

Submit Online at: www.nsbr.ca

Or by Mail to: PO Box 1529 Halifax, NS B3J 2Y4

Business Applicant Profile Information:

Business Name:						
Legal Entity including Operating I	Name					
Canada Revenue Agency B	3N #:					
N.S. Registry of Joint Stock	k Companies #:					
Business Civic Address (No	ot PO Box):					
Street # Street Name			Unit/Suite/Apt #			
City/Town/County	Province	Country	Postal Code			
Business Mailing Address ((If Different):					
Street, P.O. Box, RR #, Site #, etc.						
City/Town/County	Province	Country	Postal Code			
Business Address in Nova S	Scotia:					
Street, P.O. Box, RR #, Site #, etc.						
City/Town/County	Province	Country	Postal Code			
Business Contact Informat	ion:					
Name		Title				
Primary Phone #		Fax #				

Please Note: The submission of an application with payment does not guarantee application approval

P.O. Box 1529 Halifax, NS B3J 2Y4



Questions:

Call: (902) 424-5851 Or 1-800-898-7668 Fax: (902) 424-0772

Service Nova Scotia and Municipal Relations

Motor Vehicle Administration Application for Driver Training School Licence

Initial Application Fee: \$106.50 (1 year)

Please make cheque payable to Minister of Finance

NOTE: If your school will be operating branch offices each branch must complete an application form (providing the physical location information) and pay the applicable fees.

Is this a Branch Application? Yes No

Owner Information					
Owner/Operator Name					
Address (If different from Business Ap	oplicant Profile Information):				
Street, P.O. Box, RR #, Site #, etc.					
City/Town/County	Province	Country			
Postal Code					
Primary Phone #	Fax #				

Enclosures Application must be accompanied by the following documentation. For	or each, please indicate if	enclosed	(yes/no).
Proof that the driver training school is registered in good standing with the Registry of Joint Stock Companies			No
Canadian Police Information Center (CPIC) Criminal Records Backgr the applicant and all members of the partnership or of the corporation	round Clearance for	Yes	No
Details of the driver training program including syllabus, texts and oth used in the delivery of the program	Yes	No	
Details of the training aids and the facility to be used for theory instruction, including any lease or rental agreement			No
A list of the instructors for the driver training school			No
A list of the vehicles, including registration numbers, to be used by the driver training school to conduct driver training			No
Proof of insurance with a driver training school endorsement			No
Has the applicant or any member of the partnership or of the corporati previously had a Driver Training School Licence cancelled as per Driv Section 63 of the Motor Vehicle Act? Yes No If YES, briefly explain			
I, the undersigned, do solemnly declare that the above-mentioned state declaration conscientiously believing it to be true and knowing that it under oath and by virtue of the Canada Evidence Act. NOTE: Making a false statement on any application form may result in licence will be issued until all required documents have been received. Name of Authorized Official (<i>Please Print</i>)	is of the same force and e	ffect as i	f made
Signature	Date (D/M/Y)		