Government of Saskatchewan

APPLICATION FOR LICENCE TO ENGAGE IN BUSINESS

The Private Investigators and Security Guards Act, 1997
[subsection 5(1)]

FORM A

Return completed application to: Private Investigators and Security Guards
Ministry of Corrections, Public Safety and Policing
1850 – 1881 Scarth Street, REGINA, Saskatchewan S4P 4V9

Include with application:

1. Application Fee
   Make cheque payable to "Minister of Finance"
2. Bond in Form D
3. Proof of registration with Corporations Branch, Saskatchewan Justice
4. Employee List

Application For: (*Choose one*)

☐ Private Investigation ☐ Security

☐ Armoured Vehicle Services ☐ Private Investigation and Security (Dual)

Application Type: (*Choose one*)

☐ New (fee is $300) ☐ Renewal* (fee is $250)

(*Note: A renewal is only used when the application is received at least 10 working days before the expiry date of the previous licence.)

This application is made by:
(Name(s) of Applicant(s). If further applicants, please attach a complete list with the required details):

Name: _____
[*Surname*] [*First Name*] [*Middle Name(s)*]

Address: _____
[*Street, Box No.*] [*Town, City*] [*Province*] [*Postal Code*]

Telephone Number and Area Code: _____
[*Home*] [*Business*]

Fax Number and Area Code: _____

If the applicant is an individual, date and place of birth: _____

If the applicant is a corporation or partnership, the names of all directors or partners (include dates and places of birth):

_____

Name under which the business will be conducted:

_____

1 The principal office or place of business will be located at:

_____

which will be the address for service in Saskatchewan. The business telephone numbers are:

telephone _____ fax number _____

cellular _____ pager _____

other numbers _____

Mailing address:

_____
(Please include postal codes)

If an affirmative answer is given to any of the next three questions, please include all required information on an attachment.

2 The applicant(s) has ___ has not ___ used, operated or carried on business under any name other than the name given in this application.

3 I have ___ have not ___ been convicted of a criminal offence in Canada or in any other state or country.

4 I have ___ have not ___ been refused a licence as a private investigator or security guard in Saskatchewan or in any other state or country, and have ___ have not ___ had such a licence suspended or cancelled in any other state or country.

In the case of a corporation or partnership, the following information is to be supplied respecting the person authorized by the corporation or partnership to make the application. In all cases, the information is to be supplied respecting the applicant.

5 The names of the following three persons are submitted as business references: **(Names submitted must be persons not related to the applicant(s) and must have known the applicant(s) for at least three (3) years).** PLEASE FILL IN COMPLETELY.

(A) Name: _____
[*Surname*] [*First Name*] [*Middle Name(s)*]

Address: _____
[*Street, Box No.*] [*Town, City*] [*Province*] [*Postal Code*]

Telephone Number and Area Code: _____
[*Home*] [*Business*]

Fax Number and Area Code: _____

Business or Occupation: _____ Years Known _____

(B) Name: _____
[*Surname*] [*First Name*] [*Middle Name(s)*]

Address: _____
[*Street, Box No.*] [*Town, City*] [*Province*] [*Postal Code*]

Telephone Number and Area Code: _____
[*Home*] [*Business*]

Fax Number and Area Code: _____

Business or Occupation: _____ Years Known _____

(C) Name: _____
[*Surname*] [*First Name*] [*Middle Name(s)*]

Address: _____
[*Street, Box No.*] [*Town, City*] [*Province*] [*Postal Code*]

Telephone Number and Area Code: _____
[*Home*] [*Business*]

Fax Number and Area Code: _____

Business or Occupation: _____ Years Known _____

AFFIDAVIT FOR BUSINESS

I, _____ , of _____
[*Name of one applicant*] [*Town/City*]

in the Province of Saskatchewan make oath and say:

1 I am the applicant (or partner of the applicant) herein for a licence to engage in the above named business under *The Private Investigators and Security Guards Act, 1997*.

2 The information given by me in the attached application is true.

Sworn before me at the _____ of _____

in the Province of Saskatchewan this _____ day of _____, _____ .

_____ _____
A Commissioner for Oaths in and for the Province of Saskatchewan. **[*Signature of Applicant*]**

My appointment expires _____

Dated at _____ this _____ day of _____ , _____ .

Forms:
1. Forms are valid only for **30 days**.
2. Incomplete forms will be returned; if no response within 30 days of date above, applicant will have to re-apply.
3. Application fees are non-refundable.