BRITISH COLUMBIA | Ministry of Transportation and Infrastructure

CARRIER INFORMATION UPDATE FORM

Commercial Vehicle Safety & Enforcement
National Safety Code

Reason for submitting this form:

- ☐ Corporation/carrier name change
- ☐ Addresses/contact information change
- ☐ Replacement certificate required

Current Carrier Name: _____

Previous Carrier Name: _____
(If the carrier name has changed)

National Safety Code #: _____

Business Mailing Address:

_____

_____

_____

Records Location Address: *(Must be a physical address, not a PO Box)*

_____

_____

_____

Phone: _____ Fax: _____

Cell: _____ Email: _____

For Sole Proprietorships/Partnerships, this form must be signed by the certificate holder.
For Corporations, this form must be signed by a director or officer who appears on the Corporate Registry.

Name *(Type or print clearly)*	Signature	Date *(MM/DD/YYYY)*

Please sign, print, scan and send this completed form by email to: NSC@gov.bc.ca (preferred) or fax it to: 250-952-0578

MINISTRY OF TRANSPORTATION AND INFRASTRUCTURE

Commercial Vehicle Safety & Enforcement Branch

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