

## REQUEST FOR PUBLICATION

Please send the completed form in block letters **to this address:**

Bureau de la sécurité privée  
1611 Crémazie Blvd. East, Suite 500  
Montréal, Québec H2M 2P2

or by **fax** at 514 748-0002, or by **e-mail** at [info@bspquebec.ca](mailto:info@bspquebec.ca)

This form is intended for licence holders who benefit from an exemption from publication in the Register of Licence Holders under section 81 of the *Private Security Act* (CQLR, c. S-3.5) and who wish to make public the information concerning the validity of their licence, with regard to private security agencies, or to the public in general.

### SECTION A: AGENT IDENTIFICATION

Surname										First name														
Date of birth (YYYYMMDD)					Your mother surname at birth																			
Address (Civic No. and street)															Apt.									
City										Province					Postal code									
Phone number					Cell phone or other phone number																			
E-mail address																								

### SECTION B: REQUEST FOR PUBLICATION (Choose option 1 and/or 2 and identify the category(s) targeted for each case)

I am hereby asking the Bureau de la sécurité privée to make available :

#### 1 – Audit tool exclusively offered to private security agencies

to private security agencies, through the audit tool provided to them, the verification of the validity of my agent licence(s) in the following class(es):

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Security guarding   | <input type="checkbox"/> Investigation          | <input type="checkbox"/> Locksmith work              |
| <input type="checkbox"/> Security consulting | <input type="checkbox"/> Transport of valuables | <input type="checkbox"/> Electronic security systems |

#### 2 – Public Registry of Licence Holders

to all, through the public Register of Licence Holders available on the BSP Website, the verification of my employer(s) information and the information concerning my agent licence(s) the following class(es):

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Security guarding   | <input type="checkbox"/> Investigation          | <input type="checkbox"/> Locksmith work              |
| <input type="checkbox"/> Security consulting | <input type="checkbox"/> Transport of valuables | <input type="checkbox"/> Electronic security systems |

### SECTION C: ACCESS TO INFORMATION AND PROTECTION OF PERSONAL INFORMATION

Personal information is collected for the purpose of the application of the *Private Security Act* and will only be used for this purpose. This information will be available only to employees if required in the performance of their duties. This information can be disclosed to third parties within the limits of the *Act Respecting Access to Documents held by Public Bodies and protection of Personal Information*, or with the consent of the person to whom the information relates.

**SECTION D: DECLARATION**

By choosing Option 1 in Section B, I understand that BSP will make the validity information of my license(s) available through this audit tool only to private security agencies that know my licence number.

By choosing Option 2 in Section B, I understand that BSP will make available to everyone (i.e. the general public, agencies and employers) through the online register available on the BSP website, information about my employers and my agent licence(s).

I declare that all the information provided in this form is accurate and complete and that any change modifying that information will **immediately** be communicated to the Bureau de la sécurité privée.

**In witness whereof, I have signed:**

\_\_\_\_\_  
Signature

Date    Y   Y   Y   Y    M   M    D   D  
      | | | |    | |    | |