



# Application for a **NEW** Security Worker Licence

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

**Do Not Use this form if:** - you are applying for a Security Guard Under Supervision licence (90-day term) . . . use form #SPD0520  
- you hold a Security Guard Under Supervision licence and are now applying for a full Security Guard licence type . . . use the shorter form #SPD0519

It is very important that you refer to the guide, "Getting and Keeping your Security Worker Licence," for assistance in completing security licensing form(s). The guide includes pre-licensing requirements and full information on the types of documentation you must include in your application package. The Definitions page will help with terminology. All can be found on our website.

## PART 1: FEES & TERMS

**PAYMENT MADE BY:**  bank-issued certified cheque or money order made payable to the Minister of Finance  
 credit card (attach Authorized Credit Card Usage Form SPD0508) **DO NOT SEND CASH - PERSONAL CHEQUES NOT ACCEPTED**

**TERM OF LICENCE & FEE:**  One Year (\$120)  Two Year (\$180)  Three Year (\$240)  90 Days (\$60)

I am the owner and operator of a Sole Proprietorship Security Business (not a Partnership nor Corporation).  No  Yes

If yes, complete the following two fields and enter \$0 in the 'Total Enclosed' box below:

Current Security Business Licence # \_\_\_\_\_ Expires on: (year/month/day) \_\_\_\_\_

## PART 2: APPLICATION DETAILS

**TOTAL ENCLOSED: \$** \_\_\_\_\_

**APPLICATION TYPE:**  New Applicant **OR**  My licence has expired; so I must apply for a new licence.  
The expired licence is #E \_\_\_\_\_ It expired on: (year/month/day) \_\_\_\_\_

Note: Do not re-submit documentation that you have already provided to the Registrar. Use this form to update your information and attach required documentation which you have not already provided.

### SECURITY BUSINESS HISTORY:

Have you ever had control of or had the ability to control a B.C. security business operation?  No  Yes, that licence number was/is: # \_\_\_\_\_

**LICENCE TYPE:** (check off below only the types of services you are qualified for and need to show on your licence)

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Armoured Car Guard                           | <input type="checkbox"/> Security Alarm Sales                     | <input type="checkbox"/> Security Consultant |
| <input type="checkbox"/> Electronic Locking Device Installer          | <input type="checkbox"/> Closed Circuit Television Installer      | <input type="checkbox"/> Security Guard      |
| <input type="checkbox"/> Security Alarm Installer - under supervision | <input type="checkbox"/> Locksmith - under supervision            |  |
| <input type="checkbox"/> Security Alarm Installer                     | <input type="checkbox"/> Locksmith                                |  |
| <input type="checkbox"/> Security Alarm Monitor                       | <input type="checkbox"/> Private Investigator - under supervision |  |
| <input type="checkbox"/> Security Alarm Response                      | <input type="checkbox"/> Private Investigator                     |  |

**DOGS and RESTRAINTS:** (answer 'no' or 'yes' to the following, and for dog use authorization, check off purpose. Proof of qualification is required.)

No  Yes ... for my security guard work, I request authorization to use DOGS for the purpose of:  protection  detection-drugs  detection-explosives  
 No  Yes ... I request authorization to carry and use RESTRAINTS — that is, HANDCUFFS only.

## PART 3: APPLICANT INFORMATION

**Legal Name:** (Surname) \_\_\_\_\_ (Given) \_\_\_\_\_ (Middle) \_\_\_\_\_

**Additional Name(s)** (alias, maiden name, etc.): (Surname) \_\_\_\_\_ (Given) \_\_\_\_\_ (Middle) \_\_\_\_\_  
(Surname) \_\_\_\_\_ (Given) \_\_\_\_\_ (Middle) \_\_\_\_\_

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

**Citizenship:**  I was born in Canada—attached is a clear copy of my birth certificate or valid Canadian Passport.  
(check [✓] one)  I was **not** born in Canada but now have citizenship—attached is a copy of my valid Canadian Passport or Citizenship Certification Card.  
 I was **not** born in Canada, but I am legally entitled to work in Canada. Attached is a clear copy of my Record of Landing (IMM1000), Confirmation of Permanent Residence Document (IMM5292), Permanent Residence Card, **OR** my current work or student permit which is numbered: # \_\_\_\_\_ and expires (year/month/day) \_\_\_\_\_

**Photo Identification:** One clear copy of your photo ID is required - it must be current. Check off the type you are attaching:  
(check [✓] one)  Drivers Licence (Canadian issued)  Passport  BCID  Canadian Firearms Licence  
 Canadian Permanent Residence Card  Canadian Native Status Card (must have photo)

**Physical Description:** (this information will appear on your licence) **Height** (ft./inches or cms): \_\_\_\_\_ **Weight** (lbs or kgs): \_\_\_\_\_  
**Hair Colour:**  black  blonde  brown  red  gray  bald **Eye Colour:**  blue  brown  black  green  hazel

**Contact Information:** (your contact information **will not** appear on your licence)

**Residential Address:** Apt.# \_\_\_\_\_ Street Address \_\_\_\_\_  
City/Town: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

**Mailing Address:** If your mailing address (like a PO Box number) is different than your residential address, please provide it below:

**Phone:** ( \_\_\_\_\_ ) \_\_\_\_\_ **E-Mail Address** \_\_\_\_\_  
 **Yes**, send an electronic copy of my licence to this e-mail address when the original licence is mailed to me.

**Photograph** (this photo will appear on your licence):  I have attached a passport-quality photo of myself that has been taken within the last 12 months.

**Experience, Education and Training Certification:** Full information on training and documentation you may have to provide can be found on the Security Industry and Licensing website and in the guide, "Getting and Keeping your Security Worker Licence."

- **Security Alarm Installer** — attach copy of Certificate of Qualification (recognition credentials) of training or proven experience granted by the Industry Training Authority
- **Armoured Car Guard** — attach copy of valid Authorization to Carry (ATC) a restricted firearm.  
... *plus attach a copy of all supporting evidence of training and experience.*
- **Locksmith** — a copy of Certificate of Qualification **or** attach documentation supporting your two years' experience
- **Private Investigator** — attach all supporting evidence of training and experience
- **Security Guard** — attach copy of Basic Security Training Certificate
- **Security Consultant** — attach all supporting evidence of training and experience
- **USE OF DOGS** — If you have requested authorization to use dogs for security work purposes, you must attach your current **Validation Certificate**
- **USE OF RESTRAINTS** — If you have requested authorization to use restraints for security work purposes, attach **Certificate of Advanced Security Training**

*These licence types DO NOT need training and/or experience, therefore, no supporting documentation is required.*

- Security Alarm Monitor, Sales or Response • Security Alarm Installer *Under Supervision*
- Closed Circuit Television Installer • Electronic Locking Device Installer • Private Investigator *Under Supervision*

**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 'Guide', you may NOT hold a security worker licence and this application 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 forces** — 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

**Mental Condition:**

No  Yes ... **I have been treated for a mental condition.**

... *if yes*, attach the *Mental Condition Form* (#SPD0511) completed by your physician.

**Criminal History:**

No  Yes ... **I have a criminal record.**

**CONSENT FOR RELEASE OF INFORMATION AND ACKNOWLEDGEMENTS PURSUANT TO THE SECURITY SERVICES ACT and CONSENT TO CRIMINAL RECORD CHECK**

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 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 hereby consent to my licence information (i.e., licence number and licence status) be available for viewing.

**I HEREBY CERTIFY THAT I have read and understand all portions of this application form and the information set out by me in this application is true and correct to the best of my knowledge and belief. I have read and understand the Security Services Act and Regulations; and I am aware of and understand the conditions that will be placed on me as a licensee.**

**Applicant's Signature:** \_\_\_\_\_ **Date Signed:** \_\_\_\_\_

**Mini Checklist:**

Double check to be sure you have attached the supporting documentation described as you completed this form, such as:

- citizenship document(s)
- photo identification
- current photograph
- proof of qualifications, training, experience
- if police or peace officer, the confirmation letter from superior officer
- completed mental condition form
- and** make sure you have signed and dated this form and FULL PAYMENT.

**NOTE: A Security Worker Licence does not allow the operation of a Security Business without a valid Security Business Licence.**

**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 questions regarding the collection or use of this information, please contact 250 356-1501.