National Safety Code

Safety Certificate Application



COMPLETING THE NATIONAL SAFETY CODE (NSC) SAFETY CERTIFICATE APPLICATION

Refore completing this application you must have knowledge of the motor vehicle safety rules and regulations as they apply in British Columbia (as per Motor Vehicle Act Regulation 37.04(1)(a)(i)), and, if you intend to transport dangerous goods, you must have knowledge of the Transport of Dangerous Goods Act and the Transportation of Dangerous Goods Act (Canada) and the regulations made under both those Acts (as per Motor Vehicle Act Regulation 37.04(1)(a)(ii)).

There are resources online to help you. Please visit the Commercial Vehicle Safety & Enforcement website at www.cvse.ca where you will find links to all the applicable Acts and Regulations. Also, you will find a link to our **CARRIER SAFETY GUIDE**. It is recommended that you read the Carrier Safety Guide before completing this application.

Please complete all applicable questions as completely and accurately as possible. This information is collected under authority given by the Motor Vehicle Transport Act, the Motor Vehicle Act, and the Transportation of Dangerous Goods Act. If you require assistance, phone the National Safety Code office at **250-952-0576**. NSC staff are available to answer your questions Monday to Friday, 8:30am to 4:30pm.

ABOUT THE APPLICATION

The NSC certificate can be issued to a person, a corporation that is registered with the BC Corporate Registry, or a recognized legal organization (Society, Religious Organization, Indian Band, etc.). If your business is a sole proprietorship or general partnership, the certificate must be issued under the name of one of the individuals involved. The certificate is non-transferable so if you intend to incorporate, you may want to wait until the BC Corporate Registry has assigned you an incorporation number.

If you are applying as an extra-provincial corporation, you must supply an officers/directors list issued by your jurisdiction's corporate registry or corporate attorney's office.

If you are applying on behalf of someone else, you must supply a letter signed by this person stating that you have the authority to submit this application on their behalf.

If you are applying as a corporation of which you are not registered as an officer or director, you must supply a letter stating that you have the authority to submit this application on the company's behalf, signed by a director of the company.

You must include the names and licence numbers of <u>all</u> directors of the company, regardless of whether or not they will be driving the vehicle. For any individual appearing on the application who has a driver's licence from a Canadian province other than British Columbia, you must supply a 3 year driver's abstract.

Criteria for evaluating applications:

Division 37 of the Motor Vehicle Act Regulations provides the reasons that an application may be refused:

- the applicant, director or officer has held a safety certificate that was suspended or cancelled for cause (MVAR 37.03(2)(a)) and (MVAR 37.03(2)(b))
- the applicant does not demonstrate a satisfactory road history (MVAR 37.03(2)(c))
- the applicant, director, officer or driver has 4 or more pointable offences in the past 24 months (MVAR 37.03(2)(c))
- the applicant, director, officer or driver has a motor vehicle-related criminal code conviction in the past 36 months (MVAR 37.03(2)(c))
- the applicant, director or officer of the corporation does not demonstrate knowledge of motor vehicle safety rules and regulations as they apply in British Columbia (MVAR 37.04(1)(a)(i))

If your main headquarters is outside of B.C., for purposes of the application, you must have a records location within B.C. for the documents which you are obligated to keep under the B.C. National Safety Code (question 7 of the application). You can have a mailing address outside of B.C. (question 6 of the application) but having mail sent to your B.C. office may be a more efficient option, especially if a letter is sent to notify of an upcoming visit by a Carrier Safety Inspector. Also, it is recommended that you name a person overall responsible (question 18) who is stationed at your B.C. location so that someone can administer the daily monitoring of drivers and vehicles.

If the vehicle you intend to use hasn't previously been registered in B.C., you must provide documentation with details for the vehicle. A copy of the bill of sale, transfer papers, lease agreement, inspection report, or New Vehicle Information Sheet (NVIS) can be accepted.

PAYMENT

A \$200 **non-refundable application processing fee** must be received before your application will be processed. This fee can be submitted by cheque, money order or bank draft, payable to "The Minister of Finance", or you can phone the NSC office and provide your credit card number over the phone.

CONTACT INFORMATION

Mailing Address:
National Safety Code
Commercial Vehicle Safety & Enforcement
PO Box 9250 Stn Prov Govt
Victoria BC V8W 9J2

Physical Address:

3A – 940 Blanshard St., Victoria BC V8W 2H3

Office Contact:

Phone: 250-952-0576 Fax: 250-952-0578

Email: NSC@gov.bc.ca



Information received by the National Safety Code, in an application, is subject to provisions of the Freedom of Information and Protection of Privacy Act. The applicant is subject to the provisions of the Personal Information Protection Act with regard to its collection, use and disclosure of any personal information it submits to the above departments as part of its application.

Internal Use Only					
Application #					
NSC#					

If you have questions about this application, you may contact our office at 250-952-0576 or email NSC@gov.bc.ca

l ar	n ap	plying: (select one)		
	1a.	In my own name (Sole Propi	rietorship)	
	1b.	As a Partnership The certificate must be in on In which partner's name wou	e of the partners' names. ald you like the certificate issued?	
	2.	As an incorporated or limit	ted organization	
	2a.	Legal Organization Name:		
	2b.	Is your organization incorpor	rated/limited in British Columbia?	☐ Yes ☐ No
	2c.	If <u>yes</u> to the previous question	on, provide the incorporation number:	
		BC Corporate Registry as ar	n, you will need to be registered with the nextra-provincial company and provide a ed by your corporate jurisdiction.	
	3.	Other (Society, Religious Orga	nization, Indian Band, etc.)	
	3a.	Legal Organization Name:		
	3b.	Is your organization a registe	ered society in British Columbia?	☐ Yes ☐ No
	3c.	If yes to the previous question	on, provide the incorporation number:	
4.	Na	me of sole applicant or nam	es of all directors, officers and/or partne	ers:
	the yea	ir attorney or their home juriso	of British Columbia must provide a current diction's corporate registry. Driver abstracts ne with a driver's licence in any Canadian j riving for the company.	containing information for the last 3
		Surname	Given Names	Title (Director, President, Secretary, etc.)
		Driver's Licence Number	Issuing Province	Date of Birth (YYYY/Mon/DD)
		e any NSC safety certificates, ctor or officer of an organizatio	safety fitness licences, US DOTs, CVORs, on or individually?	etc. been issued to this individual as a
	Y	es No If yes, please p	provide details below:	
		Cerificate Number	Jurisdiction (Province or USDOT)	Name on Certificate

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Surname	Given Names	Title (Director, President, Secretary, etc.		
Driver's Licence Number	Issuing Province	Date of Birth (YYYY/Mon/DD)		
Have any NSC safety certification director or officer of an organic	ates, safety fitness licences, US DOTs, CVORs, ization or individually?	etc. been issued to this individual a		
Yes No If yes, plea	ase provide details below:			
Cerificate Number	Jurisdiction (Province or USDOT)	Name on Certificate		
Surname	Given Names	Title (Director, President, Secretary, etc.		
	Issuing Province	Date of Birth (YYYY/Mon/DD)		
Continue on extra page if needed	Jurisdiction (Province or USDOT)	Name on Certificate		
Continue on extra page if needed	d.			
Doing Business As:				
List all the names with which	h you do business as an organization, partnersh	nip, or related carrier:		
Business Mailing Address	<u> </u>			
Unit Street Address	City	Prov / State Postal / Zip Code		
Unit Street Address Office Number	City Cell Number	Prov / State Postal / Zip Code Fax Number		
Office Number	Cell Number			
Office Number Business Email Records Location Address This address must be a phy	Cell Number	Fax Number		

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8.	Drivers	

Identify your drivers including yourself if you are going to be a driver. Driver abstracts containing information for the last 3 years must be forwarded to the NSC office for any driver that has a driver's licence in any Canadian jurisdiction other than British Columbia. Continue on an extra page if needed.

	Surname	Given Names	Driver's Licence Number	Issuing Province	YYYY/Mon/DD Date of Birth
-					
-					
-					
-		<u> </u>			
-					
9.	Service Locations:				
	Where do you plan to operate? Che	eck <u>all</u> that apply.			
	☐ BC within 160km of home office	Only in E	BC but outside 16	0km from ho	me office
	Other Provinces/Territories within	Canada	of Canada		
10.	Do you plan to provide passenge	er service for hire? (example: taxi,	limousine etc) 🗌 Y	∕es ☐ No	
11.	Check all services you plan to pr	ovide:			
	Passenger Services:				
	Bus – Charter Tour Bus – Public Tran	nsit Bus – School Bus – Commi	munity Group Bu	ıs – Shuttle	Taxi/Limousine
	Bus – Charter Tour Bus – Public Tran Other passenger service:	nsit Bus – School Bus – Commi	munity Group 🔲 Bu	us – Shuttle	Taxi/Limousine
		nsit Bus – School Bus – Comm	munity Group 🔲 Bu	us – Shuttle	Taxi/Limousine
	Other passenger service:	nsit Bus – School Bus – Comm	munity Group Bu		Taxi/Limousine
	Other passenger service: Non-Passenger Services:	_		es	Taxi/Limousine
	Other passenger service: Non-Passenger Services: Artisan	☐ Film Industry	☐ Perishabl	es	Taxi/Limousine
	Other passenger service: Non-Passenger Services: Artisan Bulk – Dry	☐ Film Industry ☐ General Freight	☐ Perishabl ☐ Public Uti ☐ Rental	es	
	Other passenger service: Non-Passenger Services: Artisan Bulk – Dry Bulk – Liquid	☐ Film Industry ☐ General Freight ☐ Government Vehicle	Perishabl Public Uti Rental TDG – Ex	es ilities xplosives (Cl	
	Other passenger service: Non-Passenger Services: Artisan Bulk – Dry Bulk – Liquid Bulk – Other:	☐ Film Industry ☐ General Freight ☐ Government Vehicle ☐ Heavy Equipment	Perishabl Public Uti Rental TDG – Ex	es ilities kplosives (Cl ompressed C ammable/Co	ass 1) Gas (Class 2)
	Other passenger service: Non-Passenger Services: Artisan Bulk – Dry Bulk – Liquid Bulk – Other: Catering/Food Services	☐ Film Industry ☐ General Freight ☐ Government Vehicle ☐ Heavy Equipment ☐ Highway Construct/Maintenance	Perishabl Public Uti Rental TDG – Ex	es ilities kplosives (Cl ompressed C ammable/Co	ass 1) Gas (Class 2) ombustible
	Other passenger service: Non-Passenger Services: Artisan Bulk – Dry Bulk – Liquid Bulk – Other: Catering/Food Services Container	☐ Film Industry ☐ General Freight ☐ Government Vehicle ☐ Heavy Equipment ☐ Highway Construct/Maintenand	Perishabl Public Uti Rental TDG – Ex	es dilities explosives (Clampressed Clammable/Co class 3) prrosives (Class (Class 2)	ass 1) Gas (Class 2) ombustible
	Other passenger service: Non-Passenger Services: Artisan Bulk – Dry Bulk – Liquid Bulk – Other: Catering/Food Services Container Courier Services	☐ Film Industry ☐ General Freight ☐ Government Vehicle ☐ Heavy Equipment ☐ Highway Construct/Maintenanc ☐ Household Mover ☐ Local Delivery	Perishabl Public Uti Rental TDG – Exce TDG – Co	es ilities kplosives (Clampressed Clammable/Coccides 3) corrosives (Clather:	ass 1) Gas (Class 2) ombustible
	Other passenger service: Non-Passenger Services: Artisan Bulk – Dry Bulk – Liquid Bulk – Other: Catering/Food Services Container Courier Services Dump Truck	☐ Film Industry ☐ General Freight ☐ Government Vehicle ☐ Heavy Equipment ☐ Highway Construct/Maintenanc ☐ Household Mover ☐ Local Delivery ☐ Logs/Poles	Perishabl Public Uti Rental TDG – Exce TDG – Co TDG – Flauids (Co TDG – Co	es ilities kplosives (Clampressed Clammable/CoClass 3) corrosives (Clather:	ass 1) Gas (Class 2) ombustible

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YYYY/Mon/DD

Date of Birth

12a.	Passenger Vehicle Inventory:
	Enter the number of passenger vehicles (taxis, limousines, buses) you intend to operate under this application

ıza	. Passenger venici	e inventory.									
	Enter the number of Include both currer			s, limou	ısines,	buses) you intend	to operate	e unde	r this ap	oplicatio	n.
	Number of P	assenger Vehicles Owned:	1 1 2 1	Buses	Other	Number of Pass	-	hicles ased:	Taxis/ Limos	Buses	Other
12b	. Non-Passenger V	ehicle Inventory:									
	Enter the number of Include both currer			you inte	end to	operate under this	applicatio	n.			
	Number of Non-	Trucks Tractors	Trailers	Oth		Number of Non-	1	Tracto	ors Trai	lers C	ther
	Passenger Vehicles Owned:					Passenger Vehicles Leased:					
13.	· ·	on:									
-	Provide the following previously been required agreement, inspections.	gistered in BC, pro	vide a c	opy of (Inform	ONE o	f the following: bill of			papers,	lease	
	Year	Make		ded GVW grams (K	1 1	Registration Number	Last 6 digit	s of VIN		ating Ca (buses or	
	Continue on an ext carries 24 or more						er 11794k	g GVV	V or a b	ous tha	t
14.	Safety Profile - D	rivers:									
	14a. Do you have a	procedure for obt	aining dr	iver ab	stracts	and a policy for th	e review o	of drive	er abstra	acts?	
		If "No", explain:									
	14b. Do you have a to you within 15	written policy requestions of the offen					conviction	s and	acciden	it detail	S
		If "No", explain:									
	14c. Do you have a that will be ope	system to record erating under your				victions, and accide	ents for ea	ach dri	ver		
	☐ Yes ☐ No	If "No", explain:									
	14d. Do you have a	monitoring proces	ss to ens	ure tha	t drive	rs supply you with	all require	d reco	rds?		
	☐ Yes ☐ No	If "No", explain:									

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Drivers' Licence

Number

Issuing Province

Who will be responsible for supervising the above items listed in section 14 Safety Profile - Drivers?

Given Names



. Saf	Safety Profile – Vehicles:							
15a.	Do you have a written schedule (This plan will include any owner/o		ur maintenance pr	ogram?				
	☐ Yes ☐ No If "No", explain:							
15b.	Do you have check sheets that	t will be used to support the n	naintenance sched	dules?				
	Yes No If "No", explain:							
15c.	Do you have a monitoring syste being met?	em to ensure that your sched	uled maintenance	program requir	ements are			
	☐ Yes ☐ No If "No", explain:							
15d.	Do you have a monitoring systerequired?	em to ensure that all CVIP ins	spections are bein	g performed on	all vehicles as			
	☐ Yes ☐ No If "No", explain:	·						
15e.	All commercial vehicles must be and that any defects are correct		e a monitoring sys	tem to ensure th	nat this occurs			
	☐ Yes ☐ No If "No", explain:	:						
15f.	Do you have a monitoring proc reports are filed and retained a				and inspection			
	☐ Yes ☐ No If "No", explain:							
Who	will be responsible for superv	vising the above items liste	d in section 15 S	afety Profile –	Vehicles?			
		_						
	Surname	Given Names	Drivers' Licence Number	Issuing Province	YYYY/Mon/DD Date of Birth			
Saf	ety Profile – Hours of Service	•						
	Do you have a written policy what safety certificate must operate	hich is shared with your drive			g under your			
	Yes No If "No", explain:							
16b.	Do you have a method of ensu by regulations?	ring that drivers are aware of	and operate withi	n the hours of s	ervice permitted			
	Yes No If "No", explain:							
16c.	Do you have a monitoring systetime records and all supporting		vide you with prop	erly completed	logs or accurate			
	Yes No If "No", explain:							
16d.	Do you have a monitoring and	record keeping system to tra-	ck hours of service	e for drivers?				
	Yes No If "No", explain:							
16e.	Do you have a system to ensur	re that hours of service record	ds are kept for at l	east 6 months in	n separate files			
	Yes No If "No", explain:							
Who Servi	will be responsible for superv		d in section 16 S	afety Profile –	Hours of			
	Surname	Given Names	Drivers' Licence Number	Issuing Province	YYYY/Mon/DD Date of Birth			

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17.	Safety Profile – Dangerous Go	ods: (Skip this section if you do i	not deal with Dangero	ous Goods)						
	17a. Do you have a scheduling system to ensure that your drivers receive the required training and certification to transport dangerous goods?Yes No If "No", explain:									
	spillage, leakage or other ac	17c. Do you have a system to ensure that all drivers operating under your safety certificate record all incidents of spillage, leakage or other accidents involving dangerous goods? Yes No If "No", explain: Who will be responsible for supervising the above items listed in section 17 Safety Profile								
	Surname	Given Names	Drivers' Licence Number	Issuing Province	YYYY/Mon/DD Date of Birth					
	Overall Responsibility Who will have overall responsibility for your organization's commercial vehicle safety obligations?									
	_	Surname	Given Names	Drivers' Licence Number	Issuing Province	YYYY/Mon/DD Date of Birth				

Additional Information

Please add any additional information that your feel is relevant to your application.

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19. l	Declaration				
This d	eclaration is made	in support of an application	n by	and an Organization to March	to
he Pr	ovince of British C	olumbia for the issuance of	a National Safety Code Sa	icant's or Organization's Name) fety Certificate.	
nas si	gning authority for		one who has been given au	the NSC Certificate OR a per thority to submit the applicati	
The in	ndividual submitt	ing this form must compl	ete the following declarati	on:	
	L EACH DECLAR orized Signatory)		SIGN AS PROOF OF THE	ENTIRE DELCARATION.	
nitial Here:				cer, or partner of the applicar that has been deemed unsa	
nitial Here:		nat the information I have s e and accurate.	upplied in all parts of these	forms is true and to the best	of my ability
nitial Here:	British Col	umbia and that I understan	d my obligations under the N	verning commercial vehicle to National Safety Code. I furthe ce and accordance with thes	er declare
	• •	makes a false declaration olations, Section 37.36(2), a	•	is guilty of an offence under	Motor
	An authorized sign	RATION OF ALL OF THE atory must sign this declarationity on behalf of the company.	_	tion, authorized signatory refers	to a person
	Signed:		On	this date:	
	Print Name:		Title:		
	Phone:	Fax:	Email:		
	documents. A n cheque, money	on-refundable application	n processing fee is also re ble to "The Minister of Fin	il, or fax with any required quired. This fee can be sub ance", or you can phone tl	omitted by
Mailin	a Addross:	Dhyei	al Addross:	Office Contact:	

Mailing Address:

National Safety Code Commercial Vehicle Safety & Enforcement PO Box 9250 Stn Prov Govt Victoria BC V8W 9J2 Physical Address:

3A – 940 Blanshard Street Victoria BC V8W 2H3 Office Contact:

Phone: 250-952-0576 Fax: 250-952-0578 Email: NSC@gov.bc.ca

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