



APPLICATION FOR A SECURITY
BUSINESS LICENCE

OFFICE USE ONLY

TO CARRY ON BUSINESS AS:

..... ALARM SERVICE ☒ PRIVATE INVESTIGATOR SECURITY PATROL
..... LOCKSMITH SECURITY CONSULTANT ARMoured CAR SERVICE

☒ AS AN INDIVIDUAL (Complete Parts I and II) AS A PARTNERSHIP (Complete Parts I and II) AS A CORPORATION (Complete Parts I and III)

LICENCE NUMBER	3178
LICENCE ISSUE DATE	SEP 06 1988
LICENCE EXPIRY DATE	31-3-89
LICENCE FEE	77.00

PART I — TO BE COMPLETED BY ALL APPLICANTS

(The term "applicant" in questions 9 to 15, in the case of a corporation, includes any of those persons mentioned in PART III, Question 4)

1. NAME AND ADDRESS OF BUSINESS (Trade name under which applicant wishes to do business) Telephone
FRED BODNARUK INVESTIGATION SERVICES (PROPRIETORSHIP) 880-9488
MAILING ADDRESS (If different from above) Postal Code
V7P2G4

1330-W 22nd.St., North Vancouver, B.C. Postal Code: V7P-2G4

2. IF APPLICATION IS BEING MADE ON BEHALF OF A BRANCH OFFICE, COMPLETE THE FOLLOWING:

(a) NAME AND ADDRESS OF APPLICANTS HEAD OFFICE (NUMBER AND STREET) (CITY, TOWN, VILLAGE) (POSTAL CODE)

TELEPHONE No.:

(b) NAME OF MANAGER OF BRANCH OFFICE BIRTHDATE:

(c) RESIDENT ADDRESS OF BRANCH MANAGER (NUMBER AND STREET) (CITY, TOWN, VILLAGE) (POSTAL CODE)

(d) BRANCH MANAGER WILL OPERATE THE BRANCH ON A FULL TIME PART TIME BASIS (If part time, state other occupation)

3. IS THE BUSINESS CONDUCTED FROM:

An office building or similar business premises? NO YES

A private residence? NO ☒ YES

(a) If yes, is office set apart from dwelling? NO ☒ YES

(b) Is office readily accessible to general public by means of separate entrance? NO ☒ YES

4. DOES THE APPLICANT INTEND TO OPERATE A BUSINESS ON A FULL TIME BASIS? OR PART TIME? ☒

5. NUMBER OF SECURITY EMPLOYEES (1) (Attach list showing names of security employees)

6. AMOUNT OF BOND \$ 2 (Submit proof of bonding)

7. WHAT TYPE OF INVESTIGATIVE WORK DOES THE APPLICANT INTEND TO CARRY OUT?

INSURANCE AND OTHER (CIVIL) FRAUD: MISSING PERSONS: GENERAL ENQUIRIES.

8. LIST CHARTERED BANK, TRUST COMPANY OR OTHER FINANCIAL INSTITUTION WHERE THE APPLICANT HAS BEEN KNOWN DURING PAST 10 YEARS GIVING BRANCH AND ACCOUNT No. (Attach separate sheet if necessary)

LLoyds BANK CANADA 1090 W Georgia St., Vanc'r.B.C.

9. (a) HAS THE APPLICANT EVER APPLIED FOR A SECURITY EMPLOYEE OR BUSINESS LICENCE IN ANY PROVINCE, TERRITORY, STATE OR COUNTRY? ☒ NO YES (If YES give particulars)

(b) HAS THE APPLICANT EVER BEEN REGISTERED OR EMPLOYED AS A SECURITY EMPLOYEE IN ANY PROVINCE, TERRITORY, STATE OR COUNTRY? NO ☒ YES (If YES give particulars)

10. HAS THE APPLICANT EVER USED, OPERATED UNDER OR CARRIED ON BUSINESS UNDER ANY OTHER THAN THE NAME IN WHICH THE APPLICATION IS SUBMITTED? ☒ NO YES (If YES give particulars)

11. DOES THE APPLICANT HAVE ANY FINANCIAL OR INTEREST IN ANY OTHER SECURITY BUSINESS?

☒ NO YES (If YES give particulars)

12. HAS ANY CIVIL JUDGEMENT OF ANY COURT BEEN ISSUED AGAINST THE APPLICANT? (If YES give particulars)

13. HAS THE APPLICANT BEEN CHARGED, INDICTED OR CONVICTED OF ANY OFFENCE UNDER ANY LAW OF ANY PROVINCE, TERRITORY, STATE OR COUNTRY? (If YES give particulars)

14. (a) IS THE APPLICANT AN UNDISCHARGED BANKRUPT? (If YES give particulars)

(b) HAS THE APPLICANT BEEN INVOLVED AS AN OFFICIAL IN ANY COMPANY WHICH IS A DECLARED BANKRUPT OR IS IN THE PROCESS OF BANKRUPTCY? (If YES give particulars)

15. (a) IS APPLICANT OR ANY EMPLOYEE A MEMBER OF A POLICE FORCE (INCLUDE AUXILIARY)?

☒ NO YES (If YES name Force) (Former member R.C.M. POLICE)

(b) IS APPLICANT A COLLECTOR OR COLLECTION AGENT AS DEFINED IN THE DEBT COLLECTION ACT? NO YES

(c) IS THE APPLICANT A BAILIFF? ☒ NO YES

HAS THE APPLICANT EVER BEEN REFUSED A LICENCE UNDER THE DEBT COLLECTION ACT? ☒ NO YES

SECURITY PROGRAMS DIVISION
COMPANY 877.00
EMPLOYEE
SEP 8 1988
RECEIVED 877.00
BY

PART II — TO BE COMPLETED BY AN APPLICANT WHO WILL CARRY ON A BUSINESS AS AN INDIVIDUAL OR IN PARTNERSHIP

1. SURNAME (Mr., Mrs., Miss, Ms.)

FULL GIVEN NAMES (No initials)

BODNARUK
FORMER NAME, MAIDEN NAME, ALIASES, ETC.

FRED

2. RESIDENT ADDRESS (Street, Apt. No.)

City or Town

Province

Postal Code

V7P2G4

1330-W-22nd St., North Vanc'r. B.C.

Telephone:

980-9488

3. NATIONALITY ☒ CANADIAN

4. OCCUPATION

investigator

5. DATE OF BIRTH

OTHER (Specify)

YR. MO. DAY

6. PLACE OF BIRTH (City, Town, Village)

PROV., TERR., STATE OR COUNTRY

SASK.

CANADA

7. IF BORN OUTSIDE CANADA — ARRIVAL DATE IN CANADA

YR.

MO.

DAY

8. SOCIAL INSURANCE No.

9. DRIVER'S LICENCE No.

10. MEDICAL SERVICE I.D. No.

11. WORK PERMIT No.

&

(8, 9, 10 Complete any two)

(Attach copy)

12. PHYSICAL DESCRIPTION

13. MARKS, SCARS, TATTOOS

14. BLOOD GROUP FACTOR

HEIGHT

EYE COLOUR

HAIR COLOUR

WEIGHT

COMPLEXION

COLOUR

15. PLACE OF RESIDENCE PAST TEN YEARS — If insufficient space attach separate sheet

STREET AND No., APT. No.

CITY, TOWN, VILLAGE

From

To

1330-W-22nd St.

North Vancouver, B.C.

1972

present

16. EMPLOYMENT RECORD PAST TEN YEARS — If insufficient space attach separate sheet

EMPLOYER'S NAME AND ADDRESS

TYPE OF WORK

REASON FOR LEAVING

FROM
MO. YR.

TO
MO. YR.

INSURANCE CORP. B.C.

INVESTIGATOR

RETIRED

17. EDUCATION AND TRAINING

NAME AND ADDRESS OF LAST PRIMARY OR SECONDARY SCHOOL ATTENDED

LAST GRADE COMPLETED

YEAR

LIST ANY POST SECONDARY DEGREES OR DIPLOMAS HELD

SPECIFY OTHER TRAINING, SKILLS OR EXPERIENCE RELATIVE TO LICENCE APPLIED FOR

18. LIST THREE B.C. RESIDENTS (NOT RELATED TO OR EMPLOYED BY YOU) WHO ARE COMPETENT TO JUDGE YOUR CHARACTER AND WHO HAVE KNOWLEDGE OF YOUR COMPETENCE AND FITNESS

FULL NAME

ADDRESS

BUSINESS OR OCCUPATION

LENGTH OF TIME KNOWN

RCMP HQ. VANCOUVER

RANK SUPT.

" " "

" "

" " "

S/Sgt.

19. (a) IS THE APPLICANT AN INDIVIDUAL WHO WILL CARRY ON THE BUSINESS ALONE? ☐ NO ☒ YES

(b) IF SO, WILL ANY OTHER PERSON HAVE ANY FINANCIAL OR OTHER INTEREST IN THE OPERATION OF THE BUSINESS?

☒ NO ☐ YES (If YES give particulars)

IF REGISTERED AS PROPRIETORSHIP, ATTACH COPY OF "DECLARATION FOR PARTNERSHIP AND BUSINESS NAME" CERTIFIED BY THE REGISTRAR OF COMPANIES.

20. IF THE APPLICANT IS IN PARTNERSHIP GIVE NAMES, ADDRESSES AND BIRTHDATES OF ALL PARTNERS

N/A

IF REGISTERED AS PARTNERSHIP, ATTACH COPY OF "DECLARATION FOR PARTNERSHIP AND BUSINESS NAME" CERTIFIED BY THE REGISTRAR OF COMPANIES.

21. WILL ANY PERSON OTHER THAN THE APPLICANT HAVE ANY FINANCIAL OR OTHER INTEREST IN THE OPERATION OF THE BUSINESS? ☒ NO ☐ YES (If YES give particulars)

I HEREBY CERTIFY THAT THE INFORMATION SET OUT BY ME IN THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF, AND AUTHORIZE/CONSENT TO THE RELEASE TO THE REGISTRAR OR HIS LAWFUL AGENT ALL CREDIT OR PERSONAL INFORMATION RELATIVE TO THE APPLICATION.

25-08-88

DATE

(F. Bodnaruk)

SIGNATURE

Director

SECTION IN AR 6-2012-00936Y

Page 2

BOND NO. 71 31976

PROVINCE OF BRITISH COLUMBIA
"PRIVATE INVESTIGATIONS AND SECURITY AGENCIES ACT
(STATUTES OF BRITISH COLUMBIA 1960, CHAPTER 45)"

KNOW ALL MEN BY THESE PRESENTS that LAURENTIAN PACIFIC INSURANCE COMPANY being an insurer licensed in the PROVINCE OF BRITISH COLUMBIA having its head office in the Province of B.C. at 1140 WEST PENDER STREET, P.O. BOX 21 VANCOUVER hereinafter called the "Company", is held and firmly bound unto the Superintendent of Insurance of British Columbia. of Vancouver. in the said Province. in the penal sum of _____ of lawful money of Canada, to be paid to the said Superintendent of Insurance of British Columbia, his successors in office, and assigns, for which payment, well and truly to be made, the Company binds itself and its successors firmly by these presents.

SEALED with the Common Seal of the Company this 25TH day of AUGUST, 19 88.

WHEREAS FRED BODNARUK INVESTIGATIONS SERVICES of 1330-WEST 22ND STREET, NORTH VANCOUVER V7P 2G4 in the Province of British Columbia, hereinafter called the "Applicant" has made application for a PRIVATE INVESTIGATION Licence pursuant to the provisions of the Private Investigators and Security Agencies Act, Statutes of British Columbia, 1980, Chapter 45 and is required to furnish the said Superintendent of Insurance security pursuant to the Bonding Act and the regulations pursuant thereto by a bond or policy of an insurer in the sum of _____ Dollars (\$ _____) for the faithful, honest, and lawful conduct by the Applicant and the Applicant's employees of the Applicant's business of a PRIVATE INVESTIGATOR :

AND WHEREAS by the above-written obligation the Company, as such insurer, has, at the request of the Applicant, entered into a bond accordingly:

NOW, THE CONDITION of the above-written obligation is such that if the Applicant and the Applicant's employees shall, at all times during the term of any licence held by the Applicant under the said Act, faithfully, honestly, and lawfully conduct the Applicant's business of a PRIVATE INVESTIGATOR, and if the Company shall at all times fully pay and discharge its liability to every person imposed on the Company as such insurer under the provisions of Division 4 of the regulations pursuant to the Bonding Act in respect of damages sustained by reason of any act or omission of the Applicant or any employee of the Applicant done or occurring in or in connection with the Applicant's business of a PRIVATE INVESTIGATOR, then this obligation shall be void, but otherwise shall be and remain in full force and virtue; provided that if the Company shall at any time give one month's calendar notice in writing to the said Superintendent of Insurance and to the Applicant of its intention to terminate the obligation hereby undertaken, then this obligation and all liability on its part hereunder shall cease and determine so far as concerns any act or omission on the part of the Applicant or any employee of the Applicant subsequent to the termination of its obligation hereby undertaken, but otherwise shall remain in full force, virtue and effect in respect of any act or omission on the part of the Applicant or any employee of the Applicant from the date hereof to the date of such termination, and any such notice shall be given by letter personally delivered or by registered letter addressed to the Applicant at his last post-office address notified to the Company, and to the said Superintendent of Insurance, Vancouver, British Columbia.

The Common Seal of the Company was affixed hereto)
in the presence of)

Original to Sept 2nd)
31-8-88 8)

LAURENTIAN PACIFIC INSURANCE COMPANY

A.W. NEILSON,

ATTORNEY-IN-FACT

26-08-88.

Dear Sir:

Application for a Security Business Licence
is submitted herewith, along with the additional requirements.

- Proof of BONDING
- Recent photographs
- Fingerprinting completed by R.C.M. Police,
North Vancouver Detachment.
- Three separate certified cheques, covering
licence and administrative fees.

Yours truly,

(F. Bodnaruk)



Province of
British Columbia

Ministry of
Solicitor General

L# 35518

Security Programs Division
2881 Nanaimo Street
Victoria, British Columbia
V8Y 1X4
Phone: (604) 387-6981

APPLICATION FOR A SECURITY

BUSINESS LICENCE

OFFICE USE ONLY

TO CARRY ON BUSINESS AS:

- LOCKSMITH ALARM SERVICE* PRIVATE INVESTIGATOR
☒ SECURITY PATROL ALARM SERVICE - SALES ONLY SECURITY CONSULTANT
 ARMoured CAR SERVICE ALARM SERVICE - MONITORING ONLY
 AS AN INDIVIDUAL AS A PARTNERSHIP AS A CORPORATION
(Complete Parts I and II) (Complete Parts I and II) (Complete Parts I and III)

*ATTACH COPY OF CERTIFICATE OF COMPETENCY

LICENCE NUMBER
LICENCE ISSUE DATE
LICENCE EXPIRY DATE
LICENCE FEE \$500.00

PART I — TO BE COMPLETED BY ALL APPLICANTS

(The term "applicant" in questions 9 to 15, in the case of a corporation, includes any of those persons mentioned in PART III, Question 4)

1. NAME AND ADDRESS OF BUSINESS (Trade name under which applicant wishes to do business)

GREATER VICTORIA Security Ltd. 3121 Jackson St Victoria
 MAILING ADDRESS (If different from above)

Telephone
388-4719
Postal Code
V8X 1E2

Postal Code:

2. IF APPLICATION IS BEING MADE ON BEHALF OF A BRANCH OFFICE, COMPLETE THE FOLLOWING:

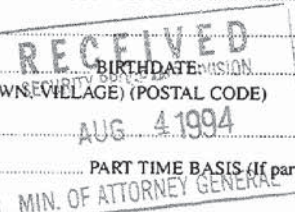
(a) NAME AND ADDRESS OF APPLICANTS HEAD OFFICE (NUMBER AND STREET) (CITY, TOWN, VILLAGE) (POSTAL CODE)

TELEPHONE No.:

(b) NAME OF MANAGER OF BRANCH OFFICE

(c) RESIDENT ADDRESS OF BRANCH MANAGER (NUMBER AND STREET) (CITY, TOWN, VILLAGE) (POSTAL CODE)

(d) BRANCH MANAGER WILL OPERATE THE BRANCH ON A FULL TIME PART TIME BASIS (If part time, state other occupation)



3. IS THE BUSINESS CONDUCTED FROM:

An office building or similar business premises? NO YES

A private residence? NO YES

(a) If yes, is office set apart from dwelling? NO YES

(b) Is office readily accessible to general public by means of separate entrance? NO YES

4. DOES THE APPLICANT INTEND TO OPERATE A BUSINESS ON A FULL TIME BASIS? OR PART TIME?

5. NUMBER OF SECURITY EMPLOYEES 2 (Attach list showing names of security employees)

6. AMOUNT OF BOND \$2 (Submit proof of bonding)

7. WHAT TYPE OF INVESTIGATIVE WORK DOES THE APPLICANT INTEND TO CARRY OUT?

Security Patrol

8. LIST CHARTERED BANK, TRUST COMPANY OR OTHER FINANCIAL INSTITUTION WHERE THE APPLICANT HAS BEEN KNOWN DURING PAST 10 YEARS GIVING BRANCH AND ACCOUNT No. (Attach separate sheet if necessary) Attached one

9. (a) HAS THE APPLICANT EVER APPLIED FOR A SECURITY EMPLOYEE OR BUSINESS LICENCE IN ANY PROVINCE, TERRITORY, STATE OR COUNTRY? NO YES (If YES give particulars) Province of British Columbia for Security employee

(b) HAS THE APPLICANT EVER BEEN REGISTERED OR EMPLOYED AS A SECURITY EMPLOYEE IN ANY PROVINCE, TERRITORY, STATE OR COUNTRY? NO YES (If YES give particulars) Province of British Columbia as Security employee with Royal Victoria Security Ltd.

10. HAS THE APPLICANT EVER USED, OPERATED UNDER OR CARRIED ON BUSINESS UNDER ANY OTHER THAN THE NAME IN WHICH THE APPLICATION IS SUBMITTED? NO YES (If YES give particulars)

11. DOES THE APPLICANT HAVE ANY FINANCIAL OR INTEREST IN ANY OTHER SECURITY BUSINESS?

NO YES (If YES give particulars)

12. HAS ANY CIVIL JUDGEMENT OF ANY COURT BEEN ISSUED AGAINST THE APPLICANT? (If YES give particulars)

13. HAS THE APPLICANT BEEN CHARGED, INDICTED OR CONVICTED OF ANY OFFENCE UNDER ANY LAW OF ANY PROVINCE, TERRITORY, STATE OR COUNTRY? (If YES give particulars)

14. (a) IS THE APPLICANT AN UNDISCHARGED BANKRUPT? (If YES give particulars)

(b) HAS THE APPLICANT BEEN INVOLVED AS AN OFFICIAL IN ANY COMPANY WHICH IS A DECLARED BANKRUPT OR IS IN THE PROCESS OF BANKRUPTCY? (If YES give particulars)

15. (a) IS APPLICANT OR ANY EMPLOYEE A MEMBER OF A POLICE FORCE (INCLUDE AUXILIARY)?

NO YES (If YES name Force)

(b) IS APPLICANT A COLLECTOR OR COLLECTION AGENT AS DEFINED IN THE DEBT COLLECTION ACT? NO YES

(c) IS THE APPLICANT A BAILIFF? NO YES

HAS THE APPLICANT EVER BEEN REFUSED A LICENCE UNDER THE DEBT COLLECTION ACT? NO YES

JAG-2013-00936
Page 5

PART II — TO BE COMPLETED BY AN APPLICANT WHO WILL CARRY ON A BUSINESS AS AN INDIVIDUAL OR IN PARTNERSHIP

1. SURNAME (Mr., Mrs., Miss, Ms.)

FULL GIVEN NAMES (No initials)

FORMER NAME, MAIDEN NAME, ALIASES, ETC.

2. RESIDENT ADDRESS (Street, Apt. No.)

City or Town

Province

Postal Code

Telephone:

3. NATIONALITY

CANADIAN

4. OCCUPATION

5. DATE OF BIRTH

OTHER (Specify)

YR. MO. DAY

6. PLACE OF BIRTH (City, Town, Village)

PROV., TERR., STATE OR COUNTRY

7. IF BORN OUTSIDE CANADA — ARRIVAL DATE IN CANADA

YR.

MO.

DAY

8. SOCIAL INSURANCE No.

9. DRIVER'S LICENCE No.

10. MEDICAL SERVICE I.D. No.

11. WORK PERMIT No.

(8, 9, 10 — Complete any two)

(Attach copy)

12. PHYSICAL DESCRIPTION

HEIGHT

EYE COLOUR

HAIR COLOUR

13. MARKS, SCARS, TATTOOS

14. BLOOD GROUP FACTOR

WEIGHT

COMPLEXION

15. PLACE OF RESIDENCE PAST TEN YEARS — If insufficient space attach separate sheet

STREET AND No., APT. No.

CITY, TOWN, VILLAGE

From

YEAR

To

16. EMPLOYMENT RECORD PAST TEN YEARS — If insufficient space attach separate sheet

EMPLOYER'S NAME AND ADDRESS

TYPE OF WORK

REASON FOR LEAVING

FROM

MO. YR.

TO

MO. YR.

17. EDUCATION AND TRAINING

NAME AND ADDRESS OF LAST PRIMARY OR SECONDARY SCHOOL ATTENDED

LAST GRADE COMPLETED

YEAR

LIST ANY POST SECONDARY DEGREES OR DIPLOMAS HELD

SPECIFY OTHER TRAINING, SKILLS OR EXPERIENCE RELATIVE TO LICENCE APPLIED FOR

18. LIST THREE B.C. RESIDENTS (NOT RELATED TO OR EMPLOYED BY YOU) WHO ARE COMPETENT TO JUDGE YOUR CHARACTER AND WHO HAVE KNOWLEDGE OF YOUR COMPETENCE AND FITNESS

FULL NAME

ADDRESS

BUSINESS OR OCCUPATION

LENGTH OF TIME KNOWN

19. (a) IS THE APPLICANT AN INDIVIDUAL WHO WILL CARRY ON THE BUSINESS ALONE? NO YES

(b) IF SO, WILL ANY OTHER PERSON HAVE ANY FINANCIAL OR OTHER INTEREST IN THE OPERATION OF THE BUSINESS?

NO YES (If YES give particulars)

IF REGISTERED AS PROPRIETORSHIP, ATTACH COPY OF "DECLARATION FOR PARTNERSHIP AND BUSINESS NAME" CERTIFIED BY THE REGISTRAR OF COMPANIES.

20. IF THE APPLICANT IS IN PARTNERSHIP GIVE NAMES, ADDRESSES AND BIRTHDATES OF ALL PARTNERS

IF REGISTERED AS PARTNERSHIP, ATTACH COPY OF "DECLARATION FOR PARTNERSHIP AND BUSINESS NAME" CERTIFIED BY THE REGISTRAR OF COMPANIES.

21. WILL ANY PERSON OTHER THAN THE APPLICANT HAVE ANY FINANCIAL OR OTHER INTEREST IN THE OPERATION OF THE BUSINESS? NO YES (If YES give particulars)

I HEREBY CERTIFY THAT THE INFORMATION SET OUT BY ME IN THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF, AND AUTHORIZE/CONSENT TO THE RELEASE TO THE REGISTRAR OR HIS LAWFUL AGENT ALL CREDIT OR PERSONAL INFORMATION RELATIVE TO THE APPLICATION.

DATE

SIGNATURE

POSITION IN APPLICANT COMPANY

Page 6

1. NAME OF CORPORATION

Greater Victoria Security Ltd.

2. THE APPLICANT IS A CORPORATION

(a) WHOSE HEAD OFFICE IS LOCATED OUTSIDE BRITISH COLUMBIA AT

(b) WHOSE BRITISH COLUMBIA HEAD OFFICE IS LOCATED AT

3. THE APPLICANT IS A CORPORATION

(a) WHOSE HEAD OFFICE IS LOCATED IN BRITISH COLUMBIA AT

3121 Jackson Street
Victoria B.C. V8X 1E2

(b) WHOSE BRANCH OFFICES ARE LOCATED AT

NOTE: ATTACH COPY OF CERTIFICATE OF INCORPORATION OR CERTIFICATE OF REGISTRATION ISSUED BY THE REGISTRAR OF COMPANIES.

4. (a) LIST NAMES, BIRTHDATES AND RESIDENT ADDRESSES OF CORPORATION DIRECTORS AND SENIOR OFFICERS AS DEFINED IN THE COMPANY ACT.

NAME IN FULL	BIRTHDATE	RESIDENT ADDRESS	Active As Security Employees		TITLE
			Yes	No	
Jagjeet Singh Dhillon	5/22	3121 Jackson Street	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Security Branch

(b) LIST NAMES, BIRTHDATES AND RESIDENT ADDRESSES OF PERSONS HOLDING SHARES OF THE CORPORATION CARRYING MORE THAN 30% OF THE VOTES FOR THE ELECTION OF DIRECTORS WHETHER SHARES ARE HELD BENEFICIALLY OR IN TRUST — IF SHARES HELD IN TRUST, INCLUDE NAMES OF PERSONS FOR WHOM THEY ARE HELD BENEFICIALLY.

NAME IN FULL	BIRTHDATE	RESIDENT ADDRESS	Active as Security Employee	
			Yes	No

5. HAS THE APPLICANT (CORPORATION) EVER BEEN CHARGED, INDICTED OR CONVICTED OF ANY CRIMINAL OFFENCE UNDER ANY LAW OF ANY PROVINCE, TERRITORY, STATE OR COUNTRY? If YES give particulars, place, date, Police Dept., offence, sentence)

I AM Jagjeet Singh Dhillon (State Position in Corporation) OF THE APPLICANT COMPANY AND CERTIFY THAT THE INFORMATION

SET OUT BY ME IN THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. I HEREBY AUTHORIZE/CONSENT TO THE RELEASE TO THE REGISTRAR OF ANY PERSON AUTHORIZED BY HIM ALL CREDIT OR PERSONAL INFORMATION RELATIVE TO THIS APPLICATION.

Aug. 05, 1994
DATEJ. Dhillon
SIGNATURECORPORATE
SEAL

Part 1 Question # 5, Number of Security Employees,

2 employees.

11 Employee's Name

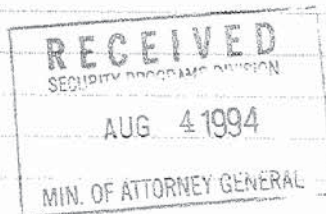
Jagjeet Singh Dhillon

I have 1 year and 7 months experience in Security.

British Columbia Security Licence #
09772 File # 30381

121

s 22



Part 1- Question # 8

Canadian Imperial Bank of Commerce

1090 Fort St.
VICTORIA, B.C.
UBV 3K4
356-4395

Account No
Account No
Account No
Account No

s 21

C.I.B.C

MAY Fair Shopping Centre
326-3147 Douglas
356 4357
Account No

s 21

Bank of Montreal
~~381~~ 81 Cook Street
VICTORIA, B.C. V8X 1B3
389-2430
Account #

s 22

Pages 10 through 11 redacted for the following reasons:

s.22



COMPANY ACT

CANADA
PROVINCE OF BRITISH COLUMBIA

CERTIFICATE OF INCORPORATION

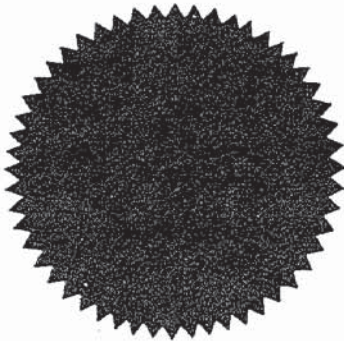
I Hereby Certify that
GREATER VICTORIA SECURITY LTD.

has this day been incorporated under the *Company Act*

Issued under my hand at Victoria, British Columbia
on July 12, 1994

A handwritten signature in black ink, reading "J. Powell".

JOHN S. POWELL
Registrar of Companies



Pages 13 through 14 redacted for the following reasons:

s.22