

## **Application for a Private Investigator License** *Private Investigators and Security Guards Act -* R.S.P.E.I. 1988, Cap. P-20

Return completed application to:

**Department of Justice and Public Safety Public Safety - Firearms Office** PO Box 2000 - 161 Maypoint Road Charlottetown, PE C1A 7N8 902-368-4585 Telephone:

License Application Fee: \$100.00 Make cheque payable to the **Minister of Finance** 

For Office Use Only:						
Received:		Receipt No.:				
Approval Date:		Approved by:				
CRLS License Number:		CPIC Result:				
Highway Safety Use Only:						
Driver's License #	Full Name:	Full Name:				
Date of Birth: Y M D	Street Address:	Street Address:				
Expiry Date:	City/Province/PC	City/Province/PC				
Type of License: SG PI	_ Company Name:					
Full Name of Applicant (Please	Print or Type):					
Maiden or other name previous	ly used by applican	t:				
	Street Address: PO Box					
City/Town:	Provinc		Postal Code:			
Telephone: D	elephone: Date of birth: (d/m/y		Place of Birth:			
Physical Description:Heigh	nt Weig	ght	Eye Color	Hair Color	Complexion	
2. Are you a member of a police for	orce? Yes □ No □	If yes, no	Private Invest	igator license v	will be issued.	
3. Do you hold a permit to carry a	restricted firearm?	Yes □ No	☐ If yes, ple	ease provide de	etails:	
Make/Model of gun:	Serial #:		ATC	C #:		
4. Have you ever applied for a Priv	vate Investigator's	license befo	ore? Yes □ 1	No □ If yes, p	lease provide	
details: Where?						
Firm Name:		When				

5.	Have you ever been convicted of an offence(s) under the law of any province, state or country?					
	Yes $\square$ No $\square$ . If yes, please provide details. (Place/Date/Offence(s)/Sentence) Convictions for which					
	a pardon has been granted need not be disclosed.					
6.	Do you have a PEI Driver's License? Yes No If yes, complete the rest this question.					
	I,, the applicant, hereby grant the Department of Justice and Public					
	Safety permission to access my driver's license records to use my photo for this license.					
	Signature Date:					
	Driver's License #					
	If you do not have a PEI Driver's license, staff will explain the steps necessary to secure your photo					
	license identification, pending approval of this application.					
7.	I,, the applicant, hereby grant the Department of Justice and Public					
	Safety permission to make inquiries through the Canadian Police Information Centre (CPIC) and, if					
	necessary, other police agencies in support of this application. I also certify that the information given in					
	this application is correct.					
	Signature: Date:					
	<b>EMPLOYER INFORMATION:</b> I, the undersigned employer, hereby certify that the above named					
	applicant is employed by my firm.					
	Company Name:					
	Address:					
	Postal Code:					
	Telephone Number: Fax Number:					
	Date: Signature:					

Personal information collected on this form is authorized under the **Private Investigators and Security Guards Act** - **R.S.P.E.I. 1988, Cap. P-20** as it relates directly to and is necessary for **processing your application for a private investigators license.** If you have any questions about this collection of personal information, you may contact the **PEI Firearms Office** at **902-368-4585.**