



AGENT LICENCE REPLACEMENT APPLICATION

For lost or stolen licences

To file your application

Online - Upload your request via section "6-FOR ANY OTHER REQUESTS" on the APPLY ONLINE page at bspquebec.ca, by **clicking here**.

By mail - Send this form and all documents to the following address:
1611 Crémazie Boulevard East, Suite 500, Montréal, Québec H2M 2P2.

SECTION A: AGENT IDENTIFICATION

| | | | |
|--|-----------------------------------|----------------------------------|-----------------|
| Surname | | First name | |
| Date of birth Y Y Y M M D D | BSP File No. or Agent Licence No. | | |
| Mother's maiden name | | | |
| Address (Civic No. and street) | | | App. |
| City | | Province | Postal code |
| Home phone number | | Cell phone or other phone number | |
| E-mail address | | | |

SECTION B: LICENCE(S) TO REPLACE (Check the class(es) for which the agent licence replacement application is filed).

I **hereby request** the Bureau de la sécurité privée to replace my agent licence(s) for the following class(es):

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

I **certified** that this (these) licence(s) was (were): Lost Stolen

I **have enclosed** the required payment as stipulated in Section E.

SECTION C: ACCESS TO INFORMATION AND PROTECTION OF PERSONAL INFORMATION

Personal information is collected for 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 the Protection of personal Information*, or with the consent of the person to whom the information relates.

SECTION D: DECLARATION

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

In witness whereof, I have signed on Y | Y | Y | Y | M | M | D | D |

Signature

SECTION E: PAYMENT SHEET

| | |
|----------------------|-------------------------|
| Agent surname | Agent first name |
|----------------------|-------------------------|

PAYABLE FEES (Pricing effective from January 1, 2023)

Indicate the quantity of licences to replace on the line on the right and multiply this number by the unit price to obtain the total amount to pay.

Licence replacement cost : \$28.25 + \$1.41 GST + \$2.82 QST = **\$32.48** (unit price) **X Qty** _____

GST number (5 %): 817788656 QST number (9,975 %): 1216343481 **Total amount to pay:** \$ _____

METHODS OF PAYMENT

Select a method of payment for this transaction:

Payment card

| | | |
|-------------------------------------|---|---|
| <input type="checkbox"/> Mastercard | <input type="checkbox"/> Mastercard Prepaid | <input type="checkbox"/> American Express |
| <input type="checkbox"/> Visa | <input type="checkbox"/> Visa Prepaid | <input type="checkbox"/> Visa Debit |

| | | |
|--------------------|--------------------|-----------------|
| | | |
| Card number | Exp (MM/YY) | N° CVV2* |

*N° CVV2: Security number of 3 or 4 digits on the back of your credit card.

| | |
|------------------------------|---------------------------------|
| Card holder's surname | Card holder's first name |
|------------------------------|---------------------------------|

AUTHORIZATION – I authorize the Bureau de la sécurité privée to charge on my card the required amount for the processing of this application.

_____ **Date** Y | Y | Y | Y | M | M | D | D

Card holder's signature

Telephone

Interac e-Transfer (Recipient: Bureau de la sécurité privée, Email: comptabilite@bspquebec.ca, Security Question: reason for payment, Security Answer: permis, Reason: your BSP file number)

Cheque payable to the Bureau de la sécurité privée
(mail-in application only - no post-dated cheques accepted)

Bank or postal money order payable to the Bureau de la sécurité privée
(mail-in application only)