete the covering slip at the bottom of this form — cut along dotted line, and attach it to the the mental condition form: Check one of the following so both the security business manager and Registrar know what to expect:

I have attached the completed mental condition form

I have not attached the completed mental condition form now, but will send it to the Registrar directly using the covering slip.

BY SIGNING THIS AUTHORIZATION and ACKNOWLEDGEMENT of INFORMATION COLLECTION AND USE and CONSENT TO A CRIMINAL RECORD CHECK, I HEREBY AUTHORIZE AND CONSENT THAT:

I hereby consent to the Registrar carrying out a criminal record check, police information check and correctional service information check on me and to use the copy of my fingerprints for that purpose. This consent will remain in effect for the duration of the period for which this security business licence is valid.

I understand that, as a result of the checks, the Registrar may require further information from me including copies of all criminal proceedings or information to assess good character.

I agree that I will notify the Registrar of any new charge or conviction against me, or of any change in my residential address or legal name or peace officer status, or if I begin treatment for a mental condition.

PRINT NAME: _____ **SIGNATURE:** _____ **DATE:** _____

DISCLOSURE

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COVERING SLIP for completed mental condition form

TO: Ministry of Justice
Policing and Security Programs Branch
Security Programs Division
PO Box 9217 Stn Prov Govt, Victoria BC V8W 9J1
Attention: Registrar, Security Services - Licensing Dept.

DATE: (year/month/day) _____

FROM: Name: (Surname) _____ (Given) _____ (Middle) _____
Date of Birth: (year/month/day) _____

ATTACHED: *Completed Mental Condition Form*

I control or am able to control the business operations of the Security Business, identified below, that is currently applying for a new licence, is updating their current licence records or is renewing their licence.

Legal Name of Security Business: _____

Security Business Licence Number (if known): _____

Trade Name of Security Business (doing business as): _____