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Please type or print FA	AST COMMERCIA	AL DRIVER APP	LICATION	
1a. First time applicant Renewal or Replaceme	1b. Border crossing m	nost frequently used	^{1c.} Preferred language	English French
SECTION A - PERSONAL INFORMATIO	N			
2. Last name	N	3. First name		4. Middle name (in full)
5. Other names used (e.g., maiden name, former name)	Nickname	e I	Gender Male Female	7. Date of birth Year Month Day
8. Place of birth			Province/State	Country
9. Citizenship (Check all that apply.)	Other (Please spec	cify)	10. Residence	United States
11. Proof of citizenship/residency/immigration status (Attach				
Birth certificate No		zensnip, residency and c	,	Year Month Day
Citizenship card No	Permanent resident No.		Country of issuance	(Expiry date)
	document	No		Year Month Day
Other Type of document		NO.		(Expiry date) Year Month Day
Drivers licence No			State/Province of issue	(Expiry date)
SECTION B - ADDRESS HISTORY FOR	THE LAST 5 YE	ARS		
12. Current address Year Month As of:			14. Apt.	15. City
16. Province/State 17. Postal/Zip code 18. Count	ry	19. Home telephone	20. Business telep	hone / Cell phone number - Ext.
Mailing address if different from residential address				LAI.
21. Street address				22. Apt.
23. City	24. Provinc	e/State 25. Pos	stal/Zip code 26. Country	
Previous residential addresses if current residence is less the	an five years (attach a se	eparate sheet if necessar	v).	
27. Year Month Year	Month 28. Street a	•		29. Apt.
From: To: To: <thto:< th=""> <thto:< td="" th<=""><td>31. Provinc</td><td>e/State 32. Pos</td><td>stal/Zip code 33. Country</td><td></td></thto:<></thto:<>	31. Provinc	e/State 32. Pos	stal/Zip code 33. Country	
34. Year Month Year	Month 35. Street a	address		36. Apt.
From: To: To: To: To: To: To: To: To: To: To	38. Provinc	e/State 39. Pos	stal/Zip code 40. Country	
41. Year Month Year	Month 42. Street a	ddress	I	43. Apt.
From: To: To: To: To: To: To: To: To: To: To	45. Provinc	e/State 46. Pos	stal/Zip code 47. Country	
				Oractionard
				Continued on reverse

Send your completed form and photocopies of the required documents to:

FAST Commercial Driver Program

4551 Zimmerman Avenue P.O. Box 66 Niagara Falls, Ontario L2E 6T1 CANADA

SECTION C - EMPLOY	MENT HISTORY	FOR THE	LAST 5 YE	ARS				
48. Current employer			49. Employer's n					
Year Month	Year	Month						
50. Street address			•		51. Apt.	52. City		
53. Province/State	54. Po	ostal/Zip code	55. Country		•	56. Telephone num	ber	
						()	- Ext.	
57. Occupation						N /		
Previous Employer name and addr	ess if current employer	is less than five	e years (attach a s	separate sheet i	f necessary).			
58. Year Month	Year	Month	59. Employer's n	ame				
From:	То:							
60. Street address		61. Apt.	62. City		63. Province/State	64. Postal/Zip cod	e 65. Country	
SECTION D - ADDITIO								
66.								
Have you ever been convicted of	of an offence in any cou	ntry for which v	ou have not rece	ved a pardon?		Г	No Yes	
	,	, ,		• •		· · · · · · · · · · · · · · ·		
Have you ever received a waive	r of inadmissibity to the	LLS from the l	ISINS?			Г	No Yes	
						· · · · · · · · · · · · · · L	110 1103	
Have you ever applied to the Mi	nister of Citizenshin an	d Immigration (anada (CIC) for i	ebabilitation?			No Yes	
Trave you ever applied to the Mi	nister of Chizenship and			enablikation?		· · · · · · · · · · · · · · · L	no res	
Have you ever been found in vio	plation of customs or im	migration laws?	?			Г	No Yes	
If you have answered YES, plea	ase give details;							
For U.S. background	l checks, you may b	e questione	d by a U.S. Off	icer about yo	ur full criminal	history, including	g arrests and pardons.	
SECTION E - CERTIFIC	CATION							
67. I certify that all information given	on this application and	t in support of t	his application w	as provided volu	intarily and is true	and complete J und	erstand that any information on th	nis
application, including any suppor	ting documentation, bac	kground inform	nation, and biome	tric data will be	shared among Cus	stoms and Immigration	on authorities in both Canada and	
the U.S. and among law enforcer by all conditions required for use							, and agree to abide	
					• • •		Dete	_
Applicant	ame (print)			Signature	÷		Date	
	ACY ACT STAT	EMENT	1			'S PRIVACY S		
				The informer'				—
The authority to collect the information documentation, fingerprints, and o							supporting documentation and and is protected under the <i>Privacy</i>	v
and 19 of the U.S. Code and corresponding regulations. Furnishing the information on Act. The information will be used to make a determination of your application and may						ay		
this form is voluntary; however, failure to provide all the requested information may result in the delay of a final decision or denial of your request. The information collected The information will be retained in the Personal Information Bank # CCRA PPU 042.								
will be used to make a determination on your application. It may also be provided to Instructions for obtaining information are provided in Infosource which is available at								
other government agencies (Federal, state, local, and/or foreign) as permitted under the Privacy Act of 1974, 5 U.S.C. § 552a (2002) and other applicable law. All applicants http://infosource.gc.ca.								
are subject to a check of criminal information databases and other immigration and								
customs databases in order to det	ermine eligibility for this	program.						
FOR OFFICE USE ONLY								
68.								
		CPC no.			F	AST ID no.		
The applicant has paid the a	application processing f	ee.						
		<u> </u>			· · ·			-

 69. The combined fee for an applicant to the FAST program is \$80.00 Canadian or \$50.00 U.S. All credit card fees will be processed as Canadian funds. 	
I am enclosing a certified cheque or money order payment to the Receiver General For Canada Visa MasterCard	Card holder's name
Card no. MM YY Expiry date ► MM YY	Card holder's signature

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